

NATIONAL COUNCIL OF STATE BOARDS OF NURSING, INC.

DELEGATE ASSEMBLY
BOOK OF REPORTS

Sixth Annual Convention

August 26-29, 1984

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National Council of State Boards of Nursing, Inc.

1984 Convention Schedule

Sunday, August 26

- 1:30 - 3:00 p.m.
[Salon G-I] Orientation to NCSBN
Content: Presentation by Board members and staff on the purpose and function of the NCSBN.
- 3:30 - 4:10 p.m.
[Salon G-I] Forum - Long Range Plan
Content: A panel presentation of the Long Range Planning Committee.
- 4:15 - 5:00 p.m.
[Salon G-I] Forum - Nursing Practice and Standards
Content: A presentation and discussion by the Nursing Practice and Standards Committee.
- 6:00 - 8:00 p.m.
[Salon I] Reception
An introduction to the Candidates for the Board of Directors.

Monday, August 27

- 9:00 - 12:00 noon
[Salon G-I] First Session - Delegate Assembly
- 1:30 - 3:00 p.m. Area Meetings
Area I [Salon G]
Area II [Salon H]
Area III [Portland Room]
Area IV [Eugene Room]
- 3:30 - 4:25 p.m.
[Salon G-I] Forum - Practical Nurse Test Plan
Content: A presentation and discussion by the Examination Committee. (This session will be recorded for cassette sale.)

4:30 - 5:00 p.m.
[Salon G-I]

Forum - Administration of
Examination Committee
Content: A discussion with the
Administration of Examination
Committee.

6:00 - 8:00 p.m.
[Salon I]

Reception
An introduction to the staff
of CTB/McGraw-Hill.

Tuesday, August 28

7:00 - 8:30 a.m.
[Salon D]

Breakfast Meeting
A buffet breakfast for Executive
Directors.

9:00 - 12:00 noon
[Salon G-I]

Second Session - Delegate
Assembly

1:30 - 2:30 p.m.
All sessions
repeated
3:00 - 4:00 p.m.

Interest Groups

(Each group will be
recorded once for
cassette sale)

[Salon G]

A. Entry Into Practice -
Representatives from the
Montana Board of Nursing,
Maryland Board of Nursing
and the NFLPN will present
different viewpoints on
this timely topic.

[Salon H]

B. What Does It Mean To Be A
Board Member?
An RN, LPN and Consumer
Board member will discuss
what it means to be a board
member from their different
perspectives.

[Portland Room]

- C. Ethical/Legal Issues In Nursing
A board member will share her expertise in this critical area of nursing practice.

[Medford Room]

- D. The Impaired Nurse
Representatives from two well-established impaired nurse/peer assistant programs will explain the functions of these programs.

4:00 - 5:00 p.m.
[Salon G-I]

Election

5:30 - 10:30 p.m.
(leave from
Columbia Street
side of hotel)

Boat Trip and Dinner

Wednesday, August 29

9:00 - 1:00 p.m.
[Salon G-I]

Third Session - Delegate Assembly

NATIONAL COUNCIL OF STATE BOARDS OF NURSING, INC.

BUSINESS AGENDA
of the
1984 Delegate Assembly

- I. Call to Order
- II. Report of Registration Committee
- III. Report of Rules Committee (page 7)
- IV. Adoption of Agenda
- V. Announcement of Appointments
 - Election Committee
 - Registration Committee
 - Committee to Approve Minutes
 - Time Keepers
 - Pages
- VI. Report of Committee to Approve Minutes -
1983 Annual Convention of the Delegate Assembly
- VII. Special Order of Business
 - Consideration of a proposed bylaw and standing
rule change from the Nominations Committee
(page 99 and 114)
- VIII. Nominations
 - Report of Committee on Nominations (page 9)
 - Nominations from Floor for Officers
 - Nominations for 1984-1985 Committee on
Nominations
- IX. Reports of Officers
 - President (page 23)
 - Vice President (page 25)
 - Secretary (page 27)
 - Treasurer - with audit (page 29)
 - Area Directors (pages 41-47)
 - Director at Large (page 49)

- X. Report of Board of Directors (page 51)
 - Long Range Planning Committee (page 59)
 - Disciplinary Task Force (page 67)
 - Budget FY 85 (page 69)
 - NALPN/NCSBN/NFLPN Liaison Committee (page 75)
 - Committee on Disciplinary Case Reporting
by Federal Agencies (page 77)
 - Continuing Education Project (page 79)
 - NCSBN Test Service Report (page 81)
 - NCSBN Data Center Report (page 85)
 - XI. Report of Executive Director (page 87)
 - XII. Reports of Standing Committees
 - Bylaws Committee (page 97)
 - Finance Committee (page 127)
 - Examination Committee (page 129)
 - Administration of Examination
Committee (page 151)
 - Nursing Practice and Standards
Committee (page 159)
 - XIII. Reports of Other Agencies
 - XIV. Reports of Area Meetings
 - XV. Election of Officers and Committee on Nominations
(Tuesday, August 28, 1984 - 4:00 p.m. - 5:00 p.m.)
 - XVI. Report of Election Committee
 - XVII. New Business (page 165)
 - XVIII. Report of Resolutions Committee
 - IXX. Adjournment
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NATIONAL COUNCIL OF STATE BOARDS OF NURSING, INC.

RULES FOR CONDUCT OF DELEGATE ASSEMBLY

AUGUST 26, 1984 - AUGUST 29, 1984General Procedures

1. All meetings will be called to order on time. Delegates are requested to be in their seats five minutes before the opening of each meeting.
2. Badges will be provided for delegates and alternates upon registering and must be worn at all meetings.
3. No delegate, alternate or other person in attendance shall be entitled to the floor unless he/she rises, addresses the chair and gives name and jurisdiction.
4. A time keeper will signal when allotted time has expired.
5. The order of business may be changed by a majority vote.
6. Smoking shall not be permitted in meeting rooms.

Elections

1. Election for officers and members of the Nominating Committee shall be held Tuesday, August 28, 1984 at 4:00 p.m.
2. If nominations are made from the floor, there shall be no seconding speeches.

Motions

All main motions and amendments shall be written, signed by the maker and presented to the Chair immediately after proposal.

Debate

1. No delegate shall speak more than three minutes to a motion without consent of the Delegate Assembly, granted by a majority vote.
2. No delegate shall speak more than once to the same question until all who wish to speak have done so.
3. A non-delegate may speak once to an issue for three minutes after all interested delegates have spoken. Such non-delegate may speak again, only at the Chair's invitation.

Committee

Anne G. Petersen, Chair, Utah, Area I
Phyllis T. Sheridan, Idaho, Area II

NATIONAL COUNCIL OF STATE BOARDS OF NURSING, INC.

REPORT OF THE NOMINATING COMMITTEE

July 1, 1983 - June 30, 1984

Committee Membership

The Nominating Committee membership remained as elected at the August 1983 Delegate Assembly until Maureen Boshier resigned and was replaced by Phyllis McDonald, Area I. The Committee which met in Chicago, consisted of the following members:

Phyllis McDonald, Area I
Katie Kyndely, Area II
Evelyn Philyaw Polk, Chairperson, Area III
Jean Caron, Area IV
Jean Caron, Area IV

Committee Meeting

The Nominating Committee met at the office of the National Council of State Boards of Nursing, 303 East Ohio Street, Chicago, Illinois on April 24, 1982. The Bylaws and Standing Rules of the Council concerning the Nominating Committee and the process of nomination were reviewed.

The Committee has recommended that individuals nominated from the floor fill out a Consent to Serve form for review by the Nominating Committee. The chairperson of the Nominating Committee will provide the Consent to Serve form at the August 1984 Delegate Assembly meeting.

The Committee has recommended that the National Council of State Boards of Nursing staff be charged with conducting a retrospective and ongoing study of those directors who resigned prior to completion of their term of office. The study is to include data on the numbers of Board members and staff members who resigned and the reason for their resignation.

The Nominating Committee also recommended a Bylaws change reducing the length of office of the President, Vice President, Secretary and Treasurer of the National Council of State Boards of Nursing from a two year term of office to a one year term of office.

The rationale for this change is threefold. First, many well qualified members of Boards are excluded from nomination because their term of office on their state board would terminate during their term as an officer of the NCSBN. Secondly, the intent behind a two year term of office was to enhance continuity on the board. This has not happened, and third, as a consequence, the Board of Directors, instead of the Delegate Assembly appoints new members to fill vacancies.

The Committee Chairperson had requested all Member Boards to submit names of qualified individuals to serve as officers of the National Council of State Boards of Nursing by March 15, 1984. The Committee received 33 nominations from 26 jurisdictions. The 33 nominees represented each area of the National Council of State Boards of Nursing as follows:

Area I - 3
Area II - 12
Area III - 12
Area IV - 6

Nominations or endorsements postmarked after the March 15, 1984 deadline were not reviewed by the Committee. One nomination was deleted for this reason. The Committee, therefore, considered the Consent to Serve form for each of the remaining 32 individual nominees in accordance with the Standing Rules and Bylaws of the Council. In addition, the Committee contacted an individual for information to provide an additional nominee for office and to further meet the Area requirements detailed by the Standing Rules and Bylaws. As a result of the nominations for President and Vice President, the positions of Secretary and Area I Director were opened for nomination. The Committee identified June 11, 1984 as the deadline for these nominations and for the response from the nominees already selected. The Committee met by telephone conference call on June 15, 1984 to review and select the Nominees for the positions of Secretary and Area I Director. The following ballot was developed and unanimously adopted:

President

H. Jean Bruhn, Pennsylvania, Area IV
 Board Member, Pennsylvania State Board of Nurse
 Examiners (1980 to present)
 Staff LPN, Lancaster General Hospital (1969 to
 present)
 Director at Large (1983-1984)
 Awards Committee (1983)
 Editorial Advisory Committee (1983-1984)
 Item Writers Selection Committee (1984)
 Long Range Planning Committee (1983-1984)
 LPN, Lancaster County Practical Nursing Program,
 (1969)
 Franklin and Marshall College (presently enrolled)

Statement of Interest

I am pleased and honored to have my name submitted to the Nominating Committee to be considered for nomination as President. Two years experience as Director at Large has strengthened my commitment to the goals of the National Council of State Boards of Nursing. As a member of the Long Range Planning Committee, I look forward to implementing the plans as perceived by the Council members. I have enjoyed the privilege of serving as a Board Member and would work to explore innovative methods of communication during these times of budgetary constraints.

Sharon M. Weisenbeck, Kentucky, Area III
 Executive Director, State Board of Nursing (1980
 to present)
 Secretary (1982 to present)
 ANA/NCSBN Liaison Committee (1983-1984)
 Personnel Policies Committee (1982-1983)
 Committee on Interorganizational Proposals
 (1982-1983)
 Examination Committee, Vice Chairperson
 (1981-1982)
 Examination Committee (1978-1982)
 College of St. Teresa, B.S., 1966
 University of Michigan, M.S., 1970.
 Sharon Weisenbeck, (cont'd.)

Statement of Interest

I firmly believe in the purpose of the National Council of State Boards of Nursing. If elected President, I will continue to devote my time and effort in

accomplishment of the Council's goals for the benefit of the Member Boards, and to insure the future of the Council through sound planning guided by the deliberations of the Delegate Assembly. Diversification of services to Member Boards is a challenge before us. The strength of the Council is the talent and expertise of its members and their demonstrated commitment to the promotion of safe and effective nursing services for the publics served. In serving the good of its members, the Council will continue to be effective as "...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..." (Preamble, NCSBN BYLAWS).

Vice President

Ann G. Petersen, Utah, Area I
 Executive Secretary, Utah Board of Nursing (1978 to present)
 Vice President (1982 to present)
 Director at Large (6/1982 to 9/1982)
 Consultant for Item Writers (1981-1982)
 Director, Area I (1979 to 1981)
 Holy Cross School of Nursing, Diploma, 1960
 University of Utah, B.S., 1962
 University of Utah, M.S., 1967.

Statement of Interest

I have enjoyed my term as Vice President and am eager to serve a second term. The Registered Nurse Performance Study is an extremely important study. My background in nursing service and clinical practice will enhance my ability to participate effectively on the Board of Directors during the implementation and evaluation phases of the study. I also feel the need for long term planning is critical for Council at this time. A second term will provide both continuity and experience as the Council continues to improve its services to Member Boards.

Phyllis T. Sheridan, Idaho, Area I
 Executive Director, Idaho Board of Nursing (1977 to present)
 Examination Committee, Chairperson (1978-1981)
 Director, Area I (1981 to present)
 University of Nebraska, B.S., 1947
 University of Colorado, M.S., 1956

Statement of Interest

The National Council of State Boards of Nursing has already had a significant impact on nurses and nursing by effecting major changes in the licensing examination, and by developing a disciplinary data bank. The Council is now planning for expansion of its responsibilities to include broader issues and additional services. The Board of Directors and especially the President and Vice-President must be able to conceptualize and envision the Council of the future while conducting the business of today. My four years experience as Chairman and Vice-Chairman of the Examination Committee plus three years experience as Area I Director have enabled me to acquire the breadth and depth of knowledge required for the office of Vice-President. If elected, I will serve the National Council and support its President to the best of my ability.

Secretary

Elizabeth English, New Jersey, Area IV
Board Member, New Jersey Board of Nursing, (1982)
Senior Nursing Instructor, St. Peter's Medical
Center, School of Nursing (1973 to present)
Seton Hall University, B.S.N., 1971
Rutger's University, PWP Certificate, 1973

Statement of Interest

On December 19, 1982, I attended my first New Jersey Board Meeting as a member. Since that date, I have enjoyed and marveled at the scope and depth of my learning. I believe that most professionals have a sense of the current events that effect their practice area, but I sincerely doubt that the broader aspects are within their range of knowledge. I may be addressing this view from a personal basis due to a new knowledge base that has been the result of the variety of matters the Board has dealt with in the past nineteen months. The thought process that allows that a "nurse is a nurse" has to be viewed from the perspective that this may be altered by what the individual state outlines as the duty and functions of the professional within that state as mandated by the Nurse Practice Act. As a result of this experience at the New Jersey Board of Nursing and a prior exposure to

the National Council as a member of the Resolution Committee, I believe that serving on the National Council would further enhance my scope of knowledge and therefore assist me in addressing items at the New Jersey Board. Thank you for your consideration.

Margaret C. Howard, New Jersey, Area IV
 Field Representative, New Jersey Board of Nursing
 (1981 to present)
 All Souls Hospital, Diploma, 1960
 Seton Hall University, B.S.N., 1968
 Seton Hall University, M.N., 1979

Statement of Interest

The National Council of State Boards of Nursing through the achievement of its stated objectives has made a significant impact on nursing education and nursing practice. The Council has become a major force in the development of a promotion of uniform standards for Nursing Education and Practice. It is for this reason that I would like to serve as Secretary for the Council. I believe that my background in practice and education, as well as that of staff of a Board of Nursing has provided me with a wide range of experiences and thus would enable me to carry out the responsibilities of Secretary of the National Council of State Boards of Nursing.

Director, Area I

Dorothy J. Davy, Oregon, Area I
 Executive Director, Oregon State Board of Nursing
 (1978 to present)
 Co-Chair, Convention Committee (1984)
 Limited License Committee
 Good Samaritan Hospital, School of Nursing,
 Diploma, 1957
 Lewis and Clark College, B.S.N., 1960
 Seattle City University, M.B.A., 1983

Statement of Interest

I've been associated with the National Council of State Boards of Nursing for six years and have enjoyed working with the people I've met, sharing ideas and gaining new thoughts. I would like to have the opportunity of working more closely with the people in Area I on issues of vital concern to all of us. This would enable me to take some possible solutions of our problems to the National Council of State Boards for their consideration. A few of the issues I feel need considering are:

1. Continue to study the impact of the National Council Licensure Examination as it relates to the registered nurse and the licensed practical nurse.
2. Endorsement process from state to state.
3. Continue funding of the National Council of State Boards of Nursing, Inc.

Shirley Rennie, Arizona, Area I
Executive Secretary, Arizona State Board of Nursing
(1981 to present)
Bylaws Committee (1984)
Lutheran Hospital of Milwaukee, Diploma, 1951
University of Wisconsin, B.S.N., 1967
Marquette University, M.S.N., 1969

Statement of Interest

Having attended two Delegate Assembly meetings of the NCSBN and several Area I meetings, I am ready to become more directly involved in the organization. As a current member of the Bylaws Committee, I feel I am knowledgeable about the organization and feel that I can make a contribution to furthering its goals as well as keeping the Arizona Board of Nursing informed by serving as Area I Director. I have had considerable experience in organizing activities and serving as an officer in other organizations.

Director, Area IIMarilyn Meinert, Missouri, Area II

Board Member, Missouri State Board of Nursing (1982)

Director, School of Nursing, Methodist Medical
Center (1973 to present)

St. Joseph School of Nursing, 1957

Missouri Western State College, B.S., 1972

University of Kansas, M.S., 1973

Statement of Interest

As a member of Missouri State Board of Nursing, I see a definite need for involvement of each individual State Board to accomplish the objectives of the National Council. This involvement can be much more intense if a member of the Missouri Board is elected to office. It is my belief that the National Council has an important role in the profession of nursing in that it serves as a center for coordination of the testing mechanism for licensure. Nursing has long surpassed other professions in enhancing the mobility of practicing nurses from state to state. It seems we must make an effort to retain this activity on a national level providing means to continue this activity, along with collecting, analyzing and disseminating data and statistics relating to nurse licensure.

Rosa Lee Weinert, Ohio, Area IIExecutive Secretary, Ohio Board of Nursing Educa-
tion and Nurse Registration (1981 to present)

Good Samaritan Hospital School of Nursing

Ohio State University, B.S.

Ohio State University, M.S.

Wayne State University, Post-Masters

Statement of Interest

It was with pleasure that I agreed to have my name submitted to the Nominating Committee to be considered for nomination. I would be honored to serve on the National Council of State Boards of Nursing if elected. In my association with the Council, I have been most impressed with the accommodating attitude and collective expertise of the staff as well as the progressive leadership of the Board of Directors. I would like to be an integral part of this dynamic team and believe I have a contribution to make to its deliberations. Being employed by the Board of one of the larger states, I feel that our input into decisions made by the Council is both vital and useful.

Director, Area III

Ruth L. Elliott, Tennessee, Area III
 Executive Director, Tennessee State Board of
 Nursing (1980 to present)
 Nursing Practice and Standards Committee
 (1980-1983)
 Nominating Committee, Chairperson (1981-1982 and
 1982-1983)
 Long Range Planning Committee, Chairperson,
 (1983 to present)
 Northern Illinois University, B.S.N., 1973
 Northern Illinois University, M.S.N., 1977
 Vanderbilt University, Doctoral Candidate

Statement of Interest

I strongly support the purpose of the National Council of State Boards of Nursing. Since its inception, the Council has provided effective services for the public health, safety, and welfare. The Council furthermore continues to demonstrate creative and innovative leadership to assist Member Boards carry out their statutory responsibilities. The changing health care delivery system presents new and exciting challenges to state boards of nursing. I would like to be part of the leadership charting the future course for the National Council including programs which increase responsiveness to Member Boards. It would be both an honor and a privilege to contribute my talents as Area III Director.

Jean B. Mann, Alabama, Area III
 President, Alabama Board of Nursing, 1982
 Associate Dean, Troy State University,
 ASN Program (1975 to present)
 Mobile Infirmary, 1959
 University of Alabama, B.S.N., 1961
 University of Alabama, M.S.N., 1963
 Troy State University, Ed.S., 1978
 Auburn University, Ed.D., 1982

Statement of Interest

My interest in being elected to the position of Area III Director of the National Council of State Boards of Nursing includes: (1) opportunity to participate in the decision making process essential to the regulation of nursing practice; (2) service to my state and region; (3) working with and acting as liaison between the national office and Area III on concerns of licensure, nursing, and laws regulating nursing; (4) professional development; and, (5) sheer enjoyment of working with a group of people who have shown themselves to be decision makers, and that they accept the responsibility of their office and are accountable for their actions.

Director, Area IV

Joanne Griffin, New York, Area IV
Board member, New York State Board for Nursing
(1978)
Associate Professor, New York University (1966
to present)
Mt. St. Vincent College, B.S., 1953
New York University, M.A., 1960
New York University, Ph.D., 1975

Statement of Interest

Cooperation and collaboration among the various jurisdictions which are charged with the legal regulation of nursing services is essential to strengthen our profession and improve the quality of care available to those who need nursing. I believe National Council of State Boards of Nursing, Inc. is the appropriate organization to enhance scholarship, sponsor research and provide leadership within this vital health care discipline of which I am proud to be a member. My particular concern has been with regulatory problems as they impact on colleagues who have become chemically addicted; I hope we can find effective ways to help them, and to conserve them as potentially useful members of the profession.

Lois O'Shea, Delaware, Area IV
 Executive Director, Delaware Board of Nursing
 (1978 to present)
 Administration of Examination Committee (1979-1981)
 Finance Committee (1981-1982)
 Director, Area IV (1982-1984)
 Fairview Hospital School of Nursing (1947)
 West Chester State University, B.S., (1972)
 Washington College, M.A., (1976)

Statement of Interest

As I was being considered for appointment to the position of Executive Director of the Delaware Board of Nursing in July 1978, I attended the ANA Convention in Hawaii in June 1978, and I attended the historical forums where newly elected officers of the Council spoke to the ANA membership about the newly formed independent organization. At that time, it was an exciting experience listening to plans for the future as outlined by Mildred Schmidt and Marianna Bacigalupo. Now I have been a part of the Council for the past 5-6 years serving on committees and on the Board of Directors. My interest and faith in the Council has not waned. I look forward, if elected, to contribute to the best of my ability to the good of the Council and its Member Boards during the next two years.

Director at Large

June D. Cooper, Maryland, Area IV
 Board Member, Maryland Board of Examiners of
 Nurses (1983)
 Hurwitz House, Charge Nurse, LPN, (1983 to
 present)
 Antioch College, B.A., 1974
 Antioch University, M.A., 1980

Statement of Interest

I am interested in serving as Director at Large because I feel I can be an asset to the National Council of State Boards of Nursing. The vast knowledge I have acquired as a member of the Maryland State Board of Examiners of Nurses and my educational background will enable me to function as a contributing member of the National Council of State Boards of Nursing Board.

O. Patricia Diamond, Kansas, Area II
 President, Kansas Board of Nursing (1979)
 Hutchinson Hospital Corporation, Vice President,
 Nursing, R.N. (1976 to present)
 Examination Committee (1981 to present)
 Michael Reese Hospital, School of Nursing, 1952
 University of Illinois, B.S.N., 1954
 Wichita State University, M.S., 1974

Statement of Interest

Throughout my nursing career in both education and service, I have been involved in professional organizations and an active participant in nursing and health care issues. As a member of the Board of Nursing and NCSBN Examination Committee, I have become increasingly aware of the impact that the NCSBN has on the practice of nursing in relation to the protection of the public. I am interested in involvement at the national level for input in the planning and development of activities of the National Council and to increase my accountability at the state level.

