

# OREGON STATE BOARD OF NURSING STRATEGIC PLAN 2008-2014

## *Governance Goal: Assure the Governance Framework Supports the Board's Mission and Vision*

Objective	Measure	Measure Timeframe	Strategies Updated Annually	Responsibility/ Resources
1. <i>Promote a model of policy governance.</i>	<i>Board achieves 100% on self assessment criteria.</i>	Target achieved 7/09; review on an annual basis.	<ol style="list-style-type: none"> <li>1. <i>Ensure Board members are educated on principles of policy governance.</i></li> <li>2. <i>Ensure statutes, rules, policies, procedures and directives are consistent with the Board's mission and vision.</i></li> <li>3. <i>Improve evidence-based decision-making by integrating data-driven processes.</i></li> <li>4. <i>Prepare report quarterly with supporting documentation and data and present to Board biannually.</i></li> </ol>	<ol style="list-style-type: none"> <li>1. <i>Board &amp; Staff</i></li> <li>2. <i>Board &amp; Staff</i></li> <li>3. <i>Board &amp; Staff</i></li> <li>4. <i>Staff</i></li> </ol>
2. <i>Collaborate and strengthen relationships with stakeholders.</i>	<i>Communication and outreach report reflects growth in collaboration.</i>	Target completion June 2011; review on an annual basis.	<i>Develop "Communication and Outreach" report and review quarterly.</i>	<i>Board &amp; Staff</i>
3. <i>Increase transparency.</i>	<i>Communications and outreach report reflects increased information.</i>	Target completion June 2012; review on an annual basis.	<ol style="list-style-type: none"> <li>1. <i>Develop quarterly on-line newsletter.</i></li> <li>2. <i>"Road trips".</i></li> <li>3. <i>Webcasts.</i></li> </ol>	<ol style="list-style-type: none"> <li>1. <i>Staff</i></li> <li>2. <i>Staff</i></li> <li>3. <i>Staff</i></li> </ol>

# OREGON STATE BOARD OF NURSING STRATEGIC PLAN 2008-2014

## *Licensure Goal: To License Qualified Personnel and Assure Public Safety*

Objective	Measure	Measure Timeframe	Strategies Updated Annually	Responsibility/ Resources
<p>1. <i>Improve processes for licensure</i></p> <ul style="list-style-type: none"> <li>◆ <i>Improve efficiency in processing applications for licensure through continuous process improvement.</i></li> <li>◆ <i>Increase public safety through application screening for applicant requirements and criminal background history.</i></li> <li>◆ <i>Establish and update licensing policy and procedures.</i></li> </ul>	<p>1. <i>Process* 75% of licenses within five business days.</i></p> <p>2. <i>Establish standardized parameters (grid) for referral of applications to investigations from licensing by December 2008.</i></p> <p>3. <i>Benchmark operational practices for licensure through NCSBN. Establish and update licensing policy (biannually) and procedures (annually).</i></p> <p><i>* Process = Issue license or notify applicant of deficiencies.</i></p>	<p><i>Target completion June 09 @ 96.4%</i></p> <p><i>Target completion June 09 complete</i></p> <p><i>Target completion date 11/2010 and review annually</i></p>	<p>1. <i>Develop and implement budgetary strategy to support continued operations (including training).</i></p> <p>2. <i>Management report to track licenses processed.</i></p> <p>3. <i>Benchmark best operational practices for licensure.</i></p> <p>4. <i>Use process improvement to map &amp; streamline operations.</i></p> <p>5. <i>Maximize use of technology for licensing application, information and verification.</i></p> <p>6. <i>Develop and implement overall OSBN criminal background check strategy as a licensure process.</i></p> <p>7. <i>Ensure referrals to investigations from Licensing are appropriate.</i></p>	<p>1. <i>Licensing Manager Investigations Mgr. Administrative Svcs. Staff</i></p> <p>2. <i>Licensing Manager</i></p> <p>3. <i>Licensing Manager Licensing Staff</i></p> <p>4. <i>Licensing Manager Licensing Staff</i></p> <p>5. <i>Licensing Manager IT Staff</i></p> <p>6. <i>Licensing Manager Investigations Mgr.</i></p> <p>7. <i>Licensing Manager Investigations Mgr.</i></p>
<p>2. <i>Assure the continued competence of licensees.</i></p>	<p><i>Audit for compliance:</i></p> <ol style="list-style-type: none"> <li>1. <i>10% for completion of Pain Management requirement.</i></li> <li>2. <i>10% of CE's For CMA/Advanced Practice.</i></li> <li>3. <i>5% for meeting practice hour requirement.</i></li> </ol>	<p><i>Initial report to be developed in FY 2010</i></p> <p><i>Initial report to be developed in FY 2010</i></p> <p><i>Initial report to be developed in FY 2010</i></p>	<p>1. <i>Develop/implement process for documentation of audits.</i></p> <p>2. <i>Develop/implement process for referral to disciplinary process for non-compliance.</i></p>	<p>1. <i>Licensing Manager Consulting Staff</i></p> <p>2. <i>Licensing Manager Investigations Mgr.</i></p>

