

ANNUAL
REPORT

State of North Dakota

*BOARD
OF
NURSING*



July 1, 2012 – June 30, 2013



NORTH DAKOTA BOARD OF NURSING

919 S 7TH STREET, SUITE 504

BISMARCK, ND 58504-5881

PHONE: 701-328-9777 FAX: 701-328-9785

www.ndbon.org

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NORTH DAKOTA BOARD OF NURSING

ANNUAL REPORT 2012-2013

MISSION STATEMENT

The mission of the North Dakota Board of Nursing is to assure North Dakota citizens quality nursing care through the regulation of standards for nursing education, licensure and practice.

Approved 5/91; 9/93; 11/95.

GOAL STATEMENTS

The North Dakota Board of Nursing has the following goals:

1. Public protection is ensured through evidence-based regulation.
2. Effective coalitions exist with stakeholders.
3. Nursing workforce issues are addressed in collaboration with stakeholders.
4. Board member leadership is effective.
5. Nursing regulation is enhanced through responsive infrastructure.

VISION

The North Dakota Board of Nursing (Board) works creatively to address the public's need for safe and competent nursing practice. It accomplishes these actions through:

1. Openness to innovative approaches to regulation,
2. Monitoring and analyzing trends and changes in health care and regulation and
3. Anticipates planned changes in nursing regulation.

2012-2013 MEMBERS OF THE NORTH DAKOTA BOARD OF NURSING

Nelson Benson RN
Charlene Christianson, R.N.
Melisa Frank, LPN
Angie Levi, LPN
Bonny Mayer, LPN
Clara Sue Price, Public Member, Treasurer
Dan Rustvang, RN, Vice President
Deborah Smith, RN,
Julie Traynor, RN, President

Bismarck, ND
Glenfield, ND
Dickinson, ND
Hettinger, ND
Minot, ND
Minot, ND
Grand Forks, ND
Mandan, ND
Devils Lake, ND

The Board of Nursing held six regular board meetings during 2012-2013. Minutes of board meetings are available on the web site at www.ndbon.org.

The North Dakota Century Code 43-12.1-08 provides for the following duties of the Board of Nursing:

43-12.1-08. DUTIES OF THE BOARD. The board shall regulate the practice of nursing. Regulation of the practice of nursing must ensure that a person may not practice or offer to practice nursing or use titles of advanced practice registered nurse, specialty practice registered nurse, registered nurse, licensed practical nurse, or unlicensed assistive person, or titles of a similar nature which denote the practice of nursing to the general public unless licensed or registered as provided in this chapter.

1. Enforce this chapter.

2. Adopt rules necessary to administer this chapter after collaborating and consulting with North Dakota nursing associations and other affected parties.

One rule promulgation was completed during this fiscal year by the North Dakota Board of Nursing:

In accordance with N.D.C.C. § 28-32-18.1 the requested the repeal or amend to the following rules, in part or in whole, as applicable, previously adopted by the Board:

- The proposed amendment of the following Title 54 Board of Nursing:
 - ♦ NDAC Chapter 54-01-05 Renewal of License: 54-02-05-03 Renewal fees.
 - ♦ NDAC Chapter 54-02-06 Licensure by Endorsement: 54-02-06-01(2) Application and fee for license by endorsement.

The Board members and staff were members of the following task forces/committees in 2012-2013:

National Council State Boards of Nursing

- Executive Officers Network
- TERCAP User Group
- Discipline, Education and Practice Networks
- APRN Committee
- Nurse Licensure Compact Administrators
- North Dakota Organization of Nurse Executives
- Prescription Drug Monitoring Program Committee

3. Appoint and employ a registered nurse to serve as executive director and approve any additional staff positions necessary to administer this chapter.