Renatta S. Loquist, South Carolina, Area III
 Executive Director, State Board of Nursing for
 South Carolina (1983 to present)
 Examination Committee (1979-1981 and 1983 to
 present)
 Item Writer Consultant (1982)
 University of South Carolina, B.S.N., 1967
 University of South Carolina, M.N., 1982

Statement of Interest

The next several years will be exciting and stimulating times for the National Council of State Boards of Nursing as the nation continues to reshape and evaluate the health care delivery system. As the single most important organization to state boards of nursing, the National Council of State Boards of Nursing must accept the challenge of dealing with complex licensure issues. I believe my membership on the Examination Committee along with experience in competency development and statewide master planning for nursing in South Carolina, have provided me with the qualifications to effectively serve the Board and its constituents, and I would welcome the opportunity to do so.

The following Committee members expressed appreciation to the Delegate Assembly for the opportunity to serve on the Nominating Committee of the National Council of State Boards of Nursing:

Area I - Phyllis McDonald
Area II - Katie Kyndely
Area III - Evelyn Philyaw Polk, Chairperson
Area IV - Jean Caron

NATIONAL COUNCIL OF STATE BOARDS OF NURSING, INC.

Report of the President
1984

As you read the reports of the officers, Board of Directors, committees and Executive Director on subsequent pages you will see that the National Council has again moved forward. Through the excellent work of many, we have been able to develop for consideration by the Delegate Assembly a mission statement of the National Council and a test plan for the NCLEX-PN. During the year the Board considered and rejected the idea of buying a building at this time and initiated a committee to focus attention on the disciplinary function of Member Boards.

Probably the most far reaching decision made by the Board of Directors was the awarding of a 24-month contract to The American College Testing Program (ACT), Iowa City, Iowa, for the purposes of conducting a study. The study is designed to describe nursing practice (i.e., develop a job classification of the nursing profession) and to perform an analysis and role delineation of the entry-level performance of registered nurses. The results will be used as base line data for future studies and to reassess the validity of the NCLEX-RN. It is noteworthy yet not surprising that the National Council has undertaken this major activity. We must continually ensure that our examinations are job-related, and we must obtain sound data upon which to make future decisions.

During the past year we began a different but very effective liaison between the National Council and the American Nurses' Association (ANA) and between the National Council and the National League for Nursing (NLN). The President and Executive Director met with their counterparts in each organization for the purpose of discussing mutual concerns. When we discussed a topic on which each organization had a committee or council, representatives of that body also participated. This approach has proved very effective, efficient and flexible.

As I complete my term as President and six years on the Board of Directors my heart is full of thanks. The opportunity to help in the development of a national organization and to see it fly into the future does not come to many. To all, past and present, who helped me play a part in the National Council, I express my sincere gratitude.

See you in Portland!

Joyce M. Schowalter
President

NATIONAL COUNCIL OF STATE BOARDS OF NURSING, INC.

REPORT OF THE VICE PRESIDENT

During this past year I have attended all scheduled meetings of the Board of Directors and participated in all telephone conference calls.

Other activities as a member of the Board of Directors have included:

Chairing the Committee on Disciplinary Case Reporting by Federal Agencies.

Attending one meeting and participating in one conference call of the Coordinating Committee.

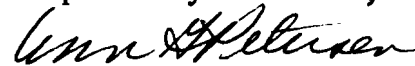
Attended the joint workshop of the Board of Directors and the Examination Committee on the Practical Nurse Test Plan.

It has been a busy, productive year. The process of developing the RFP and then reviewing the proposals submitted was exciting. The excellent support of other members of the Board of Directors, Committee members and especially our staff has been invaluable.

I have enjoyed my term as Vice President and hope my participation in Council activities has been appropriate and effective.

I am looking forward to seeing you all in Portland and welcoming you to the West!

Respectfully Submitted,



Ann G. Petersen
Vice President

AGP/lhk

NATIONAL COUNCIL OF STATE BOARDS OF NURSING, INC.

Report of the Secretary

During the past year, all meetings and the telephone conference call of the Board of Directors were attended. The minutes of the scheduled meetings were reviewed prior to distribution to members of the Board of Directors, and minutes of the telephone conference call were written. A summary of major actions for each meeting was reviewed prior to distribution to Member Boards.

Two mail votes by the members of the Board of Directors were conducted to fill a vacancy on the Nominating Committee, and to make a change in bank.

In the intervening time frame between the resignation of Anna Kuba and the appointment of a new Area III Director, as requested by the President, preliminary planning for the Area III meeting scheduled for March 8 and 9, 1984 was completed. The meeting was held in Austin, Texas, and on behalf of Mary Shilling, the newly appointed Area Director, the meeting was chaired and a report presented.

Other activities during the year included participation in a workshop on the legal and psychometric aspects of developing licensure examination test plans presented for the members of the Board of Directors, Examination Committee, and Council staff, and completion of the duties of the Secretary and assignments given by the Board.

Appreciation is expressed to the members of the Board of Directors, and to the staff of the Council for their excellent work and assistance to further the purposes of the Council. It has been both a privilege and a pleasure to be Secretary, and I thank the members of the Delegate Assembly for this opportunity to serve the National Council of State Boards of Nursing, Inc.

Submitted by,

Sharon M. Weisenbeck
Secretary

NATIONAL COUNCIL OF STATE BOARDS OF NURSING, INC.

Treasurer's Report to 1984 Delegate Assembly
August 26, 1983 - August 29, 1984

As Treasurer of the National Council of State Boards of Nursing, Inc., I have participated in all regular meetings of the Board of Directors, all conference calls, and all other meetings of organizational committees of which I am a member.

Quarterly expenditure reports, a quarterly statement of cash assets and investments and reports from the Finance Committee have been provided to the Board of Directors. Expenditures for Fiscal Year 1984 have remained within budgeted limits. Overall revenues have exceeded expectations by a small percentage due to increased investments and return on those investments.

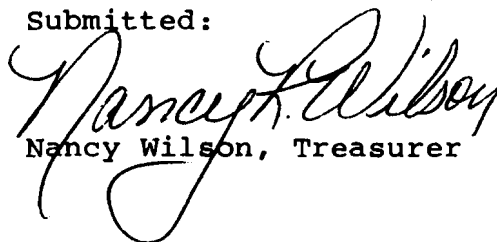
The proposed annual budget for Fiscal Year 1985 was forwarded to the Board of Directors in April and reflects expenditure levels adequate to support special projects approved by the Board of Directors.

The Auditor's Report for Fiscal Year 1983 is attached.

Recommendation: That the Auditor's Report for Fiscal Year 1983 be approved as presented.

A special thanks to the Delegate Assembly for providing me the opportunity to serve as Treasurer for the Council and to the Board of Directors and Council staff for their assistance and support during this past year. It has been a pleasure, in addition to lots of hard work.

Submitted:



Nancy Wilson, Treasurer

FINANCIAL STATEMENTS AND AUDITORS' REPORT
NATIONAL COUNCIL OF STATE BOARDS OF NURSING, INC.
June 30, 1983

Board of Directors
National Council of State Boards of Nursing, Inc.

We have examined the balance sheet of the National Council of State Boards of Nursing, Inc. (a not-for-profit, Wisconsin corporation) as of June 30, 1983, and the related statements of revenues and expenses and changes in fund equity and changes in financial position for the year then ended. Our examination was made in accordance with generally accepted auditing standards and, accordingly, included such tests of the accounting records and such other auditing procedures as we considered necessary in the circumstances.

In our opinion, the financial statements referred to above present fairly the financial position of the National Council of State Boards of Nursing, Inc. at June 30, 1983, and the results of its operations and changes in fund equity and changes in its financial position for the year then ended, in conformity with generally accepted accounting principles applied on a basis consistent with that of the preceding year.

Alexander Grant & Company

Chicago, Illinois
August 5, 1983

National Council of State Boards of Nursing, Inc.

BALANCE SHEET

June 30, 1983

ASSETS

Cash and cash equivalents		
Continental and Crocker National Bank	\$ 24,126	
Continental Money market	152,982	
Crocker National Bank Money market	<u>248,585</u>	\$ 425,693
Investments - At cost (market value \$1,965,430)		
Bonds and Treasury Bills	789,493	
Commercial Paper	<u>1,185,000</u>	1,974,493
Accounts receivable		
Royalties	90,445	
Interest and other	<u>6,549</u>	96,994
Inventories (note A4)		4,950
Property and equipment - at cost (note A2)		
Furniture and Fixtures	30,025	
Equipment	<u>137,960</u>	
	167,985	
Less accumulated depreciation	<u>(25,252)</u>	<u>142,733</u>
		\$2,644,863
		=====

LIABILITIES AND FUND EQUITY

Accounts payable		\$ 532,071
Accrued expenses and withheld taxes		24,615
Deferred revenue		
Examination fees collected in advance (net of prepaid processing fees of \$156,483)	948,531	
Contract and convention fees	<u>49,869</u>	998,400
Commitments (notes C and D)		-
Fund equity		
Unrestricted	1,079,103	
Board designated - test security fund	<u>10,674</u>	<u>1,089,777</u>
		\$2,644,863
		=====

The accompanying notes are an integral part of this statement.

National Council of State Boards of Nursing, Inc.

STATEMENT OF REVENUES AND EXPENSES

Year ended June 30, 1983

	<u>Actual</u>	<u>Annual Budget</u>
Revenue		
Examination fees	\$1,817,365	\$1,711,979
Less: cost of application and processing	<u>1,172,652</u>	<u>1,255,939</u>
Net examination fees	644,713	456,040
Contract fees (dues)	160,425	160,425
Test Royalties	215,851	183,000
Publication Royalties	110,894	20,000
Interest	105,524	184,407
Convention fees	502	10,000
Honorariums and other	<u>1,210</u>	<u>2,000</u>
Total Revenue	1,239,119	1,015,872
Program expenses		
Test security and administration		
Security and administrative com- mittee - travel and expenses	14,880	5,000
Maintenance of security	(1,450)	5,000
Test standards and practice		
Standards committee - travel and expenses	10,409	22,707
Convention costs (inclusive of Board travel and legal)	3,863	10,000
Research	48,202	56,184
Publications	6,371	14,000
Disciplinary Data Bank	7,653	12,000
Ad hoc committee - travel and expenses	7,493	5,000
Area meetings	<u>1,116</u>	<u>2,000</u>
Total program expenses	98,537	131,891
Organizational		
Salaries and benefits - staff	224,428	218,124
Travel and expenses		
Staff - general	9,253	10,000
Board of Directors	20,403	25,000
Organizational committees	2,622	6,000
Insurance	2,951	3,500
Printing and supplies	7,566	10,000
Professional services		
Accounting	7,792	9,000
Legal	34,133	35,000
Other professional	7,952	10,000
Library subscriptions, memberships	1,624	1,500
Sundry	<u>47</u>	<u>-</u>
Total organization expenses	318,771	328,124

National Council of State Boards of Nursing, Inc.

STATEMENT OF REVENUES AND EXPENSES - CONTINUED

Year ended June 30, 1983

	<u>Actual</u>	<u>Annual Budget</u>
Occupancy		
Rent and utilities	\$ 42,360	\$ 47,400
Telephone	10,488	10,000
Postage	6,415	19,396
Equipment costs		
Lease and maintenance	10,022	13,000
Depreciation	<u>17,146</u>	<u>10,500</u>
Total occupancy expenses	<u>86,431</u>	<u>100,296</u>
 Total expenses	 <u>503,739</u>	 <u>560,311</u>
 EXCESS OF REVENUE OVER EXPENSES	 \$ 735,380 =====	 \$455,561 =====

The accompanying notes are an integral part of this statement.

National Council of State Boards of Nursing, Inc.

STATEMENT OF CHANGES IN FUND EQUITY

Year ended June 30, 1983

	<u>Unrestricted</u>	<u>Board designated - test security fund</u>	<u>Total</u>
Fund equity at July 1, 1982	\$ 350,173	\$ 4,224	\$ 354,397
Additional designation for security maintenance	(5,000)	5,000	-
Excess of revenue (expenses) for the year ended	<u>733,930</u>	<u>1,450</u>	<u>735,380</u>
Fund equity at June 30, 1983	<u>\$1,079,103</u> =====	<u>\$10,674</u> =====	<u>\$1,089,777</u> =====

The accompanying notes are an integral part of this statement.

National Council of State Boards of Nursing, Inc.

STATEMENT OF CHANGES IN FINANCIAL POSITION

Year ended June 30, 1983

Sources of cash		
Excess of revenues over expenses		\$ 735,380
Add (deduct) items not using (providing) cash		
Depreciation of property and equipment	\$ 17,146	
Increase in receivables	(73,119)	
Increase in inventories	(2,489)	
Increase in deferred revenues	933,009	
Increase in accounts payable and accrued expenses	<u>502,693</u>	<u>1,377,240</u>
Cash provided by operations		2,112,620
Applications of cash		
Purchase of investments	1,974,493	
Additions to property and equipment	<u>77,037</u>	<u>2,051,530</u>
Increase in cash		61,090
Cash and cash equivalents - beginning of the year		<u>364,603</u>
Cash and cash equivalents - end of the year		\$ 425,693 =====

National Council of State Boards of Nursing, Inc.

NOTES TO FINANCIAL STATEMENTS

June 30, 1983

NOTE A - SUMMARY OF ACCOUNTING POLICIES

A summary of the Council's significant accounting policies consistently applied in the preparation of the accompanying financial statements follows.

1. Accounting Method

The Council prepares its financial statements on the accrual basis of accounting. Examination fees collected and processing costs incurred in advance are deferred and recognized at the date of the examination.

2. Depreciation

Depreciation is provided for in amounts sufficient to relate the cost of depreciable equipment and leasehold improvements to operations over their estimated service lives on the straight-line method.

3. Services of Volunteers

Officers, committee members, the Board of Directors, and various other non-staff associates assist the Council in various program and administrative functions without remuneration. No value has been ascribed for such volunteer services because of the impracticality of their measurement.

4. Inventories

Inventories, primarily publications, are stated at the lower of actual cost or market. Cost is determined principally by specific identification.

NOTE B - PURPOSE AND TAX STATUS

The Council is a nonprofit corporation organized under Chapter 180 of the Wisconsin Statutes. Its purpose is to serve as a charitable and educational organization through which Boards of Nursing act on matters of common interest and concern affecting the public health, safety and welfare including the development of licensing examinations and standards in nursing. It is exempt from Federal income tax under Section 501(c)(3) of the Internal Revenue Code as indicated in a letter dated July 24, 1980. Therefore, the accompanying financial statements reflect no provision for income taxes.

National Council of State Boards of Nursing, Inc.

NOTES TO FINANCIAL STATEMENTS - CONTINUED

June 30, 1983

NOTE C - COMPUTER DESIGN COSTS

On January 7, 1982 the Council entered into an agreement for the design of a computerized system for processing test applications. In connection with this system, the agreement provides for the test service company to process the test applications with a minimum annual fee of \$250,000 through July 1985.

NOTE D - LEASE COMMITMENT

The Council has entered into a lease agreement for office facilities in Chicago, Illinois. The lease expires on August 30, 1984 and calls for monthly payments of \$2,689, adjusted annually based on the change in the Consumer Price Index. In addition to the basic rental, the Council is required to pay for electricity. This amount may also be adjusted annually to account for changes in usage and/or increased rates.

The Council's future minimum rental payments (including the electricity charge) required under this long-term lease are as follows:

Period ending June 30, 1984	\$33,708
July and August 1984	<u>5,618</u>
Total minimum payments required	\$39,326 =====

NATIONAL COUNCIL OF STATE BOARDS OF NURSING, INC.

Report of
Area I Director

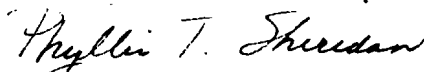
One meeting of Area I Boards of Nursing was held in Scottsdale, Arizona, on March 30, 1984, with representatives in attendance from all Area I Boards except Alaska, Hawaii, Guam, and the California Registered Nurse Board. Representatives from the National Council of State Boards of Nursing, CTB/McGraw-Hill, and the California Licensed Vocational Nurse Board were also present.

In addition to a presentation by Louise Sanders on the new Practical Nurse Test Plan, agenda topics included the following:

Examination Procedures for the Handicapped
Additional services the National Council of State Boards
of Nursing might provide to Member Boards
Licensing of Foreign Nurses who are unable to obtain
credentials from their country of education
Efforts in the western states to implement two levels of
entry to nursing practice

As Area I Director, I conducted the Area meeting, and have attended all scheduled Board of Directors' meetings, participated in telephone conference calls, and served on the newly formed Task Force for Disciplinary Procedures.

Submitted by:



PHYLLIS T. SHERIDAN, Idaho
Area I Director

NATIONAL COUNCIL OF STATE BOARDS OF NURSING, INC.

REPORT OF AREA II DIRECTOR

As Area II Director, I have attended all scheduled Board of Directors meetings. I also chaired the Disciplinary Task Force which met once this year and participated in activities of the Publications Advisory Panel.

One meeting of Area II was held on May 7 & 8, 1984 in Charleston, West Virginia, with 28 Board and staff members in attendance representing 13 states.

During that meeting, Louise Sanders, Chairperson, Examination Committee, presented the proposed new PN Test Plan. Ruth Elliott, Chairperson, Long Range Planning Committee presented the recent work of that group. There was considerable discussion after each presentation. Area II members complimented the committees on their extensive work.

During the discussion of the PN Test Plan, it was agreed that Member Boards whose nurse practice acts prohibited certain nursing activities on the proposed plan, would identify those activities, in writing, and forward them to the Examination Committee as soon as possible.

A discussion on discipline issues resulted in a recommendation that the NCSBN serve as a clearinghouse on disciplinary issues. This is an expansion of the role NCSBN now plays in compiling and disseminating data on Boards' disciplinary actions.

I have appreciated the opportunity to serve as Area II Director this past year.

Vivien DeBack

NATIONAL COUNCIL OF STATE BOARDS OF NURSING, INC.

Report of

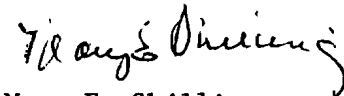
Area III Director

Upon the resignation of Anna Kuba, I was appointed Area Director by the Board in March, 1984. I attended the Board of Directors meeting in May.

Area III met on March 8 & 9, 1984, in Austin, Texas. All jurisdictions were represented except the Louisiana and Georgia Practical Nursing Boards. In the absence of the Area Director, Sharon Weisenbeck presided. Also attending were Eileen McQuaid Dvorak and Marsha Kelly of NCSBN. Major topics of discussion were:

- . The proposed study of nursing practice
- . Task force on disciplinary action
- . Activities of Long Range Planning Committee
- . Report from Examination Committee
- . Selection of item writers
- . Services of the Council to Member Boards
- . Improved nurse programs
- . Continued competence

Submitted by:



Mary E. Shilling
Area III Director

NATIONAL COUNCIL OF STATE BOARDS OF NURSING, INC.

Report of
Area IV Director

As Area IV Director I have attended two of the three meetings of the Board of Directors, participated in all telephone conference calls and presided at the Area IV meeting on May 3-4, 1984. I have served on the following committees: Item Writer Selection & NALPN/NCSBN/NFLPN Liaison meeting, attending the NALPN/NCSBN/NFLPN Liaison meeting on January 23, 1984 in Chicago, Illinois.

Area IV held its regular meeting on May 3-4, 1984 in Portsmouth, New Hampshire. Fifty (50) board members, staff and guests were present from the eleven (11) jurisdictions. We were pleased to have Dr. Eileen McQuaid Dvorak, NCSBN Executive Director, and Louise Sanders, Chairperson of the Examination Committee present for presentations to the Board representatives.

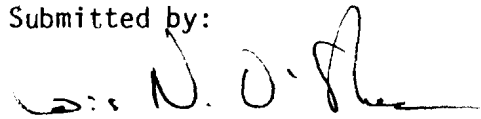
Items presented for general information, discussion and action taken included:

1. Problem of dual licensure: licensees who hold R.N. and L.P.N. licenses
2. Minimal number of hours of practice within the past five years
3. What are states doing to maintain continuing competency?
4. Endorsement between states on ARNP
5. Nursing diagnosis
6. Impaired nurse
7. Listing candidate nursing examination scores under the individual school regardless of what state they took the examination.
8. State-by-state update
9. What are other states doing in relation to discipline when there is violation of standards of nursing practice?
10. What are other states doing in relationship to issuing position statements on nursing practice?
11. Administering medications in community based homes
12. Analysis of data regarding NCLEX failure profiles
13. Endorsements
14. Commonalities of licensure requirements
Action: The delegates adopted a motion to establish a task force to review the commonalities of licensure requirements and prepare a report for the 1985 Area IV meeting.

15. Delegate Assembly meeting time
Action: The delegates adopted a motion to request the Board of Directors to consider the month of October for the Delegate Assembly Meeting beginning in 1990.
16. Puerto Rican Nurses & NCLEX
17. NCSBN's Long-Range Planning Committee
18. Update on activities of NCSBN
19. Practical Nurse Test Development
20. Diversification of NCSBN's services

It has been a privilege and pleasure to have served as Area IV Director for these past two years.

Submitted by:



Lois N. O'Shea
Delaware
Area IV Director

NATIONAL COUNCIL OF STATE BOARDS OF NURSING, INC.

REPORT OF THE DIRECTOR AT LARGE

I have participated in all Board meetings and conference calls.

Other activities as a member of the Board of Directors have included:

Item Writer Selection Committee

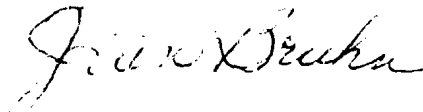
Editorial Advisory Board

Long Range Planning Committee

I can only describe my experiences as a Council Member as a positive one. I would encourage each member to submit their name and offer their time to serve on a Committee or run for office. Nurses have a history of debating major issues facing the nursing profession rather than pulling together. It is with pleasure that I recognized the ability and honor of working with Members toward a common goal.

It has been a privilege to serve the National Council of State Boards of Nursing. Appreciation is expressed to each member of the staff for their assistance and hard work, and to each Committee Member for their active participation.

Respectfully submitted,



Jean Bruhn, Pennsylvania,
Area IV, Director-at-Large

NATIONAL COUNCIL OF STATE BOARDS OF NURSING, INC.