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<p>3. <i>Review models of continued competency.</i></p>	<p><i>Draft report of current and potential models of competency. Include options for the Board to evaluate and give direction.</i></p>	<p><i>Initial report to be developed in FY 2011</i></p>	<p><i>1. Explore and evaluate efficacy of models for measuring continued competence for licensing and remediation, including:</i></p> <ul style="list-style-type: none"> <li><i>a. Continuing Education.</i></li> <li><i>b. Auditing.</i></li> <li><i>c. Compliance/Civil penalty.</i></li> <li><i>d. Non-traditional Education.</i></li> <li><i>e. Active Nursing Practice (current measure).</i></li> <li><i>f. Re-entry for advanced practice.</i></li> <li><i>g. Non-US educated nurses.</i></li> </ul>	<p><i>1. Consultant Staff Licensing Manager Investigations Staff</i></p>
<p>4. <i>Participate in RN/LPN interstate licensure.</i></p>	<p><i>1. Enhance Board knowledge of interstate compact.</i></p> <p><i>2. Stakeholder meeting.</i></p>	<p><i>FY 2011</i></p> <p><i>FY 2012</i></p>	<p><i>1. Presentation on interstate compact during Board meeting.</i></p> <p><i>2. Provide Board with stakeholder input and seek Board position and direction on implementation/participation in interstate licensure.</i></p>	<p><i>1. Licensing Manager Consultant Group NCSBN Staff</i></p> <p><i>2. Board Executive Director Licensing Manager Consultant Group</i></p>

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## *Investigations Goal: Protect the Public Through Communication and Enforcement of the NPA and Address Inappropriate Conduct.*

Objective	Measure	Measure Timeframe	Strategies Updated Annually	Responsibility/ Resources
<p>1. Provide an effective alternative to discipline program. (NMP)</p> <p><b>NOTE: Program transferred to DHS July 1, 2010</b></p>	<p>1. Improved compliance for all participants on average at any given time (in accordance with 18 points).</p> <p>2. Out-of-compliance response within 5 business days.</p>	<p>NMP compliance as of 4/09</p> <p>Ongoing</p>	<p>1. Weekly triggering reports, etc.</p> <p>2. Review of monitoring report monthly.</p> <p>3. LEDS reports quarterly move to monthly as staffing permits (certify NM support to run LEDS).</p>	<p>1. NMP Staff Investigations Mgr.</p> <p>2. NMP Staff</p> <p>3. NMP Support Staff</p>
<p>2. Violations of the statute and rules are identified, investigated and adjudicated consistently.</p>	<p>1. 75% of cases meeting statutory guideline (120 days) for 2008; 8</p> <p>2. Random monthly audits of investigation files for timeliness, referrals, and appropriate adjudication.</p> <p>3. Review reports monthly of;</p> <p style="margin-left: 20px;">a. Time to process</p> <p style="margin-left: 20px;">b. Aging investigations</p>	<p>FY 2009/70%</p> <p>Target date FY 2009-10</p> <p>July 2009 and ongoing</p>	<p>1. Develop a sanctions grid and disciplinary guidelines for board and staff use.</p> <p>2. Implement consistent application of the sanction grid utilizing precedent.</p> <p>3. Standardize NPA discipline with HIPDB codes and reporting.</p> <p>4. Request extensions to 120-day limit as needed.</p>	<p>1. Investigations Staff</p> <p>2. Board and Investigations Staff</p> <p>3. Administration Staff</p> <p>4. Investigative Staff</p>
<p>3. Improve processes for investigations and compliance.</p>	<p>Establish and update investigations and compliance policy (biannually) and procedures (annually).</p>	<p>Target date FY 2009- 2011</p>	<p>1. Develop improvement processes for investigative procedures.</p> <p>2. Establish timelines for non-conduct investigations.</p>	<p>1. OSBN Staff</p> <p>2. Investigations Mgr and Executive Director</p>