During the fiscal year 2012-2013 the Board of Nursing staff included the following persons:

Constance Kalanek PhD, RN	Executive Director
Karla Bitz, PhD, RN	Associate Director
Patricia Hill, BSN, RN	Assistant Director for Practice and Discipline
Jane Hoerner, MSN, RN	Associate Director for Education (Resigned November 2012)
Stacey Pfenning, DNP, APRN	Associate director for Education and APRN Practice (October 1, 2012)
Julie Schwan	Administrative Services Coordinator I
Gail Rossman	Technology Specialist II
Sally Bohmbach	Administrative Assistant II
Kathy Zahn	Administrative Assistant III
Brian Bergeson	Special Assistant Attorney General for the ND Board of Nursing

4. Establish fees and receive all moneys collected under this chapter and authorize all expenditures necessary to conduct the business of the board. Any balance of fees after payment of expenditures must be used to administer this chapter.

Fees for the 2012-2013 fiscal year were as follows:

Biennial Renewal of License Fee	RN	\$120.00
	LPN	\$110.00
Licensing Examination Fee	RN	\$110.00
	LPN	\$110.00
Licensing Endorsement Fee	RN	\$140.00
	LPN	\$140.00
Criminal History Record Check Fee		\$ 20.00
Advanced Practice License Application Fee		\$100.00
Prescriptive Authority Initial Application Fee		\$50.00
Advanced Practice Biennial Renewal Fee		\$40.00
Prescriptive Authority Biennial Renewal Fee		\$50.00
Verification of License Fee		\$30.00
Transcripts for Graduates of Closed Nursing Programs		\$15.00
School Survey Fee		\$500.00
CE Approval for contact hours (CH)		\$30.00/1 CH
		\$60.00/2 CH
		\$90.00/3-6 CH
		\$120.00/7-10 CH
		\$160.00/11-13 CH
Reoccurring approve for CE		\$25.00
Unlicensed Assistive Person Registry App		\$30.00
Unlicensed Assistive Person Renewal Application		\$30.00
Reactivation of UAP or MA III		\$30.00
Medication Assistant Application III		\$40.00
NNAAP Testing Fee		\$120.00
Database lists		\$50.00 RNs
		\$20.00 LPNs
		\$15.00 APRNs
		\$12.00 Pres Auth
Photocopies		.25 per page
Educational Presentations		\$100.00 per CH
Ethics Course		\$50.00

The Board of Nursing develops an annual budget for receipts and expenditures. A statement of the receipts and expenditures for 2012-2013 is found in Appendix II. An audit of the receipts and expenditures is performed at the end of each fiscal year and submitted by the auditor to the Governor's office. Complete audit reports are available for review at the board office.

5. Collect and analyze data regarding nursing education, nursing practice, and nursing resources.

The NDBON provides funding for the Nursing Needs Study. The Facility Survey was completed and presented at the July 2013 Board Meeting.

6. Issue and renew limited licenses or registration to individuals requiring accommodation to practice nursing.

NDAC chapter 54-02-09 related to a limited license became effective September 1, 1996. No individuals applied for a limited license for the fiscal year 2012-2013.

7. Establish confidential programs for the rehabilitation of nurses with workplace impairments.

The Nurse Advocacy Program, a monitored rehabilitation program for nurses with workplace impairments, was initiated in July 1991 as a special project. The 1995 revision of the Nurse Practices Act legitimized it as a formal program administered by the Board. Effective April 1, 2004, the Nurse Advocacy Program was renamed the Workplace Impairment Program. The Workplace Impairment Program Committee of the Board of Nursing reviews and recommends policy to the board. Members of the committee for 2012-2013 were Deborah Smith, RN, Melissa Frank, LPN, Bonny Mayer, LPN. External committee members included: Michael Kaspari RN and Marvis Doster RN.

WORKPLACE IMPAIRMENT PROGRAM FISCAL YEAR STATISTICS

	<i>FY 08-09</i>	<i>FY 09-10</i>	<i>FY 10-11</i>	<i>FY 11-12</i>	<i>FY 12-13</i>
Enrollment	11	7	8	7	5
Successful Completion	10	4	9	3	4
Terminated for Noncompliance	12	2	6	5	1

8. Establish a nursing student loan program funded by license fees to encourage individuals to enter and advance in the nursing profession.