Report of the Board of Directors

The Board of Directors of the National Council of State Boards of Nursing, Inc. met on the following dates:

August 26, 1983	February 22, 1984 (Conference Call)
December 12-14, 1983	April 29-May 2, 1984

The preconvention meeting of the Board is scheduled for August 24-26, 1984 in Portland, Oregon.

Recommendations submitted by the Board of Directors for consideration by the Delegate Assembly are included at the end of this report.

The Board adopted the following specific activities for the 1983-84 year:

- Conduct an educational seminar for the Board of Directors and the Examination Committee regarding the legal and psychometric aspects of developing a licensure examination test plan.
- Implement a long range planning process for the National Council for purposes of providing goals and objectives at stated intervals.
- Develop a strategic plan for the National Council for purposes of defining diversification of services to Member Boards.
- Develop educational materials on roles and responsibilities of members of board of directors of not-for-profit organizations for purposes of orienting new members annually to role and responsibilities.
- Develop educational materials on the National Council for use by Member Boards in interpreting all services and activities to their publics.
- Conduct an educational seminar on disciplinary matters for Member Boards.
- Explore liaison with other North American countries of Canada and Mexico for purposes of maximizing beneficial resources and intercountry endorsement of nurses' licensure.

The following Board committees and panel assisted the work of the Board on behalf of the Council:

Committee on Disciplinary Case Reporting by Federal Agencies
 Advisory Committee for the Diagnostic Assessment Test
 Publications Advisory Panel
 Long Range Planning Committee
 Coordinating Committee
 Disciplinary Task Force
 Item Writer Selection Committee
 Convention Program Committee
 ANA/NCSBN Liaison
 NALPN/NCSBN/NFLPN Liaison

Appointments to continue NCSBN representation and to fill vacancies were made as follows:

Area III Director - Mary Shilling, Board Member, South Carolina, Area III, to replace Anna Kuba, who resigned.

Nominating Committee - Phyllis McDonald, Staff Member, Montana, Area I, to replace Maureen L. Boshier, who resigned.

Trustee-at-Large to the Board of Trustees, Commission on Graduates of Foreign Nursing Schools (CGFNS) - Helen P. Keefe, Staff Member, Florida, Area III.

Nursing Profession Team Member of the Joint W.K. Kellogg - Pennsylvania State University Continuing Professional Education Development Project - Mary A. Romelfanger, Staff Member, Kentucky, Area III.

Activities of the Board of Directors included the following:

Received reports at each meeting from the officers, staff, test service, data center, Board and standing committees, and took action as appropriate.

Revised the NCSBN Board Standing Rule regarding Areas by adding a new Member Board, American Samoa, to Area I.

Selected the top two bidders for negotiations regarding the Nursing Practice Performance Study, and appointed Joyce M. Schowalter, President; Eileen McQuaid Dvorak, Executive Director; and Thomas L. O'Brien, NCSBN Legal Counsel, as the NCSBN negotiating team. The team was charged with negotiating the contract for the study of nursing practice and job analysis and role delineation of entry level performance of registered nurses. The contract was to be awarded by July 1, 1984.

Approved the plans for implementation of the provisions of the new contract with CTB/McGraw-Hill as the test service.

Appointed item writers and alternate item writers for the National Council Licensure Examinations for Registered Nurses and for Practical Nurses.

Revised qualifications for eligibility for appointment as item writers for NCLEX.

Amended the statement on the Procedure for Responding to the Needs of Handicapped Candidates; adopted the statement as a NCSBN Board Standing Rule; and referred the statement to the Bylaws Committee for consideration as a NCSBN Standing Rule.

Authorized the revision of the Registered Nurse and Practical Nurse Study Guides for the National Council Licensure Examinations for completion by January 1985.

Approved the policy and fees for early handscoring of examinations for licensure.

Directed staff to revise the Disaster Plan Policies and Procedures relating to licensure examination booklets, and directed that a mail ballot be sent to the Board for action on the Disaster Plan revisions.

Directed that a nursing education program code system be instituted and maintained by NCSBN.

Approved a fee structure for royalties to NCSBN as negotiated between CTB/McGraw-Hill and the Council for the NCLEX Summary Profiles Service.

Received the REGISTERED NURSE PERFORMANCE UPDATE STUDY completed by Susan Holmes, PhD, and Louise Sanders, PhD, dated January 1984, and directed that the Study be disseminated.

Established a Board Standing Rule to release data to the National League for Nursing for each administration of the National Council Licensure Examination for Registered Nurses, and directed that a fee be charged for this service after January 1985.

Received recommendations submitted by the Administration of the Examination Committee on investigation of security violations, and took action as appropriate.

Reviewed proposed Security Measures for the Test Service, and made recommendations to the Administration of Examination Committee.

Approved the dissemination of the Disciplinary Data Reports and related reports to certifying organizations whose certifying

activity is required by states as a condition for practice, upon request of that organization for the Disciplinary Data Reports, and with the consent of Member Boards; and approved a subscription fee for the service.

Directed that the survey prepared by the Disciplinary Task Force be sent to Member Boards, and approved the offering of a workshop by the Task Force in Fiscal Year 1985.

Monitored the status of contracts with Member Boards, and the payment of membership/contract fees.

Directed that cash assets and reserves be invested in instruments that provide for secure investment at the highest possible yield, and that the respective Board Standing Rule be revised to reflect this change.

Directed the Finance Committee to prepare a report setting a standard percent figure for overhead cost for NCSBN, and that this figure be used for all proposals brought before the Board relative to establishing fees for services.

Postponed consideration of purchasing property for the NCSBN office, and authorized the executive director to obtain rental office space for a lease period of three to five years prior to the expiration of the current lease.

Adopted the budget for Fiscal Year 1985.

Received papers on "The Corporate Board - Roles and Responsibilities," and "Not For Profit Organizations - Board of Directors," prepared by the executive director of the Council.

Received reports from the Council representative to the W.K. Kellogg Foundation - Pennsylvania State University Continuing Professional Education Development Project.

Performed the annual evaluation of the executive director.

Named the Marriott Hotel, Michigan Avenue at Ohio Street, Chicago, Illinois as the site of the 1985, 1987 and 1989 Delegate Assemblies.

Adopted the business agenda and convention schedule for the 1984 Delegate Assembly.

Resolution on Wisconsin Resident Agent (See Recommendation 1.)

The National Council of State Boards of Nursing is incorporated under the laws of Wisconsin. To satisfy Wisconsin statute, the National

Council must have an agent in Wisconsin who resides there. The initial registered agent was designated as Elaine Ellibee.

There is a need to change the designated agent, and it was recommended by legal counsel, Gifford Zimmerman of Vedder, Price, that the National Council use the United States Corporation Company. This company is a for-profit organization that serves thousands of corporations by satisfying statutory requirements for registered agents who reside in the state of incorporation by maintaining offices in all states. The fee is \$10 per year.

NCSBN Examination Fee for Management/Supervision, Validation/Research, Contingency, Disaster Plan/Liability Costs (See Recommendation 2.)

Cost factors used in the computation of the \$8.02 NCSBN fee are detailed in the attached analysis of projected expenses.

RECOMMENDATIONS TO THE DELEGATE ASSEMBLY:

1. RESOLVED, that Article VII of the Council's Articles of Incorporation be amended to read in its entirety as follows:

The address, including street and number, of the Corporation's principal office in the State of Wisconsin is 25 West Main Street, Madison, Dane County, Wisconsin 53703. The name of the Corporation's current registered agent in the State of Wisconsin at such address is United States Corporation Company. The name and address of the Corporation's initial registered agent in the State of Wisconsin is Mrs. Elaine F. Ellibee, 1400 East Washington Avenue, Madison, Wisconsin 53704.

2. That the portion of the examination fee for NCSBN management/supervision, validation/research, contingency, and disaster plan/liability costs be established at \$8.02 per candidate effective for the period of October 1985 through July 1988.

Submitted by,

Sharon M. Weisenbeck
Secretary

Attachment - 1

NATIONAL COUNCIL LICENSURE EXAMINATION
Price Per Candidate

Price

It is recommended that the National Council part of the price per candidate for the National Council Licensure Examinations (NCLEX) effective with the October 1985 examination administration and extending through the July 1988 examination administration be \$8.02. This amount is derived as follows:

NCSBN - Management/Supervision	\$4.75
NCSBN - Validation/Research	1.55
NCSBN - Contingency	1.15
NCSBN - Disaster Plan/Liability	.57
	<u>\$8.02</u>

Total price per candidate for NCLEX including the payment to CTB which was previously approved by the 1983 Delegate Assembly will then be \$25.00.

CTB - Test Development	\$13.55
CTB - Test Application	3.43
NCSBN - Management/Supervision, Validation/Research, Contingency and Disaster Plan/ Liability	<u>8.02</u>
	<u>\$25.00</u>

Tape States' differential deducted from Test Application price is \$0.79 which results in \$24.21 price per candidate.

Board processed States' differential added to Test Application price is \$2.50 which results in \$27.50 price per candidate.

Inflation Factor

The 1985-1988 costs are calculated in 1986 dollars, because the end of 1986 is the midpoint of the new contract period. Inflation forecasts made by Data Resource, Inc. to estimate 1986 dollars for the various factors of service have been used.

	<u>1983</u>	<u>1984</u>	<u>1985</u>	<u>1986</u>
Labor	1.00	1.075	1.156	1.242
Travel & Lodging	1.00	1.064	1.132	1.205
All Other	1.00	1.047	1.100	1.159

The proportional costs of these factors in the NCSBN Management/Supervision are approximately:

Labor	60.5%
Travel & Lodging	45.6%
All other	25.7%

Conversion from 1983 budget is:

Labor	60.5%	x	224,428	=	135,779	=	54.8%
Travel & Lodging	45.6%	x	90,176	=	40,759	=	16.4%
All Other	25.7%	x	277,738	=	71,379	=	28.8%

These proportions multiplied by the 1986 DRI factors yield an inflation factor of 1.213.

Labor	1.242	x	.548	=	0.681
Travel & Lodging	1.205	x	.1164	=	0.198
All other	1.159	x	.288	=	1.334
					1.213

Derivation of Price

	Current Price	x	Inflation Factor	=	Projected
Management/Supervision	3.90	x	1.213	=	\$4.73
Contingency	1.00	x	1.213	=	1.21
Research	.50	x	1.213	=	.60

Additional factors of validation, disaster plan and liability were also calculated.

Validation price was determined by taking the amount of money reserved for the validation study divided by the projected number of annual candidates who would be examined in 6 years. It is anticipated a new validity study will be necessary after that time.

<u>Cost</u>	<u>Candidates</u>	<u>Year</u>	<u>Price/Candidate</u>
\$1,000,000	÷	(160,000 x 6)	= \$1.04

Disaster plan costs include preparation of materials, shipping and storage costs per year divided by the projected number of candidates.

<u>Cost</u>	<u>Candidates</u>	<u>Price/Candidate</u>
\$61,436	÷	160,000 = \$0.38

Liability insurance costs include projected annual cost of premiums divided by number of candidates.

$$\frac{\text{Cost}}{\$30,000} \div \frac{\text{Candidates}}{160,000} = \frac{\text{Price/Candidate}}{\$0.19}$$

The total cost figures were then rounded.

NATIONAL COUNCIL OF STATE BOARDS OF NURSING, INC.**REPORT OF THE LONG RANGE PLANNING COMMITTEE****Charge to the Committee**

In January 1983 the Board of Directors for the National Council of State Boards of Nursing adopted a motion to appoint a Long Range Planning Committee to develop and implement a long range planning process for NCSBN.

Meetings

The Long Range Planning Committee held three meetings during fiscal year 1983-1984. Major activities for the committee included:

1. Review of the literature
2. Development of an action plan
3. Preparation of study papers in the areas of society, nursing practice, nursing education, role of the Licensed Practical Nurse, and legislation and the regulation of nursing
4. Development of a trend analysis summary
5. Development of a mission statement for the National Council of State Boards of Nursing

Review of Literature

The committee reviewed selected articles on the nature and process of planning. These articles served as a framework for development of a common philosophy of planning. Weiss (1971) identifies three levels of hierarchical planning as: 1) normative planning, 2) strategic planning and, finally, 3) operational planning. Normative planning relates to "what ought to be done." Strategic planning identifies "what can be done." Finally, what will be done is defined at the operational level.

Planning directs the organization toward desirable ends, outcomes and consequences. Integration of planning and policy formation is clearly emphasized. Planning should be creative and innovative with a focus on outcomes rather than on available financial resources.

A strategy for long range planning was presented by Falconer (1980). Preparation of a plan of action is the first step to successful planning. The second step is development of a mission statement which identifies the fundamental reasons for the organization's existence. The mission statement, furthermore, should define the scope of the organization and serve as a guide for organizational activities. Falconer (1980) also emphasizes involvement of external groups in the planning process. This input is important to successful planning for the organization.

Action Plan

The following plan of action provides a tentative timetable for the activities of the Long Range Planning Committee.

Normative Plan

<u>Activity</u>	<u>Projected Completion Date</u>	<u>Party/Parties Responsible</u>
1. Develop and approve action plan	9/83	LRPC
2. Develop first draft of mission statement	9/83	LRPC
3. Review and revise mission statement based on written comments	10/21/83	LRPC
4. Send draft mission statement to Board of Directors for review and comment	11/15/83	C
5. Approve research methodology for data base	1/84	LRPC
6. Develop research tool as information base	3/84	LRPC
7. Pilot test trend analysis survey at Area meetings	3/84-5/84	LRPC, MB
8. Send revised mission statement to Board of Directors for approval	5/1/84	C
9. Review and revise trend analysis summary based on results of pilot test	5/84	LRPC
10. Plan Delegate Assembly forum	5/84	LRPC
11. Develop a format for the Invitational Public Hearing	5/84	LRPC
12. Initiate a process for identification of goals and objectives	5/84	LRPC
13. Send revised survey instrument to member boards for data collection	7/84	CO, S, MB, B
14. Present a forum at the Delegate Assembly meeting regarding activities of the Long Range Planning Committee	8/26/84	LRPC
15. Request adoption of mission statement by Delegate Assembly	8/84	C

Strategic Plan

16.	Review results of trend analysis summary from member boards	10/84	LRPC
17.	Hold an invitational public hearing	10/84	LRPC
18.	Develop and prioritize 8-12 goals for the National Council	10/84	LRPC
19.	Send goals to Board for approval	10/84	C
20.	Start feasibility testing of goals	10/84	LRPC, FC, CO, S
21.	Request approval to hold a forum at the 1985 Delegate Assembly meeting	10/84	C
22.	Develop alternatives and contingencies to meet goals	1/85	LRPC
23.	Develop and rank order specific objectives as a basis for program plan	1/85	LRPC
24.	Send objectives to Board for approval	1/85	C
25.	Revise goals and objectives	3/85	LRPC
26.	Present goals and objectives at Area meetings for review and discussion	4/85	LRPC
27.	Plan forum for 1985 Delegate Assembly meeting	5/85	LRPC
28.	Request adoption of goals and objectives by Delegate Assembly	8/85	C

Operational Plan

29.	Send mission statement, goals and objectives to Finance Committee	9/85	ED
30.	Meet with the Finance Committee	11/85	LRPC
31.	Establish feasibility of goals and objectives based on resources	11/85	LRPC FC
32.	Develop financial plan to meet goals and objectives	1/86	FC
33.	Develop financial statement for goals and objectives	1/86	FC
34.	Send financial plan and accompanying statement to Board of Directors for approval	2/86	FC, LRPC
35.	Present operational plan at Area meetings	4/86	LRPC

- | | | | |
|-----|--|------|------|
| 36. | Develop method to review Long Range Plan on an annual basis | 5/86 | LRPC |
| 37. | Request approval of Long Range Plan for the NCSBN at Delegate Assembly meeting including mission statement, goals and objectives and financial statement | 8/86 | C |

Key to Abbreviations:

- LRPC = Long Range Planning Committee
- C = Chairperson, Long Range Planning Committee
- FC = Finance Committee
- ED = Executive Director of the National Council of State Boards of Nursing
- CO = Committees of the National Council
- S = National Council Staff Members
- B = National Council Board of Directors
- MB = Member Boards of the National Council

Study Papers

Each committee member prepared a study paper based on a review of the literature. The following five topics were selected as major study areas: 1) society, 2) nursing practice, 3) nursing education, 4) role of the Licensed Practical Nurse, and 5) legislation and the regulation of nursing. The information gleaned from this review assisted the committee in identification of key issues and trends related to development of a mission statement. In addition, the study papers provided a framework for development of the trend analysis summary.

Trend Analysis Summary

The trend analysis summary resulted from the review of the literature and study papers. The survey instrument is divided into five major areas of society, nursing practice, nursing education, role of the Licensed Practical Nurse and legislation and the regulation of nursing. Each topic is furthermore subdivided into sections related to the present situation and future forecasts. A questionnaire follows each major area.

A pilot test of the survey instrument was completed at each Area meeting in the spring of 1984. Results of the pilot test were used to make revisions in the trend analysis summary prior to distribution to member boards in the summer of 1984. The feedback from member boards will be used to identify future goals and objectives for the Council.

Mission Statement

Development of Statement

The mission statement evolved from an extensive review of the literature. It is the intent of the committee to provide a mission statement which defines the uniqueness of the National Council as well as serving as an action plan for the future. The following mission statement focuses on the ends or outcomes related to future activities of the National Council.

The Mission Statement for The National Council of State Boards of Nursing

THE MISSION OF THE NATIONAL COUNCIL OF STATE BOARDS OF NURSING IS TO PROMOTE PUBLIC POLICY RELATED TO THE SAFE AND EFFECTIVE PRACTICE OF NURSING IN THE INTEREST OF PUBLIC WELFARE. IT STRIVES TO ACCOMPLISH THIS MISSION BY ACTING IN ACCORDANCE WITH THE DECISIONS OF ITS MEMBERS ON MATTERS OF COMMON INTEREST AND CONCERN AFFECTING PUBLIC HEALTH, SAFETY AND WELFARE.

TO ACCOMPLISH ITS AIMS, THE NATIONAL COUNCIL PROVIDES GUIDANCE AND SERVICES TO ITS MEMBERS IN PERFORMING THEIR FUNCTIONS WHICH REGULATE ENTRY TO NURSING PRACTICE, CONTINUING SAFE NURSING PRACTICE AND NURSING EDUCATION PROGRAMS.

Rationale for Mission Statement

The literature reveals five (5) criteria for the review and evaluation of a mission statement as: 1) future appropriateness, 2) scope of organization, 3) organizational product, 4) geographic market and, finally; 5) general public. The mission statement for the National Council shall be reviewed in terms of the aforementioned five criteria.

Future Appropriateness for the Organization

The Committee believes the mission statement identifies the uniqueness of the National Council. For, the National Council is the only private national organization which is comprised of state agencies to promote public policy for the safe and effective practice of nursing in the interest of public welfare. Although other nursing organizations promote nursing standards, these standards are optimum standards for the benefit of the nursing profession rather than the public. Each state Nurse Practice Act essentially serves as a statement of public policy in the interest of consumers of nursing care.

The mission statement furthermore recognizes the need to guide the direction of public policy related to safe and effective nursing practice. It is flexible in nature to accommodate current issues and future trends in credentialing. The statement is intended to strengthen and benefit the Council to provide the necessary leadership and direction to member boards for the benefit of the public. Upon review of the Council Bylaws, it was concluded that the statement does not alter the current functions and objectives of the Council. The committee furthermore acknowledged the differences among jurisdictions, however, wishes to emphasize the need for increased commonality and guidelines as a basis for credentialing.

Scope

The mission statement defines the scope for the National Council of State Boards of Nursing. It is recognized that the Council acts with approval of the Delegate Assembly which is composed of member boards. Each state has its own unique characteristics and exercises its vote in decision making at the convention. The decisions of the Assembly serve as the foundation for specific Council activities. It is emphasized that each state retains full authority over the credentialing process in that jurisdiction. A member board may wish to act independently, revise guidelines as desired, or even move outside the organization. This mission statement thus

recognizes the privileges and rights of each member board, and also acknowledges that the Council acts in accordance with the decisions of its members. The option for associate membership at some future date is also provided.

Product

The mission statement identifies a unique product for the Council: guidelines for public policy directly relating to public welfare. The Council is a leader for agencies in the area of public policy related to the regulation of entry into nursing, continuing safe nursing practice and approval of nursing education programs. These areas of focus are functions carried out by state boards of nursing. The mission statement encompasses the 1983-1984 specific activities as defined by NCSBN Board of Directors as well as future trends and issues in society, nursing education and nursing practice. The product will be one which assists the Council in maintaining direction for the future.

Market

The statement is based on a strong market orientation. It is the belief of the Committee that the market for the Council will increase in the future particularly in the international arena. This mission statement recognizes the new market base.

General Public

This statement accommodates increased input by society and member boards. The trend of increasing societal involvement in matters of public policy is recognized.

Committee Evaluation of Mission Statement

The Long Range Planning Committee provides a mission statement which provides future direction to the National Council of State Boards of Nursing, specifically at the normative level of planning "what ought to be done". Upon a final review of the statement, the committee concludes:

1. The mission statement is appropriate for the future directions of the Council.
2. The mission statement establishes the unique scope of the Council in the area of public policy specifically as it relates to entry into nursing practice, continuing safe practice and approval of nursing programs.
3. The statement addresses specific Council services related to the organizational product which is public policy related to safe and effective nursing practice.
4. The mission statement is broad enough to accommodate the potential geographic market in international countries.
5. The mission statement provides increased involvement of society in matters of public policy.

Committee Recommendations to the Delegate Assembly

The following recommendations are submitted to the 1984 Delegate Assembly for its consideration:

1. The Long Range Planning Committee recommends adoption of the mission statement for the National Council of State Boards of Nursing.
2. The Long Range Planning Committee recommends that identification of goals and objectives be completed for presentation to the Delegate Assembly in 1985 based upon the mission statement for the National Council.

Respectfully submitted,

Jean Bruhn, Licensed Practical Nurse, Board Member
Sylvia Edge, Registered Nurse, Board Member
Ruth Elliott, Registered Nurse, Executive Director, State Board of Nursing, Chairperson
Esther Hoffman, Representative of the Public, Board Member
Lois Johnson, Registered Nurse, Board Member

References:

Falconer, M. (1980). Long range planning: strategy that works. In American Society of Association Executives, Long range planning, Washington, D. C.

Weiss, P.A. (1971) Hierarchically organized systems in theory and practice. New York: Hafner Publishing Company.

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NATIONAL COUNCIL OF STATE BOARDS OF NURSING, INC.