# OREGON STATE BOARD OF NURSING STRATEGIC PLAN 2008-2014

<p>4. Provide an effective probation program for those licensees that need monitored practice as a part of discipline.</p>	<p>1. Improved compliance for all participants on average at any given time (in accordance with probation stipulation).</p> <p>2. Out-of-compliance response within five business days.</p>	<p>Target completion FY 2009 complete</p> <p>Ongoing</p>	<p>1. Weekly triggering reports, etc.</p> <p>2. Review of probation report monthly.</p>	<p>1. Monitoring Monitor</p> <p>2. Investigations Mgr</p>
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# OREGON STATE BOARD OF NURSING STRATEGIC PLAN 2008-2014

## **Policy, Education & Practice Goal: Develop, Communicate, Evaluate, and Enforce Standards for Policy, Education and Safe Practice**

Objective	Measure	Measure Timeframe	Strategies Updated Annually	Responsibility/ Resources
<p>1. Educational programs shall meet Board approved standards and criteria.</p>	<p>1. Number of programs that meet 95% of the Board standards as shown through survey. <b>Data compilation for RN programs to be included in 2010 report to the Board.</b></p> <p>2. Adoption of rules and standards for APRN and RN-BSN programs by Board in Fall 2009. <b>APRN in progress; RN-BSN programs not yet developed.</b></p>	<p>FY 2010 and ongoing</p> <p>FY 2010</p>	<p>1. Analyze program criteria defined by the Board, Federal Regulation, the State Board of Education, nursing education accrediting organizations and others for evidence-based practices.</p> <p>2. Review and approve or deny nursing educational programs consistent with Board rules.</p> <p>3. Establish and review procedures to determine program compliance with OSBN criteria.</p> <p>4. Develop and implement policies and procedures for conducting evaluations of RN-BS and advanced practice nursing programs.</p> <p>5. Develop regulations to evaluate and approve APRN and RN-BSN programs.</p>	<p>1. Board and Consultants</p> <p>2. Board and Advanced Practice, Education, and Nursing Assistant Consultants</p> <p>3. Board and Consultants</p> <p>4. Advanced Practice and Education Consultants</p> <p>5. Advanced Practice and Education Consultants</p>
<p>2. Promote reduction of nursing practice errors.</p>	<p>1. TERCAP implemented by 2011.</p> <p>2. Board educational presentations are accessible through on-line teaching/learning modules.</p>	<p>FY 2011</p> <p>FY2012</p>	<p>1. Educate Board on Just Culture.</p> <p>2. Explore the possibility of Just Culture implementation.</p> <p>3. Research Quality and Safety Education for Nurses (QSEN).</p>	<p>1. Board and Staff</p> <p>2. Board and Staff</p> <p>3. Consultant Staff</p>