The Nursing Education Committee met four times during the 2012-2013 fiscal year. The committee board members were: Julie Traynor RN, Angie Levi LPN, and Charlene Christianson RN . External committee appointments included: Loretta Heuer, PHD, RN, Barbara Boguslawski, MSN, RN, Stephanie Christian, MSN, RN, and Jacqueline Reep-Jarmin, MSN, RN.

NURSING EDUCATION LOAN DISBURSEMENTS PER FISCAL YEAR

The following table identifies the nursing education loan disbursements by program type and monetary awards for the last five years.

<i>Nursing Education Loans awarded for:</i>	<i>08-09</i>		<i>09-10</i>		<i>10-11</i>		<i>11-12</i>		<i>12-13</i>	
LPN Certificate Program	2	\$1000	1	\$850	1	\$1000	1	\$530	1	\$550
LPN Associate Degree Prog	1	\$500	0	0	1	\$1000	0	0	4	\$4000
RN Associate Degree Program	8	\$6000	6	\$9350	5	\$10,000	1	\$1060	11	\$10,550
RN Baccalaureate Degree Prog	29	\$24,500	15	\$18,140	15	\$21,548	31	\$32,330	26	\$30,900
Master's Degree Program	18	\$25,550	16	\$29,496	10	\$24,600	23	\$36,358	14	\$19,300
Doctoral Program	10	\$13,755	10	\$19,515	7	\$16,125	9	\$10,989	12	\$18,400
Refresher Course	0	0	0	0	0	0	0	0	0	0
Total	68	\$71,305	48	\$77,351	39	\$74,273	65	\$81,267	68	\$83,700

NURSING EDUCATION LOAN PROGRAM CANCELLATIONS PER FISCAL YEAR

Prior nursing education loans were cancelled in the last five years in the following manner:

<i>Cancellations:</i>	<i>2008-2009</i>	<i>2009-2010</i>	<i>2010-2011</i>	<i>2011-2012</i>	<i>2012-2013</i>
By Employment in N.D.	46	39	29	22	32
Partial Repayment/Partial Employment in ND	2	1	1	2	0
By Monetary Repayment	0	2	1	1	5
Cancelled - Military Deployment		2	0	0	0
Cancelled due to Death/Disability	0	0	0	0	0
Total	48	44	31	25	37

9. Establish a registry of individuals licensed or registered by the board.

TOTAL NUMBER OF LICENSED NURSES PER FISCAL YEAR

Nursing licenses expire on December 31. Nursing licenses are issued for one year or two years according to criteria established by the Board of Nursing. Total numbers of nurses licensed each fiscal year are as follows:

<i>Year</i>	<i>Fiscal Yr 2008-2009</i>	<i>Fiscal Yr 2009-2010</i>	<i>Fiscal Yr 2010-2011</i>	<i>Fiscal Yr 2011-2012</i>	<i>Fiscal Yr 2012-2013</i>
Registered Nurse	9975	10,736	11431	12219	12810
Advanced Practice only- (RN in other compact state)			51	55	64
Licensed Practical Nurse	3647	3661	3667	3694	3744
Total Nurses Licensed	13,622	14,397	15,149	15,968	16,618

TOTAL NUMBER OF UNLICENSED ASSISTIVE PERSON STATISTICS PER FISCAL YEAR

Effective April 1, 2004 unlicensed assistive person registration were subject to renewal on or before June thirtieth of the second year and every two years thereafter. The active unlicensed assistive person registry statistics per fiscal year are as follows:

	<i>2008-2009</i>	<i>2009-2010</i>	<i>2010-2011</i>	<i>2011-2012</i>	<i>2012-2013</i>
Total	4009	3951	4017	418	620

10. Report annually to the governor and nursing profession regarding the regulation of nursing in this state.

The board prepares an annual report for the governor and to NDNA.