DISCIPLINARY TASK FORCE

Annual Report 1983-1984

The Disciplinary Task Force for the National Council of State Boards of Nursing met March 11-12, 1984, subsequent to their appointment in December, 1983 by the Board of Directors. The Task Force members are: Jean Caron, Marjorie Doyle, Linda Savannah, Phyllis Sheridan and Vivien DeBack, Chair.

The charge given the Task Force by the Board of Directors was "to identify methods of assisting Member Boards in fulfilling their responsibilities in regard to disciplinary action". The major activities undertaken by the Task Force relative to the charge included beginning work on a model disciplinary procedure and flow chart and the distribution of a informational survey in May 1984 about the use of the disciplinary data bank and concerns about disciplinary action.

The information gathered from the survey will be used in accomplishing the 1984-1985 goals of the Task Force, which follow:

1. The completion of a model disciplinary procedure for use by Member Boards in disciplinary actions.
2. The development and offering in 1985 of a workshop on model disciplinary proceedings.
3. The further investigation of methods to assist Member Boards in dealing with disciplinary actions.

Submitted by:

Vivien DeBack

Fiscal Year 1985 Budget For
National Council of State Boards of Nursing

R E V E N U E

	<u>FY 85</u>
Examination Income	3,016,000
Contracts	180,000
Publication Royalties	82,785
Interest (investment account)	242,649
Consultation/Honorariums	2,000
Convention/Workshop	22,500
TOTAL REVENUE	3,545,934

Fiscal Year 1985 Budget for
National Council of State Boards of Nursing

E X P E N S E S

FY 85

Program:

Test Development (including Test Service)	1,772,659
Test Application System (Computer services capitalized)	480,000
- Software	11,502
- Hardware	6,000
Test Security & Administration (including Disaster Plan costs)	84,022
Board designated Security Fund	--
Standards & Practice	17,000
Research & Development	560,000
Publications	31,350
Convention/Workshop	33,335
Area Meetings	3,000
Ad Hoc Committees	23,000
Disciplinary Data Bank	1,000
Computer Services Capitalized	
- Software	4,500
- Hardware	6,000
TOTAL PROGRAM EXPENSES	3,033,368

Fiscal Year 1985 Budget for
National Council of State Boards of Nursing

E X P E N S E S

	<u>FY 85</u>
<u>Organizational:</u>	
Administration:	
Salary & Benefits	412,292
Travel	12,500
Board of Directors (including Board committees)	40,000
Committees (Finance, Bylaws, Nominating)	20,750
Professional Services:	
Legal	40,000
Accounting	13,500
Other	25,000
Insurance	6,107
Printing	8,000
Supplies	10,174
Library/Memberships	3,000
Miscellaneous	100
TOTAL ORGANIZATIONAL:	594,423

Fiscal Year 1985 Budget For
National Council of State Boards of Nursing

E X P E N S E S

	<u>FY 85</u>
<u>Occupancy:</u>	
Rent & Utilities	126,320
Moving	6,700
Telephone	15,000
Postage	13,500
Equipment (including lease, maintenance & depreciation)	32,000
TOTAL OCCUPANCY:	193,520

Fiscal Year 1985 Budget For
National Council of State Boards of Nursing

S U M M A R Y

	<u>FY 85</u>
Total Program Expenses	3,033,368
Total Organizational Expenses	594,423
Total Operating Expenses	193,520
Total Expenses	3,821,311
Total Revenues	3,545,934
Excess [Deficit] of Revenues over Expenses	<275,377>

NATIONAL COUNCIL OF STATE BOARDS OF NURSING, INC.

Report of
NALPN/NCSBN/NFLPN Liaison Committee

Members of the Liaison Committee

NCSBN

Lois N. O'Shea, Area IV, Delaware
Elizabeth Kinney, Area II, Iowa
Patricia Williams, Area IV, Connecticut

NALPN

Eloise Sparkman
Rebecca Eden

NFLPN

Mary Acker
S. Fosterberg
Sammy K. Griffin

The NALPN/NCSBN/NFLPN Liaison Committee was held on January 23, 1984 in Chicago, Illinois with NFLPN organizing the meeting and soliciting agenda items.

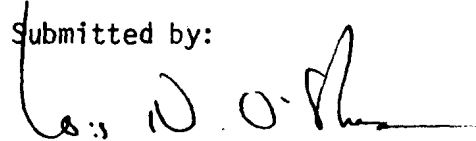
The following Statement of Purpose was accepted. It was recommended that the Board of Directors of each organization accept the Statement of Purpose. Subsequently at the NCSBN's Board of Directors meeting held on April 29-May 2, 1984, this Statement of Purpose was accepted. The purposes of the Committee are the following:

1. To share information regarding positions and platforms of the three organizations.
2. To gather background information on national questions from the perspective of the three different organizations.
3. To provide a forum in which to gather data concerning conflicting positions or issues if or when these are identified.
4. To identify areas of mutual concern.
5. To identify areas where potential duplication of efforts may occur or are occurring.
6. To recommend areas to each Board of Directors for consideration of joint position statements on issues.
7. To devise written statements of interorganizational operating services to be provided for the Committee by each organization.

Items presented for discussion included: Practical Nurse Validity Study, Study of Nursing Practice and a Job Analysis and Role Delineation of Entry Level Performance of Registered Nurses, Complimentary Convention Registration, Purposes of the NCSBN, Unlicensed Personnel, Role of the LPN in Home Health Care, and Expanded Role of the LPN.

NALPN will organize the 1985 meeting and solicit agenda items.

Submitted by:

A handwritten signature in black ink, appearing to read "Lois N. O'Shea". The signature is written in a cursive style with a long horizontal stroke at the end.

Lois N. O'Shea
Area IV

NATIONAL COUNCIL OF STATE BOARDS OF NURSING, INC.

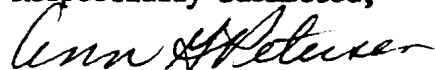
REPORT OF THE COMMITTEE ON DISCIPLINARY CASE REPORTING
BY FEDERAL AGENCIES

The Committee on Disciplinary Case Reporting by Federal Agencies has not met this year, however, we have continued to work with the Department of Defense in developing a regulation requiring the reporting of disciplinary situations to Boards of Nursing by branches of the military services.

A questionnaire was sent at the request of the Department of Defense to all member boards in April. Responses have not been received from several boards and a followup request has been sent. As soon as our data from the questionnaire is relatively complete we will share the information with the Department of Defense.

It is our expectation that the regulation should be in place by the end of this year.

Respectfully Submitted,



Ann G. Petersen
Chairperson

AGP/ihk

CONTINUING PROFESSIONAL EDUCATION DEVELOPMENT PROJECT

In 1980, the Pennsylvania State University, with support from the W.K. Kellogg Foundation, began a five-year project to develop practice-oriented continuing education programming through the use of collaborative professional relationships. Nursing was one of the six professions selected for participation in the project. The Nursing Profession Team was selected from representatives appointed by the National Council of State Boards of Nursing, the American Nurses' Association, the Pennsylvania Nurses' Association, and the nursing faculty of The Pennsylvania State University.

The primary vehicle through which the goals of the research and development project are to be achieved is the framework known as the Practice Audit Model (see attachment). This model is a seven-phase needs assessment/program development process which originated from earlier collaborative work between Penn State and the pharmacy profession. As of May, 1984, the Nursing Profession Team was in the process of implementing Phase VI of the model.

As was noted in the Continuing Professional Education Development Project Report to the 1983 Delegate Assembly, the Nursing Profession Team was preparing for the implementation of Phase IV of the Project Audit Model (the Practice Audit Session) in October of 1983. The Practice Audit Session was held at The Pennsylvania State University October 24 - 26, 1983. Forty-eight registered nurses with diverse demographic characteristics had been selected for participation based on the criterion of being currently engaged in clinical practice with gerontic clients.

The total sample was divided into two sessions with groups of 24 participants each, and further subdivided into subgroups of a maximum of six participants each. This subgrouping expedited the completion of 7 separate 90 minute learning needs assessment sessions previously developed by the Profession Team members and project staff. Following an orientation to the session, the subgroups engaged in an intensive and varied series of exercises which ranged from interactive client simulation (using actors from the local University Park community) to paper and pencil measures such as a Personal Learning Style Inventory (Kolb) and a "Facts on Aging Quiz" (Palmore). The exercises, which evolved from the practice description and standards of practice developed during previous phases of the model, were designed to identify learning needs related to the delivery of nursing care to elderly clients.

Areas of practice competency which were assessed included: counseling/mediating skills, information gathering skills, patient teaching ability, nursing care plan development, change theory, problem solving and, client advocacy. By definition, these and the other practice audit areas addressed specific situations common to the aged client. A key element of the Practice Audit Session then, was the direct relationship between the practice description and the assessment exercises.

The preliminary results of the session were tabulated and the initial data analyses were reviewed during the December 12-14, 1983 Professional Team meeting. Based on the analysis of data, team members decided to focus on three primary areas for initial continuing education programming development: 1) the nursing process, 2) the role and image of the nurse and nursing profession, and 3) knowledge regarding gerontological patients.

Nursing Process

A two-day workshop was recommended to address the nursing process. Participants in such a workshop would receive a pre-conference packet containing background information and questions to be answered prior to the workshop; responses to these questions could then be critiqued at the session. The first day of the workshop would cover initiation of the nursing process and the second day

RN PERFORMANCE UPDATE STUDY

Based on a recommendation made by the NCSBN Board of Directors in their May, 1983 meeting, CTB/McGraw-Hill and NCSBN entered into an agreement to conduct an RN Performance Update Study. CTB/McGraw-Hill developed the procedure for this study as well as the revised materials for sendout to the panel of raters.

CTB/McGraw-Hill analyzed the data, and reported the results of this study to the NCSBN Board of Directors in their December, 1983 meeting and the Examination Committee in their January, 1984 meeting.

NCLEX-PN VALIDATION STUDY/TEST PLAN

CTB/McGraw-Hill staff attended the Examination Committee Meeting in Oak Brook, Illinois November 29 -December 1, 1983. The staff assisted the Examination Committee in its development of the new PN Test Plan utilizing the activities from the PN Validation Study.

RESEARCH AND TECHNICAL SUPPORT

CTB/McGraw-Hill has provided NCSBN with research support and educational services as required throughout the year. Among these have been reports and presentations to staff and the Examination Committee about the nature of item response theory and the Rasch model, the psychometric impact of decreasing the number of items used in the examinations, studies of the implications of various criteria for the PN diagnostic profiles, and a study to evaluate item selection guidelines. CTB/McGraw-Hill is currently conducting a study concerning the reuse of test items which are known or suggested of being exposed.

CTB/MCGRAW-HILL INVITATIONAL CONFERENCE

CTB/McGraw-Hill has planned for and invited personnel and staff from all State Boards to an Invitational Conference to be held at CTB/McGraw Hill offices in Monterey, California on October 11-12, 1984. The objectives of the conference are to learn about the processes involved with the NCLEX exams and

NATIONAL COUNCIL OF STATE BOARDS OF NURSING, INC.

Annual Report of the Test Service
National Council Licensure ExaminationINTRODUCTION

This annual report provides an overview of CTB/McGraw-Hill's activities to date on the National Council Licensure Examination (NCLEX), including item and examination development and administration of the NCLEX-RN 783, NCLEX-PN 083, NCLEX-RN 284 and NCLEX-PN 484, and on the NCLEX Summary Profiles service.

DEVELOPMENT OF THE ITEM POOLS

CTB/McGraw-Hill staff has assisted the Council in selecting NCLEX item writers by identifying specific content needs of the item pools. Confidential directions have been presented to the Examination Committee for review and approval prior to each item-writing workshop. These directions serve as the focus for specific item-writing assignments.

An NCLEX-PN item-writing panel was convened during October, 1983 and a RN panel met during February, 1984. Approximately 785 items were written during the year.

Drafts of these items were presented to state boards for review during February and May, and resulting critiques were summarized for Examination Committee action.

EXAMINATIONS

Two PN and two RN examinations were prepared and administered during the year. NCLEX-RN 783 was administered to 77,832 candidates, NCLEX-PN 083 was administered to 36,038, NCLEX-RN 284 was administered to 33,885 and NCLEX-PN 484 was administered to 22,998 candidates.

Corrected copies of Tables 6 and 7 of the NCLEX-RN 283 and 783 Summary Reports were sent to State Boards of Nursing in January, 1984, because the labels for diploma and baccalaureate degree candidates in the previous reports were transposed.

CTB/McGraw-Hill readministered on October 5, 1983 in Boston the NCLEX-RN 783 examination to 121 Massachusetts' candidates whose examination booklets were lost in transit. Dr. Susan Holmes was chief administrator for the examination.

The scores of a New Jersey and an Arkansas candidate changed as a result of handscoring which caused each to pass the NCLEX-RN 783 examination. The changes in the scores were due to scanning errors. CTB/McGraw-Hill uses NCS optical scanning hardware to scan the NCLEX examinations. These scanners are as accurate as any optical scanning hardware known, and have a proven history of reliability and accuracy demonstrated over the last 18 years. As with any mechanical device, errors can and do occur. CTB/McGraw-Hill's experience indicates that scanning errors, after editing, are less than one per million. CTB/McGraw-Hill will continue to monitor the optical scanners to ensure that scanning errors such as these are minimized in the future.

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APPLICATION OF NEW TECHNOLOGY TO NCLEX

CTB/McGraw-Hill is currently working with the Council to obtain funding for the necessary research into the computer administration of NCLEX examinations.

NCLEX SUMMARY PROFILES

CTB/McGraw-Hill Staff has worked with the Council during the year in designing and marketing the new NCLEX Summary Profiles service. The service includes customized summary reports that are designed to help administrators and faculty analyze their graduates' performance on NCLEX. CTB/McGraw-Hill has

sent sample reports and a brochure describing the service to each RN program in jurisdictions where the State Boards have given their approval to release summary data. A similar information packet will be sent to PN programs in late August.

The service will be provided to subscribing RN programs after the NCLEX-RN 784 examination and to subscribing PN programs after the NCLEX-PN 084 examination.

NATIONAL COUNCIL OF STATE BOARDS OF NURSING, INC.

Annual Report of the NCSBN Data Center
National Council Licensure ExaminationINTRODUCTION

This report provides an overview of CTB/McGraw-Hill's activities to date in the NCSBN Data Center including application processing of the NCLEX-RN 783, NCLEX-PN 083, NCLEX-RN 284, NCLEX-PN 484 and NCLEX-RN 784, application shipments, program code changes and the development of a new program code system.

APPLICATION PROCESSING

The NCSBN Data Center processed 79,288 candidates for the NCLEX-RN 783 examination, including tape and late candidates; 37,002 candidates for the NCLEX-PN 083 examination, including tape and late candidates; 35,033 candidates for the NCLEX-RN 284 examination, including tape and late candidates; 23,691 candidates for the NCLEX-PN 484 examination, including tape and late candidates; and 54,062 candidates for the NCLEX-RN 784 examination, excluding tape and late candidates.

APPLICATION SHIPMENTS

A total of 213,000 applications were shipped to 56 RN and PN State Boards. Approximately 30,000 applications were returned to the NCSBN Data Center by State Boards changing from a direct application system to tape processing.

PROGRAM CODE CORRECTIONS

The NCSBN Data Center Staff processed program code corrections on a total of 2,425 candidates for the NCLEX-RN 783, NCLEX-PN 083, NCLEX-RN 284, and NCLEX-PN 484 examinations. These corrections included changes in program codes, educational background, and repeat status.

NEW PROGRAM CODE SYSTEM

NCSBN Data Center staff, NCSBN staff, and CTB/McGraw-Hill programming staff are currently working on the development and implementation of a new program code system. The new program code system is scheduled to begin with the NCLEX-RN 285.

NATIONAL COUNCIL OF STATE BOARDS OF NURSING, INC.

REPORT OF EXECUTIVE DIRECTOR

This decade has been one in which productivity and organizational effectiveness have been key concepts for the health and growth of organizations. Thomas Peters and Robert Waterman's In Search of Excellence, the study of how the best run corporations in the United States manage themselves, describes a strong corporate culture as the one pre-eminent attribute possessed by all the companies. Characteristics of this strong culture are defined as knowledge of where the organization came from and where it is going. During this past year, the National Council of State Boards of Nursing published its history, which explained where the organization came from. This year also marked the beginning of the Long Range Planning Committee. Its reports give Member Boards and delegates an opportunity to share in the decisions about where the organization is going.

Peters and Waterman also cited eight precepts that, if applied to organizations, serve as a major method for enhancing organizational effectiveness.

Over the years, the National Council has applied the two most important of these precepts. They are: (1) begin with a bias toward action and (2) remember that productivity can only be achieved through people. The major events that have occurred since 1978 document the application of the "action" precept. The ongoing efforts of members of the Board of Directors, committees, and staff to work together on goals, issues, and problems have been cited repeatedly in previous reports to the Delegate Assembly. Staff believe that applying these precepts has enhanced the effectiveness of the National Council and that further development using all the precepts will help continue the effective delivery of services to Member Boards.

The purpose of this report is to share with Member Boards a summary of staff activities during the sixth year of National Council's functioning. These activities relate to the major program services of testing, information and consultation, research and studies, publications, and public relations. The final section highlights major organizational activities. All activities connote the bias toward action and achievement through people precepts.

TESTING

The regular work of test development for the registered nurse and licensed practical nurse examinations continued to require major staff commitment. In addition, the development of a new test plan for the practical nurse licensure examination represented a major effort for the Examination Committee and staff. The initial step in this development was the conduct of an educational seminar for members of the Board of Directors, the Examination Committee and staff. The educational seminar, approved by the Board of Directors required the selection of highly qualified and experienced job analysts; this selection was accomplished by staff. Ayres D'Costa of The Ohio State University and Thomas Abrams of Vedder, Price, Kaufman and Kammholz were chosen. These consultants worked with the participants to clarify the psychometric and legal issues involved in moving from a job analysis to a test plan. Following this seminar, staff assisted the Examination Committee during its meetings and assisted the Examination Committee chairperson in the follow up actions of preparing the drafts of the test plan and presenting the proposed plan at area meetings.

The CTB/McGraw-Hill test service contract and data center contract were negotiated by a team. The Executive Director was a member of the team and provided a full range of professional services for the achievement of these contracts. Final approved documents were signed in April. During this same time period, staff assisted the Board of Directors' Coordinating Committee in developing charts of responsibilities to implement the provisions of the two contracts.

To assist Member Boards in scheduling testing activities, staff prepared a rotating calendar that includes deadline dates for submission and return of all materials from National Council, Member Boards and the test service.

Finally on matters relating to test development, staff coordinated all testing activities with CTB/McGraw-Hill as the test service. Daily contacts continued for ongoing operations and for resolution of any problems associated with delivering services to Member Boards. Staff assisted test service staff in planning the invitational conference on testing to be held October 1985. At the direction of the Board of Directors, staff conferred with test service staff, after each examination administered, to monitor test equating results based upon criterion referenced scoring.

Security of the licensure examinations has continued to be a major focus in order to fulfill the commitment to Member Boards that the examinations can be used to differentiate between those who are and those who are not competent to enter the practice of nursing. During this past year, staff secured a consultant on security and investigations who then reviewed security procedures and investigative processes. The consultant's recommendations to the Administration of Examination Committee and staff resulted in that Committee's development of a procedure for investigating security problems and that Committee's decision to provide Member Boards with a check list for each examination activity and various reports relating to damage and compliance.

As part of the total concern for security, staff worked with the Examination Committee, the Administration of Examination Committee and the test service to develop a disaster plan that considers possible emergencies concerned with development and/or distribution and retrieval of examinations and the concomitant actions that counteract the effects of the emergency.

The year 1983-1984 was the second year for the implementation of the system for direct application for the licensure examinations. Coordination of the system with Member Boards and the Data Center staff remained the responsibility of staff. The manual for the application to examination was updated to reflect changes in the system.

As part of ongoing administrative supervision of the system concerned with application and scoring, staff monitored the handscoring requests from candidates, the system for correcting program codes, and the review of problems associated with Member Boards' submission of applications on magnetic tape.

A system to comply with early handscoring requests was inaugurated during this year to assist Member Boards' candidates who wish the service performed prior to the Member Boards' established deadlines. Also, development of a new program code system, being planned for the February 1985 administration of the examination, has been initiated. Staff have worked with the test service to develop this system and to test out its application during the fall of 1984.

INFORMATION AND CONSULTATION

One of the objectives of the National Council is to provide consultative services for Council members. Staff continued to focus on this service during the past year as they have since the beginnings of the National Council. The telephone and written consultation by staff is considered a valuable service to render to members.

Participation by the Executive Director at Area meetings is an example of the information sharing activity performed by staff. In addition to assisting the Area Director or the pro tem chair of the meeting in the preparation and conduct of the meeting, the Executive Director has assisted in describing National Council policies and plans and has gained perspective on issues of concern to those Member Boards in attendance. During 1983-1984, the perspective of Member Boards on the service needs of National Council members was shared during the area meetings. Upon the request of the Finance Committee, staff also solicited and received a market research proposal to determine need for diversification of services. It is expected that this proposal will be considered by the Board at its August 1984 meeting. With the combination of data from the Member Boards and committees and staff concerned with services and the results of the projected research on this topic, staff believe plans can be established to expand services to Member Boards in the next few years.

Individual consultations were also made by staff for the Member Boards of Arkansas, District of Columbia, Illinois, Maryland and Nevada.

A major focus for the past year which will continue the next year was disciplinary functions of the Member Boards. The disciplinary data bank has operated since 1980. With the entry of back data into the computer files completed this past year, significant trend analysis data will be available for Member Boards in 1985.

Staff also worked with the Disciplinary Task Force established by the Board of Directors to determine needs of Member Boards for services in this functional area. Staff assisted the Task Force in conducting a survey of Member Boards about needs relating to disciplinary procedures and the disciplinary data bank.

The compilation of data from respondents to the annual report in 1983 is another resource. With these data accessible on computer, staff have been able to respond to an increasing number of questions about licensure requirements and such matters as disciplinary actions and sunset legislation. Responses have generally been available within minutes to Member Boards' specific requests for information.

In addition to staff assisting the Board of Directors in preparing for convention programs on areas of Member Board interest, the Executive Director participated in a program sponsored by the Tennessee Board of Nursing on the roles and responsibilities of boards of nursing.

One of the directives of the 1983 Delegate Assembly was to host a conference for the purpose of discussing the effectiveness of continuing education as a strategy for maintenance of continuing professional competence. Staff participated in that conference hosted by the Florida Board of Nursing and shared in the discussion on mandatory continuing education as a method of maintaining competence.

Another directive of the 1983 Delegate Assembly was to establish a service to programs in nursing that analyzed performance of graduates in specific programs along multiple scales. A resulting major task for staff was to work with the test service in developing NCLEX-SP, National Council Licensure Examinations Summary Profiles, to be offered to programs in states where Member Boards agreed that the data could be so used. As of 14 June 1984, permission to offer the service to programs in their jurisdictions had been received from 52 Member Boards.