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			<p>4. <i>Implement Taxonomy of Error Root Cause Analysis and Practice (TERCAP) responsibility. Identify nursing practice errors and implement strategies to address root causes.</i></p> <p>5. <i>Develop and implement on-line teaching/learning module.</i></p>	<p>4. <i>Consultant Staff</i></p> <p>5. <i>Consultant Staff</i></p>
<p>3. <i>Collaborative input sought and strategic alliances are strengthened with relevant nursing, healthcare, legislative and regulatory entities.</i></p>	<p>1. <i>Task Force participation/input reflects an appropriate and geographically diverse mix of educational programs, agencies and stakeholders.</i></p> <p>2. <i>Quarterly summary of outreach activities reflect participation in local, regional, state, and national healthcare related activities.</i></p>	<p>FY 2009</p> <p>FY 2009 &amp; ongoing</p>	<p>1. <i>Develop list serve process to disseminate information and improve contact with interested parties.</i></p> <p>2. <i>Enhance use of technology to increase access for interested parties.</i></p> <p>3. <i>Develop and provide educational outreach activities related to nursing regulation in Oregon.</i></p> <p>4. <i>Provide staff and budget resources for participation in healthcare-related activities to promote Board initiatives.</i></p>	<p>1. <i>Communications Manager</i></p> <p>2. <i>IT Staff</i></p> <p>3. <i>Consultant Staff</i></p> <p>4. <i>Board and Executive Director</i></p>
<p>4. <i>Education program standards direct quality education regardless of educational delivery method.</i></p>	<p><i>Graduates of approved programs demonstrate beginning level competence as evidenced by first-time pass rate &amp; low-incidence of graduates reported to Board within two years of licensure/certification.</i></p>	<p>FY 2010 &amp; ongoing</p>	<p>1. <i>Review/revise rules in relation to NCSBN model rules, distance, on-line, traditional and nontraditional programs.</i></p> <p>2. <i>Promulgate APRN and RN/BSN rules.</i></p> <p>3. <i>Utilize Test Advisory Panel for Nurse Aide and Medication Aide Exam development.</i></p> <p>4. <i>Monitor new graduate complaints, evaluate for trends, and report to schools as appropriate.</i></p>	<p>1. <i>Consultant Staff</i></p> <p>2. <i>Board and Staff</i></p> <p>3. <i>Nursing Assistant Program Consultant</i></p> <p>4. <i>Consultant Team</i></p>

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			5. Obtain clinical placement data from student-max and incorporate into program evaluation standards.	5. Consultant Team
5. Standards of licensure are evidence-based, current, relevant and responsive to changes in the healthcare environment	1. Key issues affecting nurse licensure are addressed by the Board as evidenced in meeting minutes, reports and reflected in statute, rule, and policy.	FY 2010 & ongoing	1. Develop a plan for rule and policy review.	1. Consultant Team
	2. Evidence used to generate policymaking is clearly referenced and ranked by quality/strength of recommendation.	FY 2010 & ongoing	2. Review and update rules and policies regularly.	2. Board and Consultants
	3. Number of website hits per quarter stratified by Board policy, rule, and statute type.	FY 2010 & ongoing	3. Facilitate development of a statewide plan for practical nursing education.	3. Education and RN/LPN Practice Consultants
			4. Identify emerging topics that impact licensing (e.g. UAP) and provide ongoing analysis of current processes to ensure congruence with public safety.	4. Consultant Team
			5. Establish a Board practice committee.	5. Board
			6. Use evidence-based processes/ resources when developing, modifying and revising Board rules and policies.	6. Board and Consultants
			7. Analyze trends and identify research topics related to nursing and develop strategies.	7. Consultant Team

# OREGON STATE BOARD OF NURSING STRATEGIC PLAN -- 2008-2014

## 2010 Annual Update

### I. Governance Goal: **Assure the Governance Framework Supports the Board's Mission and Vision**

**Objective 1:** Promote a model of policy governance.

Strategy 1: Ensure Board members are educated on principles of policy governance.

*2009 Worksession Update: "Exceptional Board Training" completed at 9/08 Board meeting.*

Strategy 2: Ensure statutes, rules, policies, procedures and directives are consistent with the Board's mission and vision.

*2009 Worksession Update: Developed draft for issue review procedure focused on Board's Mission; finalized at 9/09 Board Meeting.*

Strategy 3: Improve evidence-based decision-making by integrating data-driven processes.

*2009 Worksession Update: Continue to improve reports relating to performance measure data; development of 120-day timeframe template by 9/09.*

Strategy 4: Prepare report quarterly with supporting documentation and data and present to Board annually.

*2009 Worksession Update: Finalized report format to be developed in FY 2010.*

**Objective 2:** Collaborate and strengthen relationships with stakeholders.

Strategy 1: Develop "Communication and Outreach" report and review quarterly.

*2009 Worksession Update: Increased communication and outreach by meeting with key legislators and other key stakeholders, including Oregon Nurses Association, Oregon Health Care Association, Oregon Alliance of Senior and Health Services, and Department of Human Services.*

*Participate in Oregon Nursing Leadership Collaborative and Oregon Center for Nursing. Plan to develop report format by June 2010.*

**Objective 3:** Increase transparency.

Strategy 1: Develop quarterly on-line newsletter.

*2009 Worksession Update: First quarterly Sentinel distributed in 4/09. Complete.*

Strategy 2: "Road trips".