11. Conduct and support projects pertaining to nursing education and practice.

**North Dakota Nursing Needs Study
Year Ten
2013 Hospital Survey Results**

Background

In the July/August 2009 *Health Affairs*, Dr. Peter Buerhaus and coauthors found that despite the current easing of the nursing shortage due to the recession, the U.S. nursing shortage is projected to grow to 260,000 registered nurses by 2025. A shortage of this magnitude would be twice as large as any nursing shortage experienced in this country since the mid-1960s. The researchers point to a rapidly aging workforce as a primary contributor to the projected shortage. The original North Dakota Nursing Needs Study was recommended by the North Dakota Century Code Nurse Practices Act 43-12.1-08.2 in which the North Dakota Board of Nursing was directed to address issues of supply and demand including recruitment, retention and utilization of nurses. The North Dakota Board of Nursing then contracted with Dr. Patricia Moulton at the University of North Dakota School of Medicine and Health Sciences to conduct the 10 year North Dakota Nursing Needs Study. Today, the study format has changed and is under the direction of the North Dakota Center for Nursing. Some of the same information is gathered to continue the work of the initial studies, however additional questions related to the work of the North Dakota Center for Nursing specific to the work environment, leadership and the utilization of advanced practice nurses were included in the 2013 study.

Hospital Survey Results

This report includes the results from the hospital survey, which was sent to all hospitals in North Dakota. A total of 48 surveys were sent. Of these there were 23 organizational responses, 17 percent represented four urban facilities and 83 percent of the responses came from nineteen rural facilities. These surveys provided a comprehensive picture of the nature of nursing employment and potential shortages throughout the state and to enable comparisons to be drawn between health care facilities, rural and urban areas and North Dakota and national data.

Recruitment Issues

It was the most difficult to recruit RNs followed by LPNs however the length of time to fill vacancies continues to trend downward since 2005 from 17 weeks to 6 week in both 2010 and 2013. Rural areas still take longer to fill positions especially in the RN and LPN categories.

Salary and Benefit Issues

All salaries, starting and average wage have continued to increase since 2004. LPNs and APRNs in rural hospitals currently have higher starting wages than their urban counterparts. For average salary, unlicensed staff and NPs have the highest average wage.

Staffing

The statewide vacancy rate for LPNs was 3% (same for urban and rural) which is down from 5% in 2010. The statewide vacancy rate for RNs was even lower at 1% which is down from 6% in 2010. The statewide turnover rate for LPNs is 14%; this is down from 16% in the previous study in 2010. The statewide turnover rate for RNs is up to 18% in 2013 from 16% in 2010.

Utilization of APRNs in ND

Nurse Practitioners were most likely to be a recognized voting member of the medical staff, bill under their own NPI number and to have admitting privileges. Other Certified RNs were most likely to be billed incident to a physician NPI number.

Workplace Environment

While most of the hospital facilities are aware of the ANCC Magnet Program, few are involved with the process or intend to be. Most of the hospitals are unaware of the Pathways to Excellence Program although several are interested. The urban hospitals already have many of the workplace policies in place to apply for the program. Many rural hospitals were unaware of the CAH Quality Network DON Mentoring program. Hospitals were mixed on their interest in a statewide CNO residency program.

ADMINISTRATION OF THE NATIONAL NURSE AIDE ASSESSMENT PROGRAM

The NNAAP Examination is a nationally administered certification program. NNAAP is an assessment instrument to determine competency for eligibility and enrollment on the North Dakota certified nurse aide registry. Pearson Vue, a leading international educational publisher and assessment company continues to provide testing services for the North Dakota Board of Nursing. The NNAAP examination was previously co-developed and maintained by both Pearson VUE and NCSBN (National Council State Boards of Nursing). As of January 2009 NCSBN purchased the NNAAP examination and going forward will be developed and maintained solely by NCSBN.

(NNAAP) TESTING SUMMARY PER FISCAL YEAR

<i>Year</i>	<i>2008-2009</i>	<i>2009-2010</i>	<i>2010-2011</i>	<i>2011-2012</i>	<i>2012-2013</i>
Written/Oral	1059	1135	1306	1303	1316
Manual	1128	1165	1300	1293	1324

12. Notify the board of pharmacy on an annual basis, or more frequent basis if necessary, of advanced practice registered nurses authorized to write prescriptions.

The Board of Pharmacy is notified on a quarterly basis of the names of all advanced practice registered nurses with prescriptive authority. Also, the Board of Pharmacy is sent the names of all newly licensed advanced practice registered nurses with prescriptive authority on an individual basis.