To assist new members of the Board of Directors in assuming that role, the Executive Director researched existing literature on management and organizational effectiveness. An analysis of roles and responsibilities of Boards of Directors and members of Boards was presented to the Board during the past year for future reference and possible use in structuring services.

RESEARCH AND STUDIES

A Study of Nursing Practice and a Job Analysis and Role Delineation of Entry Level Performance of Registered Nurses is the title of a project that represents a major task initiated during the 1983-1984 year. Staff worked with the President and committee chairpersons to establish the specifications in the request for proposals; staff also worked with the President to determine the criteria for review of proposals. Prior to the meeting when the proposals were discussed by the Board, staff prepared reviews according to the substantive criteria, administrative criteria, corporate capability and reference checks, and coordinated input from consultants on legal criteria and methodology. Following the 29 April - 2 May Board meeting, the Executive Director, as a member of the appointed negotiating team, met and communicated with the two top-ranked bidders throughout May and June. Ongoing project supervision will be a major activity of 1984-1985.

Within a month of releasing the request for proposals to study nursing practice and a new job analysis of the registered nurse, the final report of the 1983 update study on the performance of registered nurses at entry level was published. This study was a joint effort of the Examination Committee, test service staff and National Council staff.

Other surveys on behalf of and in cooperation with committees were prepared and disseminated by staff. These surveys included trend data on examination results for the Examination Committee, alternate dates for administering NCLEX-PN for the Administration of Examination Committee, and the trend analysis survey for the Long Range Planning Committee. Staff also participated with Nursing Practice and Standards Committee in research and development of position papers on legal standards, continued competence, and regulation of "advanced practice."

Identification of ways to secure funding for future services has held ongoing emphasis in the organization. Staff have met with federal and private funding organizations to elicit support for research needed for projects relating to services required by Member Boards. One project mentioned previously and still holding great promise for Member Boards' use is computer adaptive testing.

PUBLICATIONS

The current year began with the publication of From An Idea to An Organization, the history of the National Council from the early 1900's until 1983. This publication has been continuously used for interpreting the background, purpose and objectives of the National Council to many publics.

The other publications in which staff participated included production of Model Administrative Rules and Regulations for Nursing, the monograph by Ayres D. Costa, Ensuring Job-Related Validity of Nursing Licensure Examinations, and the video tape for candidates for practical nurse licensure. Other new publications prepared by staff were a brochure on the National Council describing what it is and what services it delivers, a biweekly newsletter to Member Boards, and fact sheets.

Issues expanded in size and devoted space to topics on development and validation of examinations, the 1983 convention highlights, maintaining competency, and changes in nurse practice acts. The purpose of Issues is to communicate general concerns of Member Boards and developments in the National Council and Member Boards that deal with those concerns.

The President and the Executive Director co-authored a chapter on the National Council as a consumer protection organization for publication in the new edition of Current Issues in Nursing. Publication is expected in late 1984.

At the conclusion of the current year is the beginning of another project. That is, there are revisions of the two books, NCLEX-RN and NCLEX-PN, underway to update content and to develop a rationale for the correct answer for each question. A team of clinical specialists is being used for the section on the rationale for the correct answer. It is expected that the newly revised editions will be published January 1985.

PUBLIC RELATIONS

Public relations is used in its broadest sense, that is, interrelationships with non-members of the National Council that also enhance productivity achievement. These interrelationships pertain to other organizations with which the National Council shares objectives or interests.

Staff assisted members of the Board at the liaison committee meetings of the American Nurses' Association, and the National Association of Licensed Practical Nurses and the National Federation of Licensed Practical Nurses.

As an ongoing assignment from the Board of Directors, staff acted as liaison with the American Hospital Association Council on Nursing, the Interagency Conference on Nursing Statistics, and the American Medical Association's Informal Steering Committee on Prescription Drug Abuse.

To represent the National Council, staff attended meetings of the Federation of Associations of Health Regulatory Boards, the Council of State Governments' Clearinghouse on Licensure Enforcement, the American Society of Law and Medicine, and the National Commission on Health Certifying Agencies. All of these meetings considered some aspect of disciplinary functions and data, conduct of hearings, psychometric issues, and ethical and legal issues.

The Executive Director met with and maintained contacts with appropriate staff of the American Nurses' Association, the American Association of Colleges of Nursing, and the National League for Nursing. The President and Executive Director also attended the National League for Nursing convention. Staff also participated in the May 1984 special meeting of those organizations designated to co-convene a conference to discuss a credentialing center.

The Executive Director was appointed to the National Commission on Health Certifying Agencies' Advisory Council on Assuring Continuing Competence Project, whose major objective is to provide to those interested in health care a broad base of information on continuing competence.

Individual staff members served as consultant to the Medical College of Georgia faculty and to the American Association of Nurse Anesthetists, and presented a paper for Illinois Nurses' Week at the Mercy Hospital and Medical Center, Chicago.

In an effort to begin establishing international relationships with other North American countries, staff participated in a meeting with representatives of Canadian provinces. Staff also surveyed other health regulatory boards to determine similar relationships, and determined that the American Association of State Psychology Boards, the Federation of State Medical Boards, the National Association of Boards of Pharmacy, the National Boards of Chiropractors, and the National Boards of Veterinarian Medical Examiners all have a relationship with their counterpart boards in Canada.

NATIONAL COUNCIL OFFICE OPERATIONS

Organizational operations continue to be a major activity of staff as they strive to facilitate implementing actions designed by the Delegate Assembly, Board of Directors or committees. During this past year, the staff reorganization plan was initiated with the filling of the Director of Program Services position in the latter part of January. In addition to the Director of Program Services, there are the positions of Director of Testing Services, Director of Information Services and Director of Administrative Services. Each Director's position description defines responsibility for specific areas of functioning.

Providing staff assistance to the three organizational committees of Bylaws, Finance, and Nominating was a continuing activity. Each of these three committees met twice this past year. A major activity was the preparation of background materials for use by the Finance Committee in its deliberations on the budget and on the establishment of the fee for the National Council Licensure Examinations.

Two other operational matters received major additional expenditures of time. One was office space and the other was finances. During Fall 1984, at the direction of the Board, staff reviewed properties for possible purchase and met with financial, architectural and space design consultants in order to present a detailed analysis to the Board during its December meeting. The Board's decision not to purchase property at that time resulted in the review and analysis of rental property. By the August 1984 Delegate Assembly meeting, a final report on office space will be made.

Monitoring the investments of the National Council is an ongoing function of the Executive Director. During Spring 1985, there was a crisis in the Continental Bank of Illinois where National Council funds were maintained. Recognition of the impending crisis precipitated a move of all monies and securities to the First National Bank of Chicago. Although investments were in secure holdings, the potential for limiting access to the funds was deemed important rationale for taking immediate action. At the direction of the President, the Executive Director is also working with the investment counselor to the National Council in preparing a long range plan for maintaining liquidity and security of investments. Following the Treasurer and Finance Committee's review and acceptance, the plan will be presented to the Board of Directors.

CONCLUSION

Moving into the second half of the first decade in which the National Council has existed has not seen any abatement of action or lessening of productivity. Staff members believe they join with the Board of Directors and all committees to form the team responsible for making the National Council a strong, effective organization.

NATIONAL COUNCIL OF STATE BOARDS OF NURSING, INC.

Report of the
Bylaws Committee

The NCSBN Bylaws Committee met March 19-20, 1984 at the National Council Headquarters in Chicago and again on June 6 by conference call. The activities of the Committee focused on the following:

- A comprehensive review of the bylaws as they relate to the Articles of Incorporation;
- A comprehensive review of the bylaws with emphasis on the organization of the content and its relationship to current practice;
- A review of the Standing Rules of the Council and of the Board of Directors for their relationship to the Bylaws;
- Consideration of proposed amendments submitted by Member Boards and committees;
- Preparation of Amendments identified by the committee; and
- Preparation of recommendations to be presented to the 1984 Delegate Assembly.

Committee members participating in the year's activities were: Hazel McKimmey, Shirley Rennie and Corinne Dorsey, Chair.

Objectives for 1984-1985 are as follows:

1. Review of all proposed changes in bylaws and standing rules
2. Committee representation in a comprehensive revision of the bylaws and standing rules.

Since the National Council's origin, the bylaws and standing rules as originally adopted have undergone frequent amendment. After recent comprehensive review by staff, legal counsel Tom O'Brien, parliamentarian Henrietta Marjan, and the Bylaws Committee, a consensus exist that a comprehensive revision of both the bylaws and standing rules

is in order. Such a revision would allow for streamlining the bylaws and standing rules while keeping the Council both current and futuristic in outlook.

Based on the activities for the year, the Bylaws Committee recommends the following for consideration by the 1984 Delegate Assembly:

1. The consideration of the 22 bylaw changes and the one standing rule change as presented in this report
2. Pursuant to Article XIV Section 2 a., that a special committee made up of the chair of the Bylaws Committee and three members from the three remaining areas be established for the purpose of preparing and presenting a proposed comprehensive revision of the bylaws and standing rules of the National Council to the 1985 Delegate Assembly.

Submitted by

Corinne Dorsey, Chair

Standing Rule Proposal No. 1

IV. Nominations and Elections

A. Nominations

2. Nominations from the Floor

- a. Nominations from the floor shall be accepted following the report of the committee on nominations.
- b. The person making the nomination shall be permitted two minutes to give the qualifications of the nominee and to indicate that written consent of the nominee has been received.
- c. No seconding speeches shall be allowed.
- d. Before a nominee's name can be placed on the ballot, the nominee must complete and submit a consent to serve form and the required personal statement of interest, to the Nominating Committee Chairperson for review and approval.

Proposed by: The Nominations Committee

Rationale: The rationale behind this recommendation is to insure consistency in providing the Delegate Assembly with information regarding all nominees, regardless of time or place of nomination.

Recommendation: The Bylaws Committee recommends adoption.

Bylaw Proposed Change No. 1

ARTICLE X - COMMITTEES

Section 8. Administration of Examination Committee

a. Composition

The administration of examination committee shall be composed of at least 6 members who shall be selected to represent the areas as evenly as possible.

b. Duties

- (1) recommend to the Delegate Assembly criteria and procedures to be used by Member Boards for maintaining the security of the licensure examinations;
- (2) evaluate proposed and actual compliance of Member Boards, Test Service, and others with established criteria and procedures for maintaining the security of licensing examinations;
- (3) conduct an investigation of each alleged failure to maintain the security of the licensing examinations and/or loss of a test booklet ~~or answer sheet~~ and submit a written report to the president and executive director **within 10 days following notification of the incident;**
- (4) report to the Board of Directors possible violations of the contract between a Member Board and the Council;
- (5) conduct education conferences as authorized by the Board of Directors or Delegate Assembly;
- (6) recommend to the Delegate Assembly dates for the administration of the examinations.

Proposed by: Administration of Examination Committee

Rationale: This proposal aligns the Bylaws with current practice. Answer sheets are no longer used and it is impossible to conduct an investigation and prepare a written report within ten days.

Recommendation: The Bylaws Committee recommends adoption.

Bylaw Proposed Change No. 2

ARTICLE V: Officers

Section 2. Qualifications

Only members of a Member Board and nurses employed by or for Member Boards shall be eligible to serve as officers and shall have had at least one year of experience as a member or as an employee of a Member Board.

No more than three officers shall be from the same area.

No person may hold more than one elected office at the same time.

The president shall have been on the Board of Directors at least one year before being elected to office.

No officer shall hold elected or appointed office in a ~~state~~, regional or national association or body if such an office might result in potential, actual or appearance of conflict of interest to the Council as determined by the Board of Directors of the Council in accordance with standing rules.

Proposed by: The North Carolina Board of Nursing

Rationale: This change is recommended in view of the high level of participation of members of the N.C. Board of Nursing in professional organizations. Because Board members are elected by the licensees in our state, they tend to have a higher degree of involvement in professional organizations than is customary in other states.

Article V, Section 2 of the Bylaws as currently stated would unduly restrict the eligibility of members of the N.C. Board of Nursing to serve as officers of the NCSBN.

Recommendation: The Bylaws Committee recommends adoption.

Bylaws Proposed Changes No. 3

ARTICLE II - ~~OBJECT~~ OBJECTIVES

The Council's objectives shall include, but not to be limited to the following:

1. Develop, establish policy and procedure, and regulate the use of the licensing examination for nursing, to be available for use by states and territories;
2. Identify and promote desirable and reasonable uniformity in standards and expected outcomes in nursing education and practice.
3. ~~Identify, explore, take position on~~ Assess trends and issues affecting nursing education and nursing practice as they affect the licensure of nurses.
4. Identify continuing competence for practitioners of nursing and assist in efforts to promote the same;
5. Collect, analyze and disseminate data and statistics relating to nurse licensure;
6. Conduct studies and research pertinent to the purposes of the Council;
7. Provide consultative services for Council members, Boards of Nursing, governmental and voluntary agencies and individuals concerned with the health and welfare of the public;
8. Plan and promote educational programs for its members, professional employees, and members of Boards of Nursing;
9. Promote and facilitate effective communications with related organizations, groups, and individuals.

Proposed by: The Pennsylvania Board of Nursing.

Rationale:

Title - Editorial - the term object should be objectives

Objective No. 3 - Deleting identify and explore and substituting assess and as they affect the licensure of nurses qualifies what the NCSBN can do based on resources and authority.

Recommendation:

Title - Editorial - change without need for a bylaw change since it has no impact on intent or purpose of the article.

Objective No. 3 The Bylaws Committee recommends adoption

Bylaw Proposed Change No. 4

Article IX. Board of Directors

Section 3. Sessions of the Board of Directors

The Board of Directors shall meet in the convention city prior to and immediately following the annual convention of the Council and at other times as necessary to accomplish the work of the Board.

Special sessions of the Board of Directors may be called by the president and shall be called upon written request of three members of the Board of Directors.

Ten days notice shall be given to each member of the Board of Directors for the calling of a special session and said notice shall include the business to be transacted.

All meetings of the Board of Directors shall be open meetings. The date, time and place of the Board of Directors meeting shall be circulated to the membership annually.

Proposed by: The Pennsylvania State Board of Nurse Examiners

Rationale: The Pennsylvania State Board of Nurse Examiners feels that anyone who wishes to attend a Board Meeting should be able to do so.

Recommendation: The Bylaws Committee does not recommend for adoption. The Committee believes that provision for open meetings is presently covered in Article VII, Section 1. Open meetings. Also, agendas of the Board of Directors meetings are circulated to member Boards stating meeting times and topics of each Board of Directors meeting. The Committee therefore believes that the article on open meetings and the present notification system is sufficient.

Bylaw Proposed Change No. 5

Article X - Committee

Section 2. Membership

b. Term

Unless specified to the contrary elsewhere in these bylaws, all committee terms shall be two years ~~beginning the day immediately following the convention.~~ The term shall begin after convention and shall be completed at the end of the second convention following appointment by the Board of Directors. The Board of Directors shall appoint as nearly one-half of the members of each committee to terms expiring in even and odd-numbered years.

No person shall serve more than six consecutive years on the same committee.

Proposed by: The Bylaws Committee

Rationale: The substitute language gives members of Boards of Nursing time to to express interest relative to committee work and the new Board the flexibility to have the time to seek out the most qualified candidates for committee work.

Recommendation: The Bylaws Committee recommends adoption.

Bylaw Proposed Change No. 6

ARTICLE II - OBJECT

The Council's objectives shall include, but not to be limited to the following:

1. Develop, establish policy and procedures, and regulate the use of the licensing examinations for nursing, to be available for use by states and territories;
2. Identify and promote desirable and reasonable uniformity in standards and expected outcomes in nursing education and practice nursing education and nursing practice standards as the relate to the protection of the public health safety and welfare.
3. Identify, explore, take positions on trends and issues affecting nursing education and nursing practice;
4. Identify continuing competence for practitioners of nursing and assist in efforts to promote the same;
5. Collect, analyze and disseminate data and statistics relating to nurse licensure;
6. Conduct studies and research pertinent to the purposes of the Council;
7. Provide consultative services for Council members, Boards of Nursing, governmental and voluntary agencies and individuals concerned with the health safety and welfare of the public;
8. Plan and promote educational programs for its members, professional employees, and members of Boards of Nursing;
9. Promote and facilitate effective communications with related organizations, groups, and individuals.

Proposed by: The Pennsylvania Board of Nursing.

Rationale: Clarification of the legal purview of the Council as it relates to the laws governing our Articles of Incorporation.

Recommendation: The Bylaws Committee recommends adoption.

Bylaw Proposed Change No. 7

ARTICLE III - MEMBERSHIP

Section 1. Definition and Qualifications

a. Definition

State Board of Nursing ~~shall mean a legally constituted body of agency of~~ is the governmental agency empowered to license and regulate nursing practice in any state, territory or political subdivision of the United States of America which bears the designation "Board of Nursing or similar title."

Proposed by: The Bylaws Committee.

Rationale: Clarify exactly the type agency that can be a member of NCSBN.

Recommendation: The Bylaw Committee recommends adoption.

Bylaw Proposed Change No. 8

ARTICLE V. Officers

Section 4. Vacancy in Office

The Board of Directors may determine that a member who has missed two consecutive meetings of the Board of Directors has resigned from the Board, and the vacancy may be filled as provided in these bylaws.

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 of the Delegate Assembly at which time the unexpired term of any office shall be filled at the same time and in the same manner as the election of other officers the unexpired term.

Proposed by: The Bylaws Committee.

Rationale: This allows for more continuity on the Board, preventing unnecessary change in a composition of the Board.

Recommendation: The Bylaws Committee recommends adoption.

Bylaw Proposed Change No. 9

ARTICLE V. Officers

Section 5. Duties of Officers

All officers shall perform duties as usually pertain to their offices and prescribed in the bylaws and standing rules.

a. President

The president shall:

- (1) preside at all meetings of the Delegate Assembly and Board of Directors:
- (2) appoint, subject to ratification by the Board of Directors,
 - ~~(a)~~ a professional parliamentarian;
 - (b) all committees not otherwise provided for in the bylaws;
- (3) fill all vacancies not otherwise provided for;
- (4) sign, all contracts as authorized by the Board of Directors; except those contracts between the Member Boards and the Council which contracts shall be signed by the Executive Director;
- (5) retain the right to vote on all matters before the Delegate Assembly, if a delegate, or on all matters before the Board of Directors, casting that vote at the same time all voters cast their votes;
- (6) serve or delegate a qualified representative of a Member Board or staff of the Council to serve as the official representative of the Council in its contacts with governmental, civic, business and other organizations.

Proposed by: The Bylaws Committee

Rationale: It is common practice in organizations for the president to appoint a parliamentarian without need for Board ratification, since the president is the person who works most with the parliamentarian.

Recommendation: The Bylaws Committee recommends adoption.

Bylaw Proposed Change No. 10

Section 5. Duties of Officers

All officers shall perform duties as usually pertain to their offices and prescribed in the bylaws and standing rules.

a. President

The president shall:

- (1) preside at all meetings of the Delegate Assembly and Board of Directors;
- (2) appoint, subject to ratification by the Board of Directors,
 - (a) a professional parliamentarian;
 - (b) all committees not otherwise provided for in the bylaws;
- (3) fill all vacancies not otherwise provided for;
- (4) sign, all contracts as authorized by the Board of Directors; except those contracts between the Member Boards and the Council and except those contracts of a routine type authorized by the Board of Directors, which shall be signed by the Executive Director;
- (5) retain the right to vote on all matters before the Delegate Assembly, if a delegate, or on all matters before the Board of Directors, casting that vote at the same time all voters cast their votes;
- (6) serve or delegate a qualified representative of a Member Board or staff of the Council to serve as the official representative of the Council in its contacts with governmental, civic, business and other organizations.

Proposed by: The Bylaws Committee.

Rationale: Clarify that not all standard operational contracts that deal with the running of the National Council need be signed by the President.

Recommendation: The Bylaws Committee recommends adoption.

Bylaws Proposed Change No. 11

ARTICLE V. Officers

Section 5. Duties of Offices

c. Secretary

The secretary shall:

- (1) record the minutes of all meetings of the Delegate Assembly and the Board of Directors;
- (2) maintain the master copy of the articles of incorporation, bylaws and standing rules and ~~transcript~~ minutes of any meeting of the Delegate Assembly and the Board of Director;
- (3) have authority to authorize payment in the absence or inability of the treasurer to do so;
- (4) ~~countersign all contracts in the event there is a vacancy in the Executive Director position.~~

Proposed by: The Bylaws Committee.

Rationale:

No. 2 - Full transcripts of the Delegate Assembly are taken but Boards of Directors meetings are not presently transcribed. Transcription is costly and minutes derived from secretarial notes have been used instead. This would allow for minute taking by whatever means deemed appropriate for the Delegate Assembly and Board of Directors.

No. 4 - Currently contracts are not countersigned.

Recommendation: The Bylaws Committee recommends adoption.

Bylaw Proposed Change No. 12

ARTICLE VIII - DELEGATE ASSEMBLY

Section 1. Composition, Term and Voting

a. Composition

The Delegate Assembly, the voting body of the Council, shall be composed of delegates designated by Member Boards. Each Member Board may designate two delegates. An alternate duly appointed by a Member Board may replace a delegate and assume all privileges of a delegate.

b. Term

Delegates and alternates serve from the first day of the Delegate Assembly to which they have been designated until the Member Board makes a replacement.

c. Voting

~~Each Member Board using Council examination for licensing registered nurses and/or practical nurses 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 convention.

Proposed by: The Bylaws Committee.

Rationale:

Voting - delete 1st sentence - This statement is not needed since the bylaws defines membership in terms of use of the RN/PN exam. Redundant

Addition to Proxy Voting - This is to clarify that this refers to voting at convention.

Recommendation: The Bylaws Committee recommends adoption.

Bylaw Proposed Change No. 13

ARTICLE VIII. Delegate Assembly

Section 2.

- e. approve the provisions substance of all contracts between the Council and jurisdiction member boards and the Council and the test service and national nursing organizations.
- f. establish the criteria for and select the test service to be utilized by the Council unless the Council provides such services itself.
- g. adopt test plans to be used for the development of licensing examinations in nursing;
- h. adopt criteria and procedures for maintaining the security of licensing examinations within jurisdictions;
- i. establish dates for the administration of licensing examinations in nursing;
- j. transact any other business as may properly come before it.

Proposed by: The Bylaws Committee.

Rationale: To establish clearly the relationship of the Delegate Assembly to the contract process.

Recommendation: The Bylaws Committees recommends adoption.