*2009 Worksession Update: Travel expenditures decreased due to budgetary concerns.*

Strategy 3: Webcasts

*2009 Worksession Update: Delayed due to budgetary and resource constraints.*

# OREGON STATE BOARD OF NURSING STRATEGIC PLAN -- 2008-2014

## 2010 Annual Update

### II. Licensure Goal: To License Qualified Personnel and Assure Public Safety

#### Objective 1: Improve processes for licensure.

- Strategy 1: Develop and implement budgetary strategy to support continued operations (including training).  
*2009 Worksession Update: Participation in development of 2009-2011 budgeting for operations. Complete.*
- Strategy 2: Management report to track licenses processed.  
*2009 Worksession Update: Report to measure five business day process. Complete.*  
*Reports to measure licensing process steps. To be developed (pilot).*
- Strategy 3: Benchmark best operational practices for licensure.  
*2009 Worksession Update: Benchmark best operational practices for licensure.*  
*Integration of NURSYS/FITS system as fraud alert tool 2/2009 & ongoing.*  
*Participation in Internal Advisory Committee (operational policies). Ongoing.*  
*Participate on NCSBN/NURSYS Advisory Panel. Ongoing.*
- Strategy 4: Use process improvement to map and streamline operations.  
*2009 Worksession Update: Front Desk/Receptionist and Accounting Office procedures.*  
*Development of "ready to issue" reports for License Tech's. Ongoing.*
- Strategy 5: Maximize use of technology for licensing application, information and verification.  
*2009 Worksession Update: April 2009 launched upgraded E-commerce renewals system. Complete.*
- Strategy 6: Develop and implement overall OSBN criminal background check strategy as a licensure process.  
*2009 Worksession Update: 2009 Criminal History grid approved and adopted by the Board 6/2009.*
- Strategy 7: Ensure referrals to Investigations from Licensing are appropriate.  
*2009 Worksession Update: Referrals screened by License/Investigations Managers for appropriateness. Complete.*  
*Delegation of screening to staff. To be developed.*

#### Objective 2: Assure the continued competence of licensees.

- Strategy 1: Develop/implement process for documentation of audits.  
*2009 Worksession Update: Initial report to be developed in FY 2010.*
- Strategy 2: Develop/implement process for referral to disciplinary process for non-compliance.  
*2009 Worksession Update: Initial report to be developed in FY 2010.*

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## 2010 Annual Update

**Objective 3:** Review models of continued competency.

Strategy 1: Explore and evaluate efficacy of models for measuring continued competence for licensing and remediation, including:

- Continuing Education.
- Compliance/Civil Penalty.
- Non-traditional Education.
- Active Nursing Practice (current measure).
- Re-entry for Advanced Practice
- Non-US Educated Nurses.

*2009 Worksession Update: Initial report to be developed in FY 2010.*

**Objective 4:** Participate in RN/LPN interstate licensure.

Strategy 1: Presentation on interstate licensure (Compact) during Board meeting.

*To be developed and scheduled in 2011 Board meeting.*

Strategy 2: Provide Board with stakeholder input and seek Board position and direction on implementation/participation in interstate licensure.

*To be developed FY 2012.*

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## 2010 Annual Update

### III. Investigations Goal: Protect the Public through Communication and Enforcement of the NPA and Address Inappropriate Conduct.

**Objective 1:** Provide an effective alternative to discipline program (NMP).

Strategy 1: Weekly triggering reports, etc.

*2009 Worksession Update: Completed through FY 2009.*

Strategy 2: Review of monitoring report monthly.

*2009 Worksession Update: NMP audit performed in June 2009.*

Strategy 3: LEDS reports quarterly move to monthly as staffing permits (Certify NM support to run LEDS).

*2009 Worksession Update: Quarterly reports completed on all NMP FY 2009 by LEDS tech.*

**(NOTE: Program transferred to DHS July 1, 2010.)**

**Objective 2:** Violations of the statute and rules are identified, investigated and adjudicated consistently.

Strategy 1: Develop a sanctions grid and disciplinary guidelines for Board and staff use.

*2009 Worksession Update: Drafted 7/09.*

Strategy 2: Implement consistent application of the sanction grid utilizing precedent.

*2009 Worksession Update: Ongoing.*

Strategy 3: Standardize NPA discipline with HIPDB codes and reporting.

*2009 Worksession Update: HIPDB codes selected in L2K by Investigative staff.*

Strategy 4: Request extensions to 12-day limit as needed.