13. Adopt rules to allow nurses licensed by another state to receive short term clinical education in North Dakota health care facilities.

The board did not receive any requests for short-term clinical education licensure waiver in 2012-2013.

43-12.1-09 Initial licensure and registration. The board shall license and register nursing applicants. The board shall adopt rules establishing qualifications for initial licensure and registration.

The Board of Nursing contracts with the National Council of State Boards of Nursing, Inc. to use the NCLEX-RN® examination and NCLEX-PN® examination. Computerized adaptive testing is the method used to administer the NCLEX-RN® examination and NCLEX-PN® examination. The Board provides the nursing program faculty information regarding the application and registration process for NCLEX® examinations to North Dakota nursing students throughout 2012-2013.

A biennial license cycle is followed for registered nurses and licensed practical nurses. Newly licensed nurses receive a license for the remainder of the calendar year and then renew according to the biennial cycle. The Board of Nursing maintains a permanent electronic file of licenses or registrations issued to registered nurses, licensed practical nurses and the unlicensed assistive person. The file is open to the public.

NEW LICENSES ISSUED BY FISCAL YEAR

<i>Registered Nurse</i>	<i>Fiscal Yr 2008-2009</i>	<i>Fiscal Yr 2009-2010</i>	<i>Fiscal Yr 2010-2011</i>	<i>Fiscal Yr 2011-2012</i>	<i>Fiscal Yr 2012-2013</i>
Examination	542	601	557	616	590
Endorsement	262	550	625	727	726
<i>Licensed Practical Nurse</i>	<i>2008-2009</i>	<i>2009-2010</i>	<i>2010-2011</i>	<i>2011-2012</i>	<i>2011-2012</i>
Examination	287	306	289	273	341
Endorsement	58	78	90	139	141
Total	1149	1535	1561	1755	1798

TOTAL NUMBER OF LICENSED NURSES PER FISCAL YEAR

Nursing licenses expire on December 31. Nursing licenses are issued for one year or two years according to criteria established by the Board of Nursing. Total number of nurses with an active license each fiscal year is as follows:

<i>Year</i>	<i>Fiscal Yr 2008-2009</i>	<i>Fiscal Yr 2009-2010</i>	<i>Fiscal Yr 2010-2011</i>	<i>Fiscal Yr 2011-2012</i>	<i>Fiscal Yr 2012-2013</i>
Registered Nurse	9975	10736	11431	12219	12810
Advanced Practice only- (RN in other compact state)			51	55	64
Licensed Practical Nurse	3647	3661	3667	3694	3744
Total Nurses Licensed	13,622	14,397	15,149	15,968	16,618

TOTAL SPECIALTY PRACTICE LICENSURE BY FISCAL YEAR

<i>Year</i>	<i>Fiscal Yr 2008-2009</i>	<i>Fiscal Yr 2009-2010</i>	<i>Fiscal Yr 2010-2011</i>	<i>Fiscal Yr 2011-2012</i>	<i>Fiscal Yr 2012-2013</i>
Specialty Practice RN	6	4	5	6	5

TOTAL ADVANCED PRACTICE LICENSURE BY FISCAL YEAR

<i>Year</i>	<i>Fiscal Yr 2008-2009</i>	<i>Fiscal Yr 2009-2010</i>	<i>Fiscal Yr 2010-2011</i>	<i>Fiscal Yr 2011-2012</i>	<i>Fiscal Yr 2012-2013</i>
Certified Registered Nurse Anesthetist (CRNA)	268	286	300	323	329
Certified Nurse Midwife (CNM)	9	11	11	12	14
Clinical Nurse Specialist (CNS)	38	44	44	45	46
Nurse Practitioner (NP)	355	407	445	509	563
Clinical Nurse Specialist/Nurse Practitioner (CNS, NP)	2	2	4	5	4
Nurse Clinician (NC)	2	2	2	2	2
CRNA, NP	1	1	1	1	0
CNM, NP	-	-	-	1	1
Total	675	753	807	898	959