Bylaw Proposed Change No. 14

ARTICLE XIV - AMENDMENT AND REVISION

Section 1. Amendment

These bylaws may be amended at any annual or special session of the Delegate Assembly as follows:

- a. by a two-thirds vote of the delegates present and voting provided copies of the proposed amendments shall be presented in writing to the Member Boards at least 45 days prior to the session, or
- b. without previous notice, by a 95% vote of the delegates present and voting.

Section 2. Revision

These bylaws may be ~~revised~~ undergo comprehensive revision only upon authorization by the Delegate Assembly as follows:

- a. a special committee for revision, authorized by the Delegate Assembly, shall prepared and present the proposed revision, and
- b. by two-thirds vote of the delegates present and voting, provided copies of the proposed revision shall have been submitted in writing to the Member Boards at least 45 days prior to the session at which action is to be taken.

Proposed by: The Bylaws Committee.

Rationale: This is to clarify the difference in the amendment process and revision.

Recommendation: The Bylaws Committee recommends adoption.

Bylaw Proposed Change No. 15

Article V: Officers

Section 3. Term of Office

The president, vice-president, secretary, and treasurer shall be elected for a term of **two years** (one year) or until their successors are elected. ~~The president and vice-president shall be elected in even-numbered years and the secretary and treasurer shall be elected in odd-numbered years.~~

The directors shall be elected for a term of two years or until their successors are elected. Directors from odd-numbered areas shall be elected in the odd-numbered calendar years. Directors from even-numbered areas and the director-at-large shall be elected in even-numbered calendar years.

No officer shall serve more than two consecutive terms in the same office nor more than six consecutive years on the Board of Directors.

If a current officer agrees to be presented on the ballot for another office, the term of the current office shall terminate at the close of the session at which the election is held.

Rationale:

1. The Nominations Committee believes the change is in concert with the original intent of the National Council delegates in that it will allow more members of Boards to run for office. Securing nominations of members whose terms of appointment to Boards of Nursing continue for the term of appointment as an officer of the National Council has been a problem for the Committee. Thus, the Committee is unable to select these otherwise well qualified nominees.
2. This change would allow the Delegate Assembly to elect the Board of Directors instead of having the Board of Directors appoint members to fill vacancies due to unexpired terms.
3. Originally the two year term was initiated to increase the continuity of membership on the Board of Directors. The Committee believes continuity continues to be achieved by officers returning to the Board through election to a different office.

* Proviso: That this bylaw change not effect officers elected prior to the 1984 elections.

Recommendation: The Bylaws Committee recommends adoption with the proviso.

Bylaw Proposed Change No. 16

Article VI: Nominations and Elections

Section 1. Committee on Nominations and the Bylaws Committee

d. Vacancy

Vacancies occurring in the committee shall be filled by the Board of Director. If possible, the Board of Directors shall fill said vacancies from the remaining nominees in the order of the number of votes received.

Vacancies occurring in the committee shall be filled from the remaining nominees in the order of votes received. The Board of Directors shall fill a vacancy if none of the remaining nominees can serve.

Rationale: This procedure would more accurately follow the Delegate Assembly preferences.

Recommendation: The Bylaws Committee recommends adoption.

Bylaw Proposed Change No. 17 and No. 18

ARTICLE X - Committees

Section 4. Records and Reports

a. Records

Each committee shall keep a written record of its proceedings.

b. Reports

Each committee shall submit an annual report at least 60 days before the annual convention for presentation to the Delegate Assembly. The report shall include a review of the past year and all activities or programs proposed for the succeeding year. The proposed plan shall include:

- (1) specific goals and objectives
- (2) number of meeting and/or workshop days anticipated, and
- ~~(3) an estimated budget~~

Rationale: This should appear under the general responsibilities of Committees under Article X, Section 3 as follows:

ARTICLE X: Committees

Section 3. Expenses

Committees shall submit an estimated budget for committee activities prior to the beginning of the fiscal year. Committees shall not incur expenses in addition to the approved budgeted amount without prior authorization of the Board of Directors.

Recommendation: The Bylaws Committee recommends adoption of both.

Bylaw Proposed Change No. 19

Article X: Committees

Section 5. Finance Committee

a. Composition

The finance committee shall be composed of at least three members, including the treasurer as chairperson.

b. Duties

The committee shall:

- (1) provide general supervision of the finance of the Council, subject to the approval of the Board of Directors;
- (2) ~~present a proposed annual budget for the Council to the Board of Directors at least 60 days prior to the annual session of the Delegate Assembly.~~

present a proposed annual budget for the Council to the Board of Directors prior to the beginning of the fiscal year.

Rationale: The budget is approved by the Board of Directors at its spring meeting prior to the beginning of the fiscal year on July 1. This language changed will bring the bylaws into alignment with current practice and will allow sufficient flexibility of the Board to gather the financial data needed to adopt a budget.

Recommendation: The Bylaws Committee recommends adoption.

Bylaw Proposed Change No. 20

ARTICLE XII - OFFICERS/DIRECTORS: LIABILITY AND INDEMNITY:
TRANSACTIONS WITH THE CORPORATION

Section 1. Liability of Officers/Directors

No person shall be liable to the corporation for any loss or damage suffered by it on account of action taken or omitted to be taken by a person as an officer/director of the corporation, or of any other corporation which the person serves as an officer/director at the request of the corporation in good faith, if such a person:

- a. exercised and used the same degree of care and skill as a prudent person would have exercised or used under the circumstances in the conduct of his/her own affairs, or
- b. took or omitted to take such action in reliance upon statements made or information furnished by officers or employees of the corporation which he/she had reasonable ground to believe to be true. The foregoing shall not be exclusive of other rights and defenses to which he/she may be entitled to as a matter of law.

Section 2. Indemnification

The Council shall indemnify and hold harmless each member of the Board of Directors now or hereinafter serving the Council from and against any and all claims and liabilities to which he/she may be or become subject by reason of his/her now or hereafter being or having heretofore been an officer/director, and/or member of the Board of Directors of the Council and/or by reason of his/her alleged acts or omissions as an officer/director and or member of the Board of Directors as aforesaid, and shall reimburse each officer/director of the Council for all legal and other expenses reasonably incurred by him/her in connection with defending against such claims or liabilities, provided, however, that no officer/director or member of the Board of Directors shall be indemnified against or be reimbursed for any expenses incurred in defending against any claims arising out of his/her own negligence or willful misconduct. The foregoing rights of officers/directors and members of the Board of Directors shall not be exclusive of other rights to which they may be entitled lawfully.

Article XII. Indemnification

Section 1. The corporation shall indemnify any person who was or is a party or threatened to be made a party to any threatened, pending or completed action, suit or proceeding, whether civil, criminal, administrative or investigative (other than an action by or in the right of the corporation) by reason of the fact that he or she is or was a director, officer, employee or agent 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 or agent of another corporation, partnership, joint venture, trust or other enterprise, against expenses, including but not limited to attorneys' fees, costs, judgments, fines and amounts paid in settlement actually and reasonably incurred by the person in connection with such action, suit or proceeding, if the person acted in good faith and in a manner he or she reasonably believed to be in or not opposed to the best interests of the corporation and, with respect to any criminal action or proceeding, had no reasonable cause to believe his or her conduct was unlawful. The termination of any action, suit or proceeding by judgement, order, settlement, conviction, or upon a plea of no contest or its equivalent, shall not, of itself, create a presumption that the person did not act in good faith and in a manner which he or she reasonably believed to be in or not opposed to the best interests of the corporation, and with respect to any criminal action or proceeding, had reasonable cause to believe that his or her conduct was unlawful.

Section 2. 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 or suit by or in the right of the corporation to procure a judgment in its favor by reason of the fact that he or she is or was a director, officer, employee or agent 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 or agent of another corporation, partnership, joint venture, trust or other enterprise against expenses, including but not limited to attorneys' fees, costs, judgments, fines and amounts paid in settlement actually and reasonably incurred by him or her in connection with the defense or settlement of such action or suit if he or she acted in good faith and in a manner he or she reasonably believed to be in or not opposed to the best interests of the corporation, except that no indemnification shall be made in respect of any claim, issue or matter as to which such person shall have been adjudged to be liable for negligence or misconduct in the performance of a duty to the corporation unless and only to the extent that the court in which such action or suit was brought shall determine upon application that, despite the adjudication of liability but in view of all circumstances of the case, such person is fairly and reasonably entitled to indemnity for such expenses which such court shall deem proper.

Section 3. To the extent that a director, officer, employee or agent of the corporation, or any person who has performed volunteer services for or on behalf of the corporation, has been successful on the merits or otherwise in defense of any action, suit or proceeding referred to in section 1 or 2, or in defense of any claim, issue or matter therein, he or she shall be indemnified against expenses, including but not limited to, attorneys' fees and costs actually and reasonably incurred by him or her in connection therewith.

Section 4. Any indemnification under section 1 or 2, ordered by a court, shall be made by the corporation only as authorized in the specific case upon a determination that indemnification of the person in question is proper in the circumstances because he or she has met the applicable standard of conduct set forth in sections 1 or 2. Such determination shall be made.

- (a) By the Board of Directors by a majority vote of a quorum consisting of directors who were not parties to such action, suit or proceeding;
- (b) If such a quorum is not obtainable, or, even if obtainable if a quorum of disinterested directors so directs, by independent legal counsel in a written opinion; or
- (c) By the members.

Section 5. Expenses, including but not limited to costs and attorneys' fees incurred in defending a civil, criminal administrative or investigative action, suit or proceeding may be paid by the corporation in advance of the final disposition of such action, suit or proceeding as authorized in the manner provided in section 4 upon receipt of an undertaking by or on behalf of the person proposed to be indemnified to repay such amount unless it shall ultimately be determined that he or she is entitled to be indemnified by the corporation as authorized in this section.

Section 6. The indemnification provided by this section shall not be deemed exclusive of any other rights to which those indemnified may be entitled under any 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 office, and shall continue as to a person who has ceased to be a director, officer, employee, agent 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.

Section 7. The corporation shall have power to purchase and maintain insurance on behalf of any person who is or was a director, officer, employee or agent 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 or agent of another corporation, partnership, joint venture, trust or other enterprise against any liability asserted him or her and incurred by him or her in such any such capacity or arising out of his or her status as such, whether or not the corporation would have the power to indemnify him or her against such liability under this ARTICLE XII.

Proposed by: The Bylaws Committee

Rationale: This revised provision generally follows the language and format of Section 181.045 of the Wisconsin Nonstock Corporation Law ("Act"), which governs indemnification by Wisconsin nonprofit corporations such as the Council.

In keeping with the desire to provide for the broadest possible indemnification, the language of the ACT has been expanded. For example, whereas the Act provides that a corporation may indemnify certain persons, the revised provision states that the Council must indemnify those persons meeting the applicable standard of conduct (see sections 1 and 2). Further, the revised provision adds volunteers to the class of persons entitled to indemnification (see sections 1 and 2), and permits indemnification against judgments rendered in derivative suits in certain cases (see section 2). You should also note that the Council has the power to purchase insurance on behalf of certain persons whether or not they would be entitled to indemnification under the act (see section 7).

The Act and the revised provision provide that the indemnification provided for therein is not "exclusive of any other rights to which those indemnified may be entitled under any bylaw, agreement, vote of members or disinterested directors or otherwise...." Thus, the Council is not limited to the indemnification specifically enumerated in the Act or its Bylaws and may authorize indemnification in specific cases not covered by its Bylaws.

The boundaries of permissible indemnification are unclear. There does not appear to be any Wisconsin case law concerning indemnification under the Act, and the Wisconsin Secretary of State's office has confirmed in informal conversations that the outer limits of permissible indemnification would probably be decided on grounds of public policy. For example, it would most likely be impermissible to indemnify a person who had knowingly committed a

provision seeks to broaden the idemnification specifically permitted in the Act while stopping short of a clear cut violation of public policy.

Recommendation: The Bylaws Committee recommends adoption.

Bylaw Proposed Change #21

ARTICLE V - OFFICERS

Section 1. Enumeration

The officers of the Council shall be a president, a vice-president, a secretary, a treasurer, and a director representing each area and one director-at-large.

Section 2. Qualifications

Only members of a Member Board and nurses employed by or for Member Boards shall be eligible to serve as officers and shall have had at least one year of experience as a member or as an employee of a Member Board.

No more than three officers shall be from the same area.

No person may hold more than one elected office at the same time.

The president shall have been on the Board of Directors at least one year before being elected to office.

No officer shall hold elected or appointed office in a state, regional or national association or body if such an office might result in potential, actual or appearance of conflict of interest to the Council as determined by the Board of Directors of the Council in accordance with standing rules.

Section 3. Term of Office

The president, vice-president, secretary, and treasurer shall be elected for a term of two years or until their successors are elected. The president and vice-president shall be elected in even-numbered years and the secretary and treasurer shall be elected in odd-numbered years.

The directors shall be elected for a term of two years or until their successors are elected. Directors from odd-numbered areas shall be elected in the odd-numbered calendar years. Directors from even-numbered areas and the director-at-large shall be elected in even-numbered calendar years.

No state shall be allowed representation as an area director for more than two consecutive terms.

If a current officer agrees to be presented on the ballot for another office, the term of the current office shall terminate at the close of the session at which the election is held.

Rationale: To allow for greater participation by a wide variety of states within an area.

Recommendation: The Bylaws Committee does not recommend adoption because this provision would place a greater restriction on some officers than it would in others.

Bylaw Proposed, Change #22

PREAMBLE

The purpose ~~for which of~~ the National Council of State Boards of Nursing, Inc. ~~is organized~~ 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.

Proposed by: New York State Boards of Nursing,
Bylaw Committee

Rationale: Editorial change to reflect the current status of the NCSBN. The present wording seems to reflect the NCSBN when it was in the process of organizing.

Recommendation: Bylaw Committee recommends adoption.

NATIONAL COUNCIL OF STATE BOARDS OF NURSING, INC.

Report of Finance Committee to 1984 Delegate Assembly

The Finance Committee met on November 8 and 9, 1983, and again on March 22, 1984.

The Committee monitored expenditures for 1984 through review of quarterly reports and cash assets and investment statements, provided guidance in the area of establishing fees for activities and services and explored alternatives for maintaining the Council Headquarters.

Progress toward meeting goals as defined for Fiscal Year 1984 is as follows:

1. Monitoring the implementation of investment policy.

Investments were continuously monitored. Minor revision in use of investment counselor to be explored in 1985.

2. Define and develop the policies regarding reserves.

Policies forwarded to the Board of Directors in December. Additional revision of those policies suggested for 1985.

3. Prepare Fiscal Year 1985 budget.

The Budget for Fiscal Year 1985 was prepared to reflect those projects approved by the Board of Directors.

4. Consider financial impact of personnel policies.

Financial impact of changes were accommodated with recommendation for additional exploration into salary structure and personnel benefits.

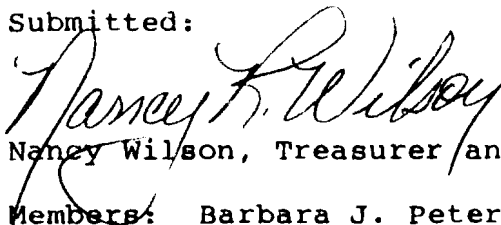
5. Consider financial impact of Long Range Planning Committee Proposals.

Not available for Finance Committee review in 1984. Goal to be carried forward to Fiscal Year 1985.

Based on Finance Committee purposes and keeping in mind future financial needs of the Council, the following goals were established for Fiscal Year 1985.

1. Monitor Fiscal Year 1985 Budget implementation.
2. Monitor investments and cash assets for 1985, through investment counselor.
3. Develop Fiscal Year 1986 Budget.
4. Consider financial impact of Long Range Planning Committee proposals. (Brought forward from 1984 goals)
5. Develop long range fiscal plans, 5 to 10 years.
6. Develop realistic Budget calendar and fiscal planning policies.
7. Investigate replacement of current computer system.

Submitted:



Nancy Wilson, Treasurer and Chairperson

Members: Barbara J. Peterson, Delaware,
Area IV
Gertrude Hodges, Maryland,
Area IV
Leota Rolls, Nebraska,
Area II

NATIONAL COUNCIL OF STATE BOARDS OF NURSING, INC.

EXAMINATION COMMITTEE

REPORT TO DELEGATE ASSEMBLY

Dates - July 1, 1983 to June 30, 1984

Recommendations to Delegate Assembly

The Examination Committee recommends adoption and implementation by October 1985 of the proposed test plan for the National Council Licensure Examination for Practical Nurses, which is based upon the Validity Study reported in Practical Nurse Role Delineation and Validation Study for the National Council Licensure Examination for Practical Nurses (Ference 1983).

Meeting Dates

During 1983-1984, the Examination Committee met at CTB/McGraw-Hill headquarters in Monterey, California, a total of four times: August 8-12, 1983; October 3-7, 1983; January 16-20, 1984; and May 7-11, 1984. The Committee met in Oak Brook, Illinois November 28 - 29 for a workshop with Ayres D'Costa on moving from a job analysis to a test plan; and November 30 - December 1 to begin work on developing the test plan. The Chairperson met with NCSBN Staff in Chicago February 14 and 15 and June 8, 1984 to work on the proposed PN test plan. The Chairperson attended the spring Area meetings on the following dates and places in order to discuss the proposed PN Test Plan: Area I in Phoenix, Arizona, March 30, 1984; Area II in Charleston, West Virginia, May 7, 1984; Area III in Austin, Texas, March 8 and 9, 1984; and Area IV in Portsmouth, New Hampshire on May 4, 1984.

Committee Members

<u>Area</u>	<u>Committee Members</u>	<u>Alternates</u>
I	Joan C. Bouchard, WY	Marcia L. Dale, WY
II	O. Patricia Diamond, KS	Debora J. DeKlein, MI
III	Louise Sanders, TX	Renatta Loquist, SC
IV	Harriet Johnson, NJ	Sr. Rita Jean Dubrey, NY
At Large	Sandra Byers, OH	
LPN Board	Ruth Jacobson, WA	Annie Mae Parker, TX

Test Development Activities

The following test development activities were completed:

1. Adopted NCLEX-PN, Form 484, Plans A & B, and approved 180 items to be administered as tryout items with Form 484.

Plan B was initiated after the 1983 Delegate Assembly approved changes in category weightings.
2. Adopted NCLEX-RN, Series 784 and approved 360 items to be administered as tryout items with Series 784.
3. Adopted NCLEX-PN, form 084 and approved 180 items to be administered as tryout items with Form 084.
4. Adopted NCLEX-RN, Series 285 and approved 360 items to be administered as tryout items with Series 285.
5. Evaluated and took action on Review Draft items as follows:
 - a. RN Review Draft items written January 1983 and reviewed by Member Boards Spring 1983. 528 items reviewed; 488 items approved for tryout; 39 items omitted and 11 referred for rewrite.
 - b. PN Review Draft items written October 1982 and reviewed by Member Boards Spring 1983. 119 items reviewed; 103 items approved for tryout; 16 omitted.
 - c. PN Review Draft items written October 1983 and reviewed by Member Boards Spring 1984. 251 items reviewed; 219 items approved for tryout; 32 items omitted.
6. Evaluated and took action on recycled items. These are items from previous tryouts and the pool of items.
 - a. RN items - reviewed 387 items; approved 356 for tryout and omitted 31 items.
 - b. PN items - reviewed 88 items; approved 85 for tryout and omitted 3 items.

7. Adopted Confidential Directions for:
 - a. PN item writing session - October 1983
 - b. RN item writing session - February 1984
 - c. NCLEX-PN, form 084 (October 1984);
Form 485 (April 1985)
 - d. NCLEX-RN, Series 784 (July 1984);
Series 285 (February 1985)

8. Evaluated licensing examinations following administration; this included a review of item performance, passing score, mean score, standard deviation, reliability, difficulty level, passing score ability estimate, and mean ability estimate. The following Series and Forms were evaluated:
 - a. NCLEX-PN, Form 483 and 083.
 - b. NCLEX-RN, Series 783 and Series 284.

The reliability statistics of the RN examination have continued to be at an acceptable level for shortening the examination as planned.

9. Evaluative reports regarding the RN and PN item writing sessions were received and appropriate action taken.

Development of Proposed PN Test Plan

The Examination Committee met in Oak Brook, Illinois, November 28 - December 1, 1983 and developed a draft of the proposed PN test plan. This plan was refined at the January and May 1984 meetings of the Examination Committee.

The Chairperson attended each of the Spring 1984 Area meetings to present the proposed test plan and explain the process used by the Committee in developing the PN test plan from the validity study. Briefly, the process used is as follows: a competency model was developed and used to transform the job analysis data into the test plan. In formulating the competency model, the Committee studied the list of activities identified in the job analysis. 82 of the 287 activities were eliminated using the following criteria:

- 2/3 of entry-level LPN's never performed the activity.
- 1/2 of entry-level LPN's never performed the activity, the critical index was 1 and the frequency of performance was less than 3 times a week.

The remaining 205 activities were then categorized according to the Dictionary of Occupational Titles using the approach recommended by Dr. D'Costa. The groupings resulted in a total of 16 categories; however, through negotiations, the Committee refined the categories, moving activities from one category to another in order to create more functional groupings. This necessitated making minor changes in the rankings.

As a result of the blendings of the activities, 8 categories emerged. Titles for the categories were agreed upon based on themes presented in the activity groupings. The 8 categories were then organized in rank order according to complexity of activities with I being high and VIII being low.

Category weightings were considered by identifying the critical index and frequency of performance as presented in the validity study. Based on this calculation, the appropriate percent of items to be used from each category in the test plan were derived.

Based upon the findings of the validity study, the Committee established the range of percent of questions representing the age range of clients and the types of practice settings.

Following the presentations at the Area meetings, substantial questions were raised by several of the Member Boards regarding some of the activities contained in the proposed test plan. There were four activities about which more than three Member Boards raised specific objections that the activities were outside the scope of practice permitted under their nursing practice acts and which could not be modified. These four activities were omitted:

1. evaluating care plans alone, without the assistance of an RN;
2. care planning alone, without the assistance of an RN;
3. discontinuing intravenous cathlons;
4. hanging unmedicated intravenous solutions.

Objections to two activities seemed to be based upon the wording. These activities were modified as follows:

<u>Original</u>	<u>Modified</u>
Teaching tracheostomy care	Assisting the RN in teaching tracheostomy care
Conducting neurological assessments	Observing client's neurological functioning, including level of consciousness and pupillary reactions.

A third category of activities about which single Member Boards raised objections were based upon the opinion that the activity was not at the entry level. Since the validity study does substantiate that these activities are entry level, and the individual Member Boards had been queried as to whether the activity is in the legal scope of practice, the activities are retained.