*2009 Worksession Update: Implementation commenced in 7/2009 by Investigative staff.*

**Objective 3:** Improve processes for investigations and compliance.

Strategy 1: Develop improvement processes for investigative procedures.

*2009 Worksession Update: Ongoing by OSBN staff.*

Strategy 2: Establish timelines for non-conduct investigations.

*2009 Worksession Update: FY 2010 by Investigations Manager and Executive Director.*

**Objective 4:** Provide an effective probation program for those licensees that need monitored practice as a part of discipline.

Strategy 1: Weekly triggering reports, etc.

*2009 Worksession Update: Trigger reports implemented in 6/2008 by Probation Monitor.*

Strategy 2: Review of probation report monthly.

*2009 Worksession Update: Ongoing by Investigations Manager.*

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## 2010 Annual Update

### IV. Policy, Education & Practice Goal: Develop, Communicate, Evaluate, and Enforce Standards for Policy, Education and Safe Practice.

**Objective 1:** Educational programs shall meet Board approved standards and criteria.

Strategy 1: Analyze program criteria defined by the Board, Federal Regulation, the State board of Education, nursing education accrediting organizations and others for evidence-based practices.

*2009 Worksession Update: Ongoing. Reviewed Office of Degree Authorization rules based on legislative changes.*

*2010 Worksession Update: Rule changes adopted in Division 50 related to statutory changes impacting the Office of Degree Authorization. Rule changes for Division 21 ready for first reading in September 2010 related to ODA.*

Strategy 2: Review and approve or deny nursing educational programs consistent with Board rules.

*2009 Worksession Update: New training programs approved in FY 2008-2009: 8 NA-1, 14 CNA-2, and 3 MA.*

*RN Programs Surveyed = 2 programs reviewed – attained at least 95% of the required standards, RN Re-entry Programs Surveyed = 1 – attained 100% of required elements, PN Programs Surveyed = 4 programs reviewed – attained at least 80% of the required standards*

*2010 Worksession Update:*

***Nursing assistant training programs reviewed/approved/re-approved:***

*New or revised programs reviewed and approved –*

*NA = 60*

*CNA 2 = 11*

*MA = 1*

*Surveyed and re-approved –*

*NA = 32*

*MA = 6*

***Nursing program surveys:***

*PN = 4 (Sumner College – initial approval, Rogue CC on-going approval, Pioneer Pacific – on-going survey, and Valley Medical College – follow-up survey)*

*RN = 3 (ITT – initial, BMCC – on-going, Linn-Benton – follow-up)*

*Nurse Re-entry = 3*

Strategy 3: Establish and review procedures to determine program compliance with OSBN criteria.

*2009 Worksession Update: In FY 2008-09, 14 of 37 (38%) NA programs were surveyed and 8 of 13 (62%) MA programs met 95% of the Board standards. Ongoing measure to be reported in 2010 update to the Board for nursing programs.*

*2010 Worksession Update:*

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*Rogue PN – 100% (96%)*

*PPC – 95% (85%)*

*BMCC – 96% (85%)*

*Re-Entry average – 95% compliance*

*NA – 17 of 32 (53% met 95% of Board standards)*

*MA – 3 of 6 (50% met 95% of Board standards)*

Strategy 4: Develop and implement policies and procedures for conducting evaluations of RN-BS and advanced practice nursing programs.

*2009 Worksession Update: Rules and standards for APRN programs for first reading in September 2009. RN-BSN program rules and standards not yet developed.*

*2010 Worksession Update:*

*Division 50 rules adopted with NP program standards addressed. Program surveys to start with UP in Fall 2010. RN/BSN program oversight – seek direction from Board on level of priority for this topic. For staff, the priority level is not high.*

**Objective 2:** Promote reduction of nursing practice errors.

Strategy 1: Educate Board on Just Culture.

*2009 Worksession Update: Presentation to Board completed 11/08. Awaiting further Board direction.*

*2010 Worksession Update: June 2010 presentation given to Board by Bev Shields, former Board member.*

Strategy 2: Explore the possibility of Just Culture implementation.

*2009 Worksession Update: Begun 11/08. Awaiting further Board direction.*

*2010 Worksession Update: Participant in May 2010 NCSBN conference call on Just Culture. Awaiting further Board direction.*

Strategy 3: Research Quality and Safety Education for Nurses (QSEN).