Further refinement of the proposed test plan includes the addition of general descriptions of the eight categories of practical nurse activities and examples of knowledge, skills and abilities necessary for performing the activities. The final draft of the proposed test plan is appended to this report.

Related Activities

1. Evaluated implementation of the Diagnostic Profiles which are sent to failure candidates for the RN and PN examinations and concluded that the profiles are functioning as planned. A report was sent to Member Boards.
2. Initiated a study to determine the feasibility of using items which have been compromised. The data will be available in August 1984, after which a policy on the prudent use of compromised items will be developed.
3. At the request of the Board of Directors, the Committee developed a draft of a Request for Proposal for a Study of Nursing Practice and a Job Analysis and Role Delineation of Entry Level Performance of Registered Nurses.

4. Developed a policy for key validation and for handling items in which the point biserial correlation changes from positive to negative after administration. Adopted a transition plan recommended by Test Service staff for selecting items from various sources, e.g., try-outs and reals analyzed by content area and try-outs and reals analyzed under new test plan. This plan will be re-evaluated after the phase-in of the point Biserial system is complete.
5. Reviewed the RN Performance Update Study and concluded that the study supports the current RN test plan as entry-level. The study also supports the current percent of weightings in the test plan categories.
6. An interim plan was developed to maintain currency of test items.
7. Adopted a policy for administration time with the shortened NCLEX-RN. Effective with Series 285, there will be 375 items divided into 4 booklets of approximately 90 items each. The time allowance for each book is 1 1/2 hours.
8. Conducted a survey of trend data for first-time candidates starting with NCLEX-RN, Series 280. Report of percent passing and mean score by type of candidate was distributed to Member Boards.
9. Policies and procedures were updated as needed and shared with Member Boards.

Goals and Objectives

The following goals and objectives were developed and adopted by the Examination Committee for the period August 1984 - August 1985:

1. Continue to monitor and evaluate the licensing examinations according to established policies and procedures. This involves working closely with the test service to
 - a. establish and adopt confidential directions for item writing sessions and for the series and forms of the examinations;
 - b. evaluate and determine disposition of Review Draft items following review by Member Boards.

- c. adopt series and forms of the examinations;
 - d. approve items for try-out purposes;
 - e. evaluate licensing examinations after administration, including difficulty level, reliability, fit statistics, point biserial correlation and content.
2. Implement the proposed new Test Plan for the National Council Licensure Examination for Practical Nurses. This involves evaluating the items in the pool for fit to the new test plan, revising and revalidating items that do not fit the new test plan, eliminating items that are inappropriate and recoding all items to the new test plan.
 3. Conduct informational workshops regarding the new PN Test Plan, if appropriate.
 4. Review policies and procedures and update as necessary.
 5. Continue to monitor the effectiveness of the diagnostic profiles; revise PN diagnostic profile based on the revised test plan.
 6. Hold four meetings in Monterey with the test service staff to accomplish test development activities.

Motion

The Examination Committee moves that the proposed Test Plan for the National Council Licensure Examination for Practical Nurses be adopted and implemented with the October 1985 administration.

Submitted by

Louise Sanders,
Chairperson

LS/mct

NATIONAL COUNCIL OF STATE BOARDS OF NURSING, INC.

PROPOSED TEST PLAN FOR THE NATIONAL COUNCIL LICENSURE
EXAMINATION FOR PRACTICAL NURSESIntroduction

Entry into the practice of practical nursing in the United States and its territories is regulated by the licensing authorities in the jurisdictions. Each jurisdiction requires a candidate for licensure to pass an examination that measures the competencies needed to perform safely and effectively as a newly licensed entry level practical nurse. /1 Developed by the National Council of State Boards of Nursing, Inc., the National Council Licensure Examination for Practical Nurses is the examination used by those jurisdictions whose boards of nursing are Council members.

The initial step in developing the examination for practical nurse licensure was the preparation of a test plan to function as a guide for selecting content that represents the behaviors to be tested. The test plan reflects practical nursing practice as identified in the job analysis described in PRACTICAL NURSE ROLE DELINEATION AND VALIDATION STUDY FOR THE NATIONAL COUNCIL LICENSURE EXAMINATION FOR PRACTICAL NURSES (Ference 1983). The activities identified in the practical nurse job analysis were analyzed in relation to the complexity of managing data, the complexity of interrelating with people and the complexity of physically attending to objects or things required to perform the activity. /2 This process produced a competency model of entry-level practical nursing which includes practical nursing activities, content, and practice settings. The test plan, which was derived from the competency model, provides a concise summary of the content and scope of the examination and serves as a guide for the candidates preparing to write the examination and for those who develop it.

Footnotes

/1 The job analysis identifies the entry level practical nurse as a newly licensed practical nurse who has been employed full time for less than seven months.

/2 United States Department of Labor, DICTIONARY OF OCCUPATIONAL TITLES. Washington, D.C.: Superintendent of Documents, 1965.

Structure of the Test Plan

The practical nurse test plan consists of three independently weighted scales: practical nursing activities, practice settings and age ranges of clients. These scales are related directly to the findings of the job analysis. There are eight categories of practical nursing activities which are weighted according to their criticality and frequency of performance and ranked according to complexity using the organizing framework of data, people and things. The categories and the range of percent of questions for each category included in the test plan are listed below in rank order with the first category representing the most complex activities.

<u>Categories</u>	<u>Percent Range</u>
1. Communicating and Participating in Plans of Care	3-7
2. Administering Special Therapies: Medications/Oxygen	13-17
3. Providing for Therapeutic Needs	18-22
4. Providing for Basic Health Needs	8-12
5. Collecting and Recording Information	17-21
6. Maintaining Safety	14-18
7. Promoting Hygiene and Self Care	10-14
8. Maintaining a Healthy Environment	1-5

Categories, Specific Activities, and
Knowledge, Skills, and Abilities

The eight categories of practical nursing activities are described below. The specific activities, which were identified by the job analysis, are listed in the respective categories in order of criticality and frequency. Also included are examples of knowledge, skills, and abilities necessary to perform the activities.

1. COMMUNICATING AND PARTICIPATING IN PLANS OF CARE

The practical nurse participates as a member of the health care team in developing and evaluating plans of care, provides emotional support and guidance, implements health teaching as appropriate to the scope of practice, and communicates with clients and their significant others.

Activities

- 1.01 Obtaining Guidance for Difficult Communication
- 1.02 Instructing Clients on Preventive Health
- 1.03 Explaining the Reasons for a Procedure for Physical and Special Examinations
- 1.04 Care Planning with an RN
- 1.05 Explaining the Activities During a Procedure which is Part of a Physical or Special Examination
- 1.06 Evaluating Care Plans with an RN
- 1.07 Supporting the Family of the Dying Client
- 1.08 Providing Verbalization Time for the Dying Client
- 1.09 Obtaining Consent for Nursing Care
- 1.10 Instructing Family about Transfers and Discharges
- 1.11 Assisting the RN in Teaching Tracheostomy Care

Knowledge, Skills and Abilities

In order to perform these activities, a candidate should possess knowledge, skills, and abilities in areas which include but are not limited to the following examples: body structure and function; nursing process; basic human needs common to all individuals; principles of therapeutic communication; mental health concepts; basic teaching-learning principles; effect of the client's background, including age, occupation and family situation; and community agencies concerned with health maintenance.

2. ADMINISTERING SPECIAL THERAPIES: MEDICATIONS/OXYGEN

The practical nurse participates as a member of the health care team in administering prescribed medications and oxygen and monitoring intravenous therapy.

- 2.01 Administering Oral Medications
- 2.02 Withdrawing Medicine from Vials
- 2.03 Administering Intramuscular Injections
- 2.04 Administering Topical Medications
- 2.05 Withdrawing Medicine from Ampuls
- 2.06 Checking the Oxygen Flowmeter
- 2.07 Administering Subcutaneous Medications
- 2.08 Administering Suppository Medications

- 2.09 Turning on the Appropriate Liter Flow of Oxygen
- 2.10 Administering Eye Medications
- 2.11 Placing the Oxygen Apparatus
- 2.12 Selecting the Medication Route when Two are Prescribed
- 2.13 Discontinuing Intravenous Needles
- 2.14 Recognizing Adverse Reactions to Intravenous Therapy
- 2.15 Administering Medication Soaks
- 2.16 Administering Ear Medications
- 2.17 Administering Nasal Medications
- 2.18 Administering Medications by Inhalation
- 2.19 Applying the Oxygen Delivery Device to the Client
- 2.20 Stopping an Intravenous Infusion
- 2.21 Administering Intradermal Injections for Immunizations
- 2.22 Regulating Intravenous Flow

Knowledge, Skills and Abilities

In order to perform these activities, a candidate should possess knowledge, skills, and abilities in areas which include but are not limited to the following examples: therapeutic effects, side effects, and untoward effects of medications and oxygen used to treat commonly recurring health conditions; calculation of medication dosages; administration of medications and oxygen by appropriate methods and routes; body structure and function; signs of shock and oxygen deficiency; and medical and surgical asepsis.

3. PROVIDING FOR THERAPEUTIC NEEDS

The practical nurse participates as a member of the health care team in providing therapeutic and life-saving procedures, prepares clients for surgery, cares for clients post-operatively, and assists clients in maintaining therapeutic regimens.

Activities

- 3.01 Giving Postoperative Care
- 3.02 Correcting Posture and Balance during Ambulation
- 3.03 Changing Sterile Dressings
- 3.04 Changing Surgical Dressings
- 3.05 Giving Preoperative Care
- 3.06 Applying Bandages
- 3.07 Catheterizing Female Urinary Tract
- 3.08 Checking Circulation During Cast Care
- 3.09 Applying Compresses
- 3.10 Removing Indwelling Catheters

- 3.11 Inserting Indwelling Catheters
- 3.12 Applying Soaks
- 3.13 Suctioning the Nasopharynx
- 3.14 Inducing Deep Breathing Exercises
- 3.15 Inducing Coughing Exercises
- 3.16 Inserting Straight Urinary Catheters
- 3.17 Conducting Nasogastric Irrigations
- 3.18 Applying Binders
- 3.19 Conducting Intermittent Continuous Bladder Irrigations
- 3.20 Assisting with Walking with Walkers
- 3.21 Packing Deep Wounds
- 3.22 Applying Packs
- 3.23 Stimulating Urination
- 3.24 Catheterizing Male Urinary Tract
- 3.25 Irrigating Colostomies
- 3.26 Administering Cleansing Enemas
- 3.27 Removing Nasogastric Tubes
- 3.28 Preparing Skin for Aseptic Procedures
- 3.29 Administering Gastrostomy Feedings
- 3.30 Irrigating Wounds
- 3.31 Giving Ostomy Care
- 3.32 Assisting with Walking with Canes
- 3.33 Protecting Newly Applied Casts
- 3.34 Performing CPR
- 3.35 Maintaining Skeletal/Skin Traction
- 3.36 Covering Rough Edges of Dry Casts
- 3.37 Assisting with Walking with Crutches
- 3.38 Administering Gastric Gavage
- 3.39 Providing Tracheostomy Care
- 3.40 Providing Cystocatheter Care
- 3.41 Changing Tracheostomy Ties
- 3.42 Administering Oil-Retention Enemas
- 3.43 Conducting Postural Drainage
- 3.44 Irrigating the Vagina
- 3.45 Assisting with Walking with Braces
- 3.46 Irrigating the Throat and Mouth
- 3.47 Administering Medicated Retention Enemas
- 3.48 Irrigating Eyes
- 3.49 Maintaining Patency of Tubes
- 3.50 Conducting Endotracheal Suctioning

Knowledge, Skills and Abilities

In order to perform these activities, a candidate should possess knowledge, skills, and abilities in areas which include but are not limited to the following examples: therapeutic and untoward effects of heat and cold; body structure and function; signs and symptoms of shock, hemorrhage, and infection; medical and surgical asepsis; and factors that promote wound healing.

4. PROVIDING FOR BASIC HEALTH NEEDS

The practical nurse participates as a member of the health care team in providing therapies, hygiene and nutritional needs, and supporting and adjusting the client's body.

Activities

- 4.01 Positioning and Turning
- 4.02 Reducing Pressure Areas
- 4.03 Supporting Body Parts
- 4.04 Assisting clients in and out of Bed
- 4.05 Conducting Range of Motion Exercises
- 4.06 Massaging Pressure Areas
- 4.07 Administering Perineal Care
- 4.08 Applying Heating Pads
- 4.09 Applying Ice Applications
- 4.10 Evaluating Suitability of Food
- 4.11 Assisting with Showers
- 4.12 Applying Heating Lamps
- 4.13 Making Occupied Beds
- 4.14 Giving Partial Baths
- 4.15 Giving Tub Baths
- 4.16 Giving Complete Baths
- 4.17 Inserting Rectal Tubes
- 4.18 Giving Alcohol or Tepid Baths for Systemic Temperature Modification
- 4.19 Giving Tepid Baths for Local Temperature Modification
- 4.20 Giving Sitz Baths
- 4.21 Helping Clients Select Food
- 4.22 Interpreting the Nutritional Value of Foods

Knowledge, Skills and Abilities

In order to perform these activities, a candidate should possess knowledge, skills, and abilities in areas which include but are not limited to the following examples: heat regulating mechanism; principles of proper body mechanics; maintenance of healthy skin and avoidance of factors contributing to skin breakdown; principles of correct body alignment; appropriate comfort measures; principles of normal nutrition; and dietary modifications for commonly recurring health conditions.

5. COLLECTING AND RECORDING INFORMATION

The practical nurse measures and records client's baseline data; assists in special examinations and procedures; and collects specimens.

Activities:

- 5.01 Recording Measurements such as TPR
- 5.02 Measuring Respirations
- 5.03 Measuring Radial Rates
- 5.04 Measuring and Recording Output
- 5.05 Measuring and Recording Intake
- 5.06 Measuring Apical Rates
- 5.07 Measuring Temperatures
- 5.08 Recording Measurements
- 5.09 Writing Nurses Notes
- 5.10 Measuring Apical/Radial Rates
- 5.11 Measuring Pedal Pulses
- 5.12 Observing Client's Neurological Functioning,
including level of consciousness and pupillary
reactions
- 5.13 Recording Miscellaneous Specimens
- 5.14 Obtaining Specimens for Urine Culture
- 5.15 Measuring Femoral Pulses
- 5.16 Measuring Weight
- 5.17 Measuring Fetal Heart Rates
- 5.18 Measuring Shock Symptoms
- 5.19 Measuring Height
- 5.20 Obtaining Specimens for Wound Culture
- 5.21 Obtaining Specimens for Throat Culture
- 5.22 Measuring Sight
- 5.23 Obtaining Specimens for Skin Culture
- 5.24 Auscultating Breath Sounds
- 5.25 Obtaining Specimens for Nose Culture
- 5.26 Assisting Physicians with Procedures
- 5.27 Obtaining Specimens for Vaginal Cultures
- 5.28 Recording that a Procedure is Done
- 5.29 Measuring Hearing
- 5.30 Assisting Physicians with Neurological
Examinations
- 5.31 Assessing Cardiac Status

Knowledge, Skills and Abilities

In order to perform these activities, a candidate should possess knowledge, skills, and abilities in areas which include but are not limited to the following examples: signs and symptoms of major health problems; factors predisposing to illness; purposes of special examinations; client's response to illness; body structure and function; differentiation between normal and abnormal responses; legal aspects of patient's record; and principles of charting.

6. MAINTAINING SAFETY

The practical nurse maintains sterile and aseptic technique and provides for the client's safety and rights.

Activities

- 6.01 Handwashing
- 6.02 Positioning Side Rails/Bed Height
- 6.03 Placing Signal Cords
- 6.04 Maintaining Safety from Fire
- 6.05 Insuring that Client's Rights are Honored
- 6.06 Opening Sterile Gloves
- 6.07 Applying Restraints
- 6.08 Applying Sterile Gloves
- 6.09 Transcribing Prescriptions/Orders
- 6.10 Observing Client's Bill of Rights
- 6.11 Self-gloving
- 6.12 Pouring Sterile Solutions
- 6.13 Maintaining Isolation
- 6.14 Grasping a Falling Client
- 6.15 Operating Special Beds
- 6.16 Adding Water to Oxygen Humidifiers
- 6.17 Self-gowning
- 6.18 Assessing Food Allergies
- 6.19 Positioning Clients on Side During Seizure
- 6.20 Moving Nearby Objects During Seizure
- 6.21 Calling for Help During Seizure
- 6.22 Transferring Sterile Forceps
- 6.23 Enforcing Hospital Regulations
- 6.24 Informing Clients of Evacuation Procedures
- 6.25 Monitoring Seizure Patterns
- 6.26 Surgical Scrubbing

Knowledge, Skills and Abilities

In order to perform these activities, a candidate should possess knowledge, skills, and abilities in areas which include but are not limited to the following examples: medical and surgical asepsis; spread of infectious diseases; isolation techniques, theories of combustion and elimination of fire hazards; client's Bill of Rights; hazards of immobility; seizure patterns and seizure precautions; body mechanics; and fire and disaster plans.

7. PROMOTING HYGIENE AND SELF-CARE

The practical nurse assists the client in activities of daily living; performs basic hygienic measures for the client when necessary; and orients the client to the environment.

Activities

- 7.01 Using Transportation Equipment
- 7.02 Applying Lotion to Skin
- 7.03 Assisting Clients to use Bedpans
- 7.04 Assisting Clients with Elimination/Bathroom
- 7.05 Assisting Clients to use Urinals
- 7.06 Transferring Clients out of Bed
- 7.07 Administering Mouth Care
- 7.08 Assisting Clients to use Bedside Commode
- 7.09 Giving Between-meal Feedings
- 7.10 Removing Irritants from the Environment
- 7.11 Transferring Clients within an Agency
- 7.12 Feeding Adult Clients
- 7.13 Changing Clothing
- 7.14 Orienting to Surroundings
- 7.15 Giving Backrubs
- 7.16 Positioning Clients for Meals
- 7.17 Explaining Hospital Regulations
- 7.18 Cleansing Clients Between Baths
- 7.19 Combing Client's Hair
- 7.20 Informing about the Hospital and Personnel
- 7.21 Shaving Clients
- 7.22 Transferring or Discharging Clients outside
of the Agency
- 7.23 Shampooing Hair
- 7.24 Providing Postmortem Care

Knowledge, Skills and Abilities

In order to perform these activities, a candidate should possess knowledge, skills, and abilities in areas which include but are not limited to the following examples: comfort and hygiene measures; activities of daily living; normal nutrition; elimination patterns; principles of body mechanics; principles of communication and interpersonal relations.

8. MAINTAINING A HEALTHY ENVIRONMENT

The practical nurse prepares the client's environment by maintaining and cleaning equipment and supplies; and provides for the safe-keeping of the client's possessions.

- 8.01 Storing Stock Drugs
- 8.02 Checking Emergency Equipment
- 8.03 Checking Emergency Supplies
- 8.04 Making Unoccupied Beds
- 8.05 Cleaning Equipment and Utensils
- 8.06 Making Anesthetic/Surgical Beds
- 8.07 Serving or Collecting Food Trays
- 8.08 Sterilizing Equipment and Supplies
- 8.09 Cleaning the Clinical Unit Service Areas
- 8.10 Inventorying Client's Possessions
- 8.11 Cleaning Rooms
- 8.12 Storing Clients's Possessions in a Safe Place
- 8.13 Checking Stock Equipment Function
- 8.14 Cleaning Furniture
- 8.15 Conducting Terminal Disinfection

Knowledge, Skills and Abilities

In order to perform these activities, a candidate should possess knowledge, skills, and abilities in areas which include but are not limited to the following examples: medical and surgical asepsis; principles of proper waste disposal; effects of sensory overload; client's Bill of Rights; environmental controls; purpose of emergency supplies; and functioning of emergency equipment.

Practice Settings and Age Ranges

The percent of questions that relate to specific practice settings and to the age ranges of clients follow the findings as described in the job analysis. These weightings are used in developing the clinical situations for the examination. The percent of questions representing the various types of practice settings and the age ranges of clients are as follows:

Practice Settings

Acute Care Settings - 65 to 75%
 Extended Care Settings - 15 to 25%
 Ambulatory Care Settings - 5 to 15%

Age Ranges of Clients

Birth to 19 years - 5 to 15%
 20 to 65 years - 55 to 65%
 66 years and older - 25 to 35%

Categories of Human Functioning

In order to provide a structure for the content to be tested in the examination, the theoretical model of human functioning is used. The human functioning model explains the major alterations that occur during illness. Nursing activities, organized within the framework of the nursing process, are performed in situations that include one of the categories of human functioning. The categories of human functioning are described below. Although the categories of human functioning are used to organize the content, no specific weight for each category will be assigned.

1. Protective Functions

The client's capacity or ability to maintain defenses and prevent physical and chemical trauma, injury, infection and threats to health status.

Examples: Nursing care situations and nursing measures which include but are not limited to the following content areas: communicable diseases (including sexually transmitted diseases), immunizations, physical trauma and abuse, asepsis, safety hazards, poisoning, skin disorders, preoperative care and postoperative complications.

2. Sensory-Perceptual Functions

The client's capacity or ability to be aware of stimuli, to understand stimuli and to respond to stimuli.

Examples: Nursing care situations and nursing measures which include but are not limited to the following content areas: auditory, visual and verbal impairments, sensory deprivation, aphasia, brain tumors, laryngectomy, organic brain syndrome, body image, reality orientation, cerebral vascular accident, and seizure disorders.

3. Comfort, Rest, Activity and Mobility

The client's capacity or ability to maintain mobility, desirable level of activity, and adequate sleep, rest and comfort.

Examples: Nursing care situations and nursing measures which include but are not limited to the following content areas: joint impairment, body alignment, pain, sleep disturbances, activities of daily living, neuromuscular impairment, musculoskeletal impairment, and endocrine disorders that affect activity.

4. Nutrition

The client's capacity or ability in maintaining the intake and processing of the essential nutrients.

Examples: Nursing care situations and nursing measures which include but are not limited to the following content areas: normal nutrition, diet in pregnancy and lactation, obesity, conditions such as diabetes, gastric disorders, and metabolic disorders that primarily affect the nutritional status.

5. Growth and Development

Maturation processes occurring throughout the life span.

Examples: Nursing care situations and nursing measures which include but are not limited to the following content areas: child-bearing, child rearing, normal physical growth and development throughout the life cycle, conditions that interfere with the maturation process or create crises, changes in aging, sterility, and conditions of the reproductive system.

6. Fluid-Gas Transport

The client's capacity or ability in maintaining fluid-gas transport.

Examples: Nursing care situations and nursing measures which include but are not limited to the following content areas: cardio-pulmonary diseases, cardio-pulmonary resuscitation, anemias, hemorrhagic disorders, leukemias, infectious pulmonary diseases, dehydration, and edema.