*2009 Worksession Update: Presentation to Board completed 11/08. Awaiting further Board direction.*

*2010 Worksession Update: No further activity.*

Strategy 4: Implement Taxonomy of Error Root Cause Analysis and Practice (TERCAP) responsibility. Identify nursing practice errors and implement strategies to address root causes.

*2009 Worksession Update: Look at implementation models from other states. Projected implementation FY 2011.*

*2010 Worksession Update: Board staff has discussed implementation models with Texas, as well as North Dakota over past year. Awaiting development of new disciplinary software and ultimately, prioritization of this project.*

Strategy 5: Develop and implement on-line teaching/learning modules.

*2009 Worksession Update: In process: Very early stages as of 7/09. One presentation posted.*

*2010 Worksession Update: Technological challenges to producing presentations with imbedded audio have recently*

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*been addressed. Efforts to post these types of presentations should be possible in upcoming year.*

**Objective 3:** Collaborative input sought and strategic alliances are strengthened with relevant nursing, healthcare, legislative and regulatory entities.

Strategy 1: Develop list serve process to disseminate information and improve contact with interested parties.

*2009 Worksession Update: Advanced Practice list serve in place. Planning to begin CNA/CMA and RN/LPN list serve by FY 2010.*

*2010 Worksession Update: APRN, RN/LPN, CNA/CMA and Rules List-Serves all in place and available to the public.*

Strategy 2: Enhance use of technology to increase access for interested parties.

*2009 Worksession Update: FY 2008-09: Used video-conference meetings for policy and rule revisions (e.g., CNA stakeholder meetings, averaged 10 geographic locations and 30 participants from a variety of interests.) Also began use of Survey Monkey to query stakeholders and WebEx for on-line presentations.*

*2010 Worksession Update:*

*WebEx used for task force meetings, new program director orientation for nursing education programs, NA & MA instructor orientations, and presentations to a variety of stakeholders. Videoconferences held for Divisions 61, 62 & 63 rule revisions.*

*Survey monkey used for a variety of stakeholder surveys, including customer satisfaction and nursing assistant training program capacity.*

Strategy 3: Develop and provide educational outreach activities related to nursing regulation in Oregon.

*2009 Worksession Update: FY 2008-09, initiated using WebEx for nursing assistant and medication aide instructor orientations and RN/LPN presentations.*

*2010 Worksession Update: Continuing to provide educational outreach with Nursing Regulation Orientation, NA Instructor Orientation, Presentations, etc.*

Strategy 4: Provide staff and budget resources for participation in healthcare-related activities to promote Board initiatives.

*2009 Worksession Update: Participation in various external organizations, including Nurse Practitioner Organization (NPO), National Council of State Boards of Nursing (NCSBN), and Oregon Consortium for Nursing Education (OCNE).*

*2010 Worksession Update:*

*Joy's activities for FY 2009-2010:*

*NCLEX Invitational*

*NW Nursing Education Conference*

*NCSBN Mid-Year Meeting*

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*Re-Designing Clinical Education Conference  
Tracy's activities for FY 2009-2010:  
Continued updating of APRN List-Serve  
Planning Committee and attendee  
University of Washington Prescribing  
Scheduled Drugs CE course July 2009  
Conducted webinar on Nurse Practitioner  
Investigatory Processes with the Oregon Nurses Association  
November 21, 2009  
Pharmacology, Roles, and Health Policy lectures for OHSU,  
University of Portland, and Washington State University  
2009-2010  
Institute of Regulatory Excellence Conference, NCSBN,  
Phoenix – January 2010  
Co-teaching graduate Health Policy course – Washington  
State University – Spring 2010  
National Organization of Nurse Practitioner Faculties,  
Washington D.C., presented on Legal, Professional, and  
Regulatory Issues in Teaching Scheduled Drug Prescribing –  
April 2010  
Attended NCSBN APRN Roundtable, Chicago – May 2010  
Attended American Academy of Nurse Practitioners National  
Conference, Phoenix – June 2010  
Continued participation as representative on Committee for  
the Oregon Office of Health Policy  
Chair of the Oregon Sexual Assault Nurse Examiner  
Commission  
Debbie's activities for 2009-2010:  
Continued participation with American Association of Homes  
& Services for the Aging (AAHSA) Workforce Cabinet  
Attended NCSBN UAP Conference  
Reviewed applicants for the Joan McHugh LTC Nurse Award  
Marilyn's activities for FY 2009-2010:  
Gave presentations, some in person, some via WebEx  
Provided 5 Chief Nurse Orientation Courses (in addition)  
Completed IRE Fellowship  
Participated on CORE Committee through NCSBN*

**Objective 4:** Education and program standards direct quality education regardless of educational delivery method.

Strategy 1: Review/revise rules in relation to NCSBN model rules, distance, on-line, traditional and nontraditional programs.  
*2009 Worksession Update: Plan to use newly revised model rules in FY 2010 for Division 21 changes.  
2010 Worksession Update: Model rules utilized during revisions to the Division 21 standards.*

Strategy 2: Promulgate APRN and RN/BSN rules.  
*2009 Worksession Update: APRN rules introduced at 9/09 Board meeting for regulation of APRN educational programs.*

# OREGON STATE BOARD OF NURSING STRATEGIC PLAN -- 2008-2014

## 2010 Annual Update

- Exploring regulation of RN/BSN educational programs by FY 2010.*
- 2010 Worksession Update: Division 50 rules updated, Division 21 rules prepared for first reading at September 2010 Board meeting. Initiating APRN program surveys in Fall 2010.*
- Strategy 3: Utilize Test Advisory Panel for Nurse Aide and Medication Aide Exam development.  
*2009 Worksession Update: FY 2008-09: Used two separate 7-person test advisory panels for the nursing assistant and medication aide exams.*  
*2010 Worksession update: Test Advisory Panels held – NA = July 30, 2009 & May 24, 2010 – MA = May 25, 2010*
- Strategy 4: Monitor new graduate complaints, evaluate for trends, and report to schools as appropriate.  
*2009 Worksession Update: Explore available data by FY 2012.*  
*2010 Worksession Update: For exploration by 2012.*
- Strategy 5: Obtain clinical placement data from Student-Max and incorporate into program evaluation standards.  
*2009 Worksession Update: Explore available data by FY 2012.*  
*2010 Worksession Update: For exploration by 2012.*
- Objective 5:** Standards of licensure are evidence-based, current, relevant and responsive to changes in the healthcare environment.
- Strategy 1: Develop a plan for rule and policy review.  
*2009 Worksession Update: Process for this under consideration by Board, 7/09.*  
*2010 Worksession Update: Board Prioritization Policy adopted 11/09. Regular policy review being implemented with assistance from the Nursing Practice Committee.*
- Strategy 2: Review and update rules and policies regularly.  
*2009 Worksession Update: Process for this under consideration, 7/09. Board prioritization of OSBN projects, including rule and policy updates under consideration by Board – first reading of policy 9/09.*  
*2010 Worksession Update: Board Prioritization Policy adopted 11/09. On-going review of rules incorporates legislative changes as indicated.*
- Strategy 3: Facilitate development of a statewide plan for practical nursing education.  
*2009 Worksession Update: Stakeholder group explored feasibility of offering distance programs based on Mt. Hood Community College model in FY 2009.*  
*2010 Worksession Update: Work suspended by involved colleges in mid-2009. Possible interest in revisiting concept through CCWD/Jo Bell.*

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- Strategy 4: Identify emerging topics that impact licensing (e.g. UAP) and provide ongoing analysis of current processes to ensure congruence with public safety.  
*2009 Worksession Update: Request for OSBN Review of Issue form under consideration by Board 7/09. Issue Review Form adopted by Board 9/09.*  
*2010 Worksession Update: First Issue Review Form has been received and will be considered by Board at September 2010 Board meeting. UAP discussion scheduled for Board Work Session 2010.*
- Strategy 5: Establish a Board practice committee.  
*2009 Worksession Update: Discussion regarding development of committee begun 7/09.*  
*2010 Worksession Update: Nursing Practice Committee developed for RN/LPN practice. Intent is to use this as a model for potential development of similar committees for advanced practice or for CNAs/CMAs.*
- Strategy 6: Use evidence-based processes/resources when developing, modifying and revising Board rules and policies.  
*2009 Worksession Update: Ongoing.*
- Strategy 7: Analyze trends and identify research topics related to nursing and develop strategies.  
*2009 Worksession Update: Ongoing.*