7. Psycho-Socio-Cultural Functions

The client's capacity or ability to function in intrapersonal, interpersonal, intergroup and socio-cultural relationships.

Examples: Nursing care situations and nursing measures which include but are not limited to the following content areas: grieving, death and dying, substance abuse, self-concept, general community resources, spiritual needs, life crises, gross signs of emotional and mental health and development and basic principles of interpersonal communication.

8. Elimination

The client's capacity or ability in maintaining functions related to relieving the body of waste products.

Examples: Nursing care situations and nursing measures which include but are not limited to the following content areas: conditions of the gastro-intestinal system such as vomiting, diarrhea, constipation, ulcers, neoplasms, colostomy, ileostomy, and hernia. Conditions of the urinary system such as kidney stones, neoplasms, renal failure, and prostatic hypertrophy.

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NATIONAL COUNCIL OF STATE BOARDS OF NURSING, INC.

ADMINISTRATION OF EXAMINATION COMMITTEE

ANNUAL REPORT

RECOMMENDATIONS:

1. The Committee recommends the following dates for the 1984 administrations of the examination: RN February 2-3 (W-Th) and July 13-14 (W-Th), PN April 13 (W) and October 12 (W).
2. The Committee recommends as alternate dates for the administration of the examinations in case of disaster those dates that are specified in the addendum to this report.
3. The Committee recommends that there be no change in PN dates of administration of the examination.
4. The Committee recommends that Member Boards be given the options of using a professionally prepared tape, a reader or a non-professionally prepared tape for administration of the examination to handicapped candidates who need the examination read.

The Committee met three times: October 24-26, 1983; February 27-29, 1984; and May 21-23, 1984. Three activities had been assigned to the Committee by the Delegate Assembly in 1983: study dates for the administration of the NCLEX-PN; study procedures for candidate review and appeal of examination questions and make recommendations to the Delegate Assembly by 1986; and study methods of producing tapes for handicapped candidates at a reasonable cost.

The Committee determined that in order to prepare a recommendation regarding PN administration dates more information was necessary. A questionnaire was distributed to all Member Boards and information was requested from CTB/McGraw-Hill and the Examination Committee. 49 out of 52 jurisdictions responded to the questionnaire. The survey showed an overwhelming support for no changes in examination dates. Some jurisdictions reported that schools had changed their calendars because of the established April and October dates. The Examination Committee and the test service indicated that changes of examination dates would have an impact on production and distribution schedules, including the scheduling of groups involved in examination preparation. The Committee did not request an in-depth study by the test service of feasible dates because of the response from the jurisdictions.

In exploring the production of tapes for handicapped candidates at a reasonable cost, the Committee gathered data from multiple sources. The Committee requested information from the following sources:

Member Boards who have had experience with handicapped candidates, professional groups who have had experience with testing handicapped candidates, the test service, and the Council's attorney. The results of the survey of other organizations showed that two organizations used tapes. Questions were posed to these organizations. Who prepared the tapes? How many questions were accommodated on each tape? What was the cost of preparation? How was security maintained? Have any legal challenges been sustained regarding the quality of the tapes? The organizations did not respond to these questions.

The test service presented two sample tapes. The Committee listened to both tapes, one professionally prepared tape and one non-professionally prepared tape. The professionally prepared tape was obviously superior in quality but also expensive at \$9,000.00. Preparation of the non-professionally prepared tape would cost \$5,000.00. This cost includes one (1) set of tapes. Each set thereafter would be \$100.00 per set. The expense per candidate in either instance will be contingent upon the number of candidates per examination that would use the tape. The Council's attorney advised the Committee that the obligation in responding to handicapped candidates is to provide "reasonable accommodation". In this context NCSBN is not obligated to provide professionally prepared tapes. The queried jurisdictions reported a total of 36 handicapped candidates for whom the examination procedure has been modified. 30 of the 36 candidates passed the examination. Readers were used by 31 of the 36 candidates.

In light of information obtained, the Committee proposed that Member Boards be provided with three options for administering the examination to handicapped candidates who need the examination read: professionally prepared tape, non-professionally prepared tape, or reader.

In the Committee's study of procedures for candidate review and appeal of the examination, 33 organizations were contacted for information, and 17 organizations responded. No organization has a well delineated procedure for appeal of examination questions. To further the Committee's research on this assignment, the Council's attorney was consulted. Based on the information obtained, the Committee will begin drafting an appeal policy proposal at its fall meeting.

The Committee received several assignments from the Board of Directors during the year. These assignments included the development of methods for identifying secure materials and investigative responsibilities. As to handling review drafts, the Committee recommended that each Board of Nursing develop an office procedure to handle all materials from CTB/McGraw-Hill as secure material to be opened only by the individuals designated in security measures. The Committee requested that CTB/McGraw-Hill place a "caution" notice inside the review draft containers on the top of the contents alerting anyone opening the container that the contents are secure materials to be handled only by the designated individuals.

With respect to investigative responsibilities, the Committee established the following procedure: as soon as a possible break in security is identified, the jurisdiction's procedures are requested so that the full procedures can be reviewed in conjunction with the incident report. The Committee prepared a Guide for Reporting Unusual Incidents which has been distributed to the jurisdictions for their reference. The Committee has developed a list of signs that suggest tampering, a damaged container report and a damaged packet report. It is believed that these tools will aid in the identification and reporting of possible security breaks and will be useful in identifying patterns.

The Committee has also developed a condensed version of the Security Standards that will be incorporated as part of the Compliance Report. Also, an orientation packet has been prepared for distribution to jurisdictions when a new individual becomes responsible for the implementation of the Security Measures. When the orientation packet is sent, a resource person will be identified as a contact.

Finally, the Committee proposed a change in the bylaw relating to the duties involved in conducting an investigation. The proposal would delete the references to answer sheets and the ten-day deadline for presentation of a written report to the President and Executive Director following notification of an incident.

In carrying out the duties of the Committee specified in the bylaws, the following activities occurred:

1. Following a review of the Security Measures, the Committee determined that the present standards are appropriate and decided that a review would be done on a routine basis every year at its winter meeting.
2. In order to evaluate proposed and actual compliance of Member Boards, the test service and others against established criteria and procedures for maintaining security, the Committee audited the procedures of two jurisdictions. Because the 1983 Delegate Assembly included the test service in their audit, a draft of Security Standards for the test service has been developed.
3. Investigations have been carried out for each alleged failure to maintain security. Five breaks in Security Measures were identified. The jurisdictions involved were asked to take corrective action and to amend the procedures used to implement the Security Measure standards. Recommendations were made to the Board of Directors to issue reprimands. The Committee approved the Security Measures presented by American Samoa and approved revised Security Measures for several jurisdictions. In calling for and reviewing the procedures for those jurisdictions in which there was a suspected break in security, the Committee devised a list of procedures that are to be submitted that will aid in the assessment of the reported incident.

In one investigation the Committee asked for a legal opinion regarding admission of U.S. immigration officials to an examination center. Legal counsel determined that entrance to an examination center during administration can be denied unless the government official possesses a search warrant. This opinion has been shared with Member Boards via the NCSBN Newsletter.

Jurisdictions continue to request modifications in administration of the examination. During 1983-1984, 16 requests were approved: 5 requests were for additional time and a reader and the remainder were for additional time.

4. The Committee selected proposed 1994 dates for examination administrations as well as alternate examination administration dates from October 1984 through October 1994 that are to be used in case of a disaster.

The goals and objectives established by the Committee for 1983-1984 have been met. The activities and outcomes related to most of the goals and objectives have been covered under other topics in this report. In addition, a goal was to evaluate the Manual for Administration of the Examination and to make revisions as necessary. Changes that were made provided for consistency in grammar, for appropriate placement of statements, for clarification, and for inclusion of the procedure for management of candidates who are ill. The candidate brochures were reviewed and reorganized for clarity and for consistency with statements in the Manual for Administration. The packet control sheet information was reviewed and revised so that the statements were consistent with the manual of Administration.

Also, the Manual of Administration was discussed in light of the reduced number of questions that will be effective with 285. The examination periods will be ninety minutes. With two examination periods per day, the maximum testing time per day would be three hours. The Committee considered alternate examination period arrangements as follows:

1. Increase the number of questions per book so that three periods two hours in length could be implemented.

The following information was received from the test service concerning this proposal. If there were three (3) books, each book would contain approximately 124 items. To accommodate the increase in the number of items per book from 93 to 124, there would need to be an increase in the number of pages in each book.

Under the current contract, there are 120 items per book. Each book contains the maximum number of pages (24). In order to add an additional four (4) items per book, another signature must be added to each book. This additional signature would increase the number of pages from 24 to 28 per book. There is no pinhole machine to pinhole more than 24 pages. The Committee discussed

sacrificing the note page. The amount of useable space for test questions is insufficient to accommodate the number of questions necessary and there would be the additional security considerations for separate note paper.

2. Administer three books of the examination the first day and the fourth book the second day.

This would entail 10 hours the first day taking into account admission, identification of candidates, distribution of test booklets, completion of the cover information, the examination periods, and the release of candidates between examination periods. The Committee appreciates that smaller jurisdictions would not require as much time as larger jurisdictions. However, for security reasons the schedules have to be consistent. The maintenance of security could be taxed by the pressure to finish more quickly. The candidates would still have to return for a second day of testing so that there are no significant advantages for the candidates in this arrangement.

The Committee concluded that since no additional pages can be added to the booklets, since additional questions can not be added within the space available, since maintenance of security could be jeopardized by increasing the number of examination periods in a day, and since there would be no significant advantages for candidates as long as there are two days involved the schedule for the administration of NCLEX-RN will involve two days with two 90 minute examination periods each day.

The Committee responded to concerns expressed by a number of jurisdictions. One jurisdiction was concerned about the amount of time it took for the arrival of test booklets at the test service. The Committee determined that shipments should arrive within 4-6 working days following the date of shipment. The test service and the jurisdictions are requested to inform NCSBN of any shipments that exceed this. Delayed shipments are a security concern. Another jurisdiction expressed concern about the delay in feedback about missing items in a shipment. The Committee has requested that the Test Service report immediately any items such as a plastic bag that are missing. A missing item could indicate that tampering has occurred.

The Committee reviewed the reports of the test service following the administration of each examination. At the fall and spring meeting, the Committee met with Dr. Alexandria Francis. Based on the reports, jurisdictions were notified of problems created when procedures and deadlines were not followed. The Committee drafted an Examination Preparation Checklist and is making it available for use by all jurisdictions. Based on positive feedback from jurisdictions, the Committee recommended permanent deletion of the black bar from around the test booklet number.

The Committee established the following goals and objectives for 1984-1985:

1. To evaluate and to recommend changes or modifications in the criteria and procedures for the security measures if a need for revision or additions is identified.
2. To develop a proposal of policies and procedures for candidate review and appeal of examination questions for presentation to the Delegate Assembly in 1986.
3. To further develop policies and procedures for investigation of violations of the contract and/or security measures.
4. To review and evaluate problems that are identified which relate to examination administration and make recommendations to correct the problem.
5. To evaluate the Manual for Administration of the Examination and to recommend revisions as necessary.
6. To continue using established committee policies and procedures such as the cyclical review of jurisdiction procedures for implementing the security measures.
7. To evaluate and to revise Committee policies and procedures as necessary.

The budget proposed by the Committee is \$15,350. This amount would cover three meetings, a conference call, and the travel expenses for the Chairperson to attend the Delegate Assembly.

The Committee moves that:

1. The proposed 1994 examination administration dates be approved.
2. The alternate administration dates for use in case of a disaster be approved.
3. There be no change in the PN dates of administration of the examination.
4. Member Boards be given the option of using a reader, professionally prepared tape or non-professionally prepared tape for administration of the examination to handicapped candidates that need the examination read.

Submitted by the Committee

JoAnne Biringier, South Carolina, Area IV
 Leola Daniels, Idaho, Area I
 Jan Harris, Oklahoma, Area II
 Sandra MacKenzie, Chairperson, Minnesota, Area II
 Gail McGuill, Alaska, Area I
 Janette Packer, Pennsylvania, Area IV

NATIONAL COUNCIL OF STATE BOARDS OF NURSING, INC.

ALTERNATE EXAMINATION DATES FOR USE IN CASE OF DISASTER
PROPOSED BY THE ADMINISTRATION OF EXAMINATION COMMITTEE

National Council Licensure Examination for Registered Nurses
(NCLEX-RN)

1985: March 12 - 13 (T-W) and September 10 - 11 (T-W)
 1986: March 11 - 12 (T-W) and September 9 - 10 (T-W)
 1987: March 10 - 11 (T-W) and September 15 - 16 (T-W)
 1988: March 8 - 9 (T-W) and September 7 - 8 (W-Th)
 1989: March 14 - 15 (T-W) and September 12 - 13 (T-W)
 1990: March 13 - 14 (T-W) and September 11 - 12 (T-W)
 1991: March 12 - 13 (T-W) and September 4 - 5 (W-Th)
 1992: March 10 - 11 (T-W) and September 15 - 16 (T-W)
 1993: March 9 - 10 (T-W) and September 8 - 9 (W-Th)
 1994: March 8 - 9 (T-W) and August 31 - September 1 (W-Th)

National Council Licensure Examination for Practical Nurses
(NCLEX-PN)

1984: November 14 (W)
 1985: May 14 (T) and November 13 (W)
 1986: May 13 (T) and November 18 (T)
 1987: May 12 (T) and November 17 (T)
 1988: May 10 (T) and November 16 (W)
 1989: May 16 (T) and November 15 (W)
 1990: May 15 (T) and November 14 (W)
 1991: May 14 (T) and November 13 (W)
 1992: May 12 (T) and November 10 (T)
 1993: May 11 (T) and November 9 (T)
 1994: May 10 (T) and November 8 (T)

NATIONAL COUNCIL OF STATE BOARD OF NURSING, INC.

Nursing Practice and Standards Committee

Annual Report 1983-1984

The Nursing Practice and Standards Committee met three times during the past year. Committee members who participated in the Committee's activities were: Nancy Cross, Amy Hecht, Sr. Lucie Leonard, Ann Mowery, Kathleen Sabatier, and Therese Sullivan, Chair.

At the Council's 1983 Convention, the Delegate Assembly adopted the Committee's draft of the Model Administrative Rules and Regulations for Nursing, which was subsequently published by the National Council for distribution. Response from Member Boards indicates the Model Rules and Regulations have been useful in planning for and initiating change in rules and regulations in the respective jurisdictions.

The three meetings of the Committee this year have been devoted to developing statements on rewriting NCLEX and Model Legal Standards and to the review of literature on current regulatory practices relative to advance practice and continued competence. Effort has been devoted, also, to the development of position papers addressing the regulation of advance nursing practice and continued competence with recommendations regarding positions to be taken relative to both. Due to the lack of substantive data to support a statement of recommendation at this time, work on position papers for these two issues will continue.

Committee objectives for 1984-1985 are as follows:

1. Continue work on development of a position paper addressing the regulation of advanced practice by boards of nursing.
2. Continue work on development of a position paper addressing continued competence.
3. Liaison work with the American Nurses Associations' Cabinet on Nursing Practice relative to common interest and goals for advanced practice.

The following recommendations are submitted to the 1984 Delegate Assembly for its consideration:

1. The Nursing Practice and Standards Committee recommends adoption of the Statement on Rewriting the NCLEX (attachment A).
2. The Nursing Practice and Standards Committee recommends adoption of the Statement on Model Legal Standards (attachment B).

Submitted by:

Therese Sullivan
Chairperson

NATIONAL COUNCIL OF STATE BOARDS OF NURSING, INC.

Final Draft

STATEMENT

4-5-84

Rewriting the NCLEX:

Although the National Council of State Boards of Nursing in its contracts with Member Boards of Nursing specifies the conditions under which the National Council Licensure Examination (NCLEX) is administered, only the Board of Nursing in each jurisdiction determines the requirements and conditions for licensure. One of these conditions is the number of times an unsuccessful candidate is permitted to rewrite the NCLEX.

When the State Board Test Pool Examination (SBTPE) was the accepted licensing examination, many jurisdictions placed limits on the number of times a candidate was permitted to attempt the examination and/or limited the time period within which repeated attempts to pass could be made. The rationale for such limits was usually one or more of the following:

1. As a norm-referenced test, the SBTPE did not provide an equivalent measure of any candidate's ability when taken on more than one occasion.
2. The licensure examination had five parts, all of which had to be passed. Costly logistic difficulties occurred when repeat candidates needed to rewrite only a part of the SBTPE.
3. Members and staff of Boards of Nursing, as well as many in the larger nursing community, suspected that candidates who became licensed only after passing different parts of the SBTPE at different times were less competent to practice safely.

In July 1982, NCLEX-RN was instituted as the national examination for professional nurses. NCLEX-RN is a single comprehensive examination based on a new test plan, in contrast to the five tests in medical, surgical, psychiatric, obstetric nursing and nursing of children which comprised the SBTPE. 1

The change in the examination, however, is even more fundamental: The SBTPE was a norm-referenced examination and the NCLEX-RN is criterion-referenced. 1

The SBTPE could not guarantee a consistent standard of nursing competence because of its nature. Passing scores were derived by comparisons with norming groups at each test administration. Criterion-referenced examinations, on the other hand, are designed to provide a valid measure of safe competence at each testing regardless of how many times the examination has been attempted.² A candidate has no better chance of passing NCLEX at a subsequent testing than on the original attempt.

The licensing examination for practical nurses has also changed. Although the SBTPE for practical nurses was a comprehensive examination producing one score, it was a norm-referenced test like the SBTPE for RN's. Since October 1982, NCLEX-PN has been criterion referenced and thus, there is no longer a rationale for limiting the number of times a candidate may attempt NCLEX-PN.

In view of the importance of the change in the licensure examination, the NCSBN recommends that Member Boards formally reconsider their policies on rewriting both RN and PN licensure examinations. Such consideration should include both a careful re-examination of the rationale for the policy, and the effects of Board Policy upon original licensure, endorsement, and reinstatement.

The NCSBN further recommends that Boards of Nursing place no limit on either the number of times any candidate may rewrite NCLEX, or the time period within which a candidate may make repeated attempts.

¹ See Issues, Vol. 7, No. 1, Spring 1983: "Developing, Constructing and Scoring the National Council Licensure Examination," pg. 1.

² See Issues, Vol. 4, No. 2, Summer 1983: "Developing, Constructing and Scoring the National Council Licensure Examination," pg. 1.

NATIONAL COUNCIL OF STATE BOARDS OF NURSING, INC.

STATEMENT

FINAL DRAFT

4-4-84

Model Legal Standards

The National Council of State Boards of Nursing is an organization through which Boards of Nursing act on matters of common interest affecting the public health, safety and welfare. The major function of each Board of Nursing is implementation of the Nursing Practice Act in its own jurisdiction.

Model legislation and rules and regulations are designed to be used as resources by Member Boards and others in the development, review or revision of nursing statutes and regulations. The Delegate Assembly of the National Council has approved a Model Nursing Practice Act and Model Administrative Rules and Regulations. The Model Nursing Practice Act was developed by the Nursing Practice and Standards Committee to fulfill a requirement of the Kellogg Foundation grant with which the National Council was originally funded. The Model Rules and Regulations were a natural step to facilitate implementation of the Model Act. 1

Contained in the Model Rules and Regulations are legal standards of nursing practice and education.1 Questions have been raised about whether the development and dissemination of model legal standards are appropriate activities for the National Council. 2

Since the Board of Nursing is the body which has the statutory authority to enforce the provisions of the Nursing Practice Act, each board should establish essential minimum standards as part of regulation. There is a distinction between legal and professional standards. Legal standards reflect minimum criteria essential to safeguard the public health, safety and welfare and must be written in specific language to be enforceable. Professional standards encompass more than essential minimum criteria, are designed to reflect standards of excellence, and are written in more general language. Such standards developed by professional associations do not have legal regulatory powers. 2

A case which illustrates the need for specific enforceable standards is Tuma vs. Board of Nursing (593 p. 2nd 711- Idaho). Although the statute provided that unprofessional conduct was grounds for disciplinary action there were no legal standards to determine what constituted unprofessional conduct. Therefore, the disciplinary action taken by the Idaho Board was reversed by the Idaho Supreme Court.3

The National Council finds it appropriate for Boards of Nursing to develop standards and will continue to assist in this effort.

1. NCSEB. Model Administrative Rules and Regulations for Nursing. Chicago, Illinois, 1983.
2. Cleveland, Thelma. "Professional/Legal definitions - are there differences?" Issues, Vol. 1, No. 1, Spring, 1980, pp. 3-4.
3. Tuma, J.L. "Professional misconduct?" Nursing Outlook, September, 1977, p. 546

NPSC/1984

The following resolutions are presented as new business agenda items.

- Whereas: Member Boards are in need of data on various disciplinary issues; and
- Whereas: The National Council of State Boards of Nursing has the capacity to store data; and
- Whereas: The National Council of State Boards of Nursing is already collecting, storing and disseminating data on disciplinary actions; and
- Whereas: Member Boards have identified other data needed such as grounds for disciplinary actions and processes used for disciplinary action;

Therefore, Be It Resolved:

That the National Council of State Boards of Nursing begin to serve as a clearinghouse for disciplinary data for use by Member Boards.

Submitted by

Area II
National Council of State
Boards of Nursing, Inc.

The California Board of Registered Nursing has adopted the following resolution:

Whereas, the California Government Code Section 12944 prohibits a licensing board from using an examination which has adverse impact unless the examination is job related

and

Whereas, California Board of Registered Nursing has determined that the licensing examination is lacking in testing for essential nursing content. (disclaimer notice November 1, 1983 attached)

Therefore be it resolved that:

California be permitted to develop and use a supplemental examination if the California Board determines that such an examination is necessary to achieve compliance with Section 12944 of the California Government Code.



BOARD OF REGISTERED NURSING
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TO: President of the National Council
of State Boards of Nursing, Inc.
All Educational Institutions
All Employing Institutions
Executive Officers of Each State Board
President of Each State Board

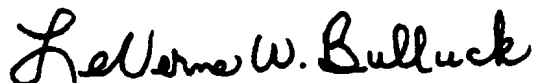
FROM: CALIFORNIA BOARD OF REGISTERED NURSING

DATE: November 1, 1983

Dear Interested Persons:

The Board of Registered Nursing has reviewed the July 1983 NCLEX-RN examination and has concluded that it did not adequately test for minimum competency in the essential subject areas of psychopathology and psychopharmacology. The Board therefore suggests that employers evaluate applicants for positions in psychiatric settings prior to employing them.

It should be noted that all candidates did pass the psychiatric content in their respective schools.



LE VERNE BULLUCK
PRESIDENT