TOTAL NUMBER OF INITIAL UNLICENSED ASSISTIVE PERSONS PER FISCAL YEAR

Initial registry listing will be subject to renewal on or before June thirtieth of the second year and every two years thereafter. The North Dakota Board of Nursing transferred the Unlicensed Assistive Person Registry to the North Dakota Department of Health effective July 1, 2011 as a result of a legislative change required by HB 1041. The active unlicensed assistive person registry statistics per fiscal year are as follows:

<i>Year</i>	<i>2008-2009</i>	<i>2009-2010</i>	<i>2010-2011</i>	<i>2011-2012</i>	<i>2012-2013</i>
Total	2678	2456	2345	100	620

TOTAL NUMBER OF MEDICATION ASSISTANTS PER FISCAL YEAR

The Medication Assistant registration is issued to correspond with the applicant registration as an unlicensed assistive person. The North Dakota Board of Nursing transferred the Medication Assistant I & II Registry to the North Dakota Department of Health effective July 1, 2011 as the result of a legislative change required by HB 1041.

<i>Year</i>	<i>2008-2009</i>	<i>2009-2010</i>	<i>2010-2011</i>	<i>2011-2012</i>	<i>2012-2013</i>
Board of Nursing Registry Medication Assistant	697	640	593	162	211
Health Department Medication Assistant	1331	1495	1672	NA	NA
Combined Total	2028	2135	2265	162	211

43-12.1-09.1 NURSING LICENSURE OR REGISTRATION – CRIMINAL HISTORY RECORD CHECKS (CHRC)

The Board was granted the authority to require criminal history record checks in 2007. The process was implemented July 2008. All initial applicants after July 2008 have been required to submit to a CHRC.

<i>Year</i>	<i>2008-2009</i>	<i>2009-2010</i>	<i>2010-2011</i>	<i>2011-2012</i>	<i>2012-2013</i>
Total fingerprint cards sent	2416	2809	1827	N/A	N/A
Completed results	2040	2362	1820	2168	2254

43-12.1-14 Grounds for Discipline – Penalties.

The Disciplinary Review Panel comprised of the executive director, RN directors, and special assistant attorney general, review and investigates all requests for investigation. Disciplinary action is taken by the board and may include acceptance of a stipulated settlement, conducting a board hearing, or dismissal of the request for lack of evidence.

INVESTIGATIVE AND DISCIPLINARY STATISTICS (RN/LPN/UAP) BY FISCAL YEAR

DISCIPLINARY ACTION	FY 08-09	FY 09-10	FY 10-11	FY 11-12	FY 12-13
Reprimand	56	56	19	40	59
Probation	5	7	13	3	5
Suspension	16	20	14	11	19
Emergency Suspension	-	-	-	12	8
Suspension Stayed	1	6	3	2	1
Voluntary Surrender	8	10	17	11	6
Revocation	0	0	0	0	1
Denial of License/Reg	6	9	3	4	2
Cease and Desist	-	-	-	1	2
NLC Privilege	1	0	0	0	3
PRACTICE BREAKDOWN CATEGORIES	FY 08-09	FY 09-10	FY 10-11	FY 11-12	FY 12-13
Medication Administration	8	10	10	10	12
Documentation	10	8	9	8	6
Attentiveness/Surveillance	0	1	3	2	2
Clinical Reasoning	4	6	5	4	8
Interpretation of authorized provider's orders	6	5	4	9	10
Intervention	5	1	1	3	1
Prevention	0	3	0	0	0
Professional responsibility/ patient advocacy	8	14	10	13	13
INTENTIONAL MISCONDUCT OR CRIMINAL BEHAVIOR	FY 08-09	FY 09-10	FY 10-11	FY 11-12	FY 12-13
Changed/falsified charting	0	3	1	1	1
Criminal conviction	7	5	5	3	1
Deliberately cover up error	1	1	1	0	1
Fraud	4	7	3	5	8
Patient abuse	0	1	0	0	1
Theft (include drug diversion)	6	13	10	11	14
Other	0	1	0	1	0
OTHER VIOLATIONS	FY 08-09	FY 09-10	FY 10-11	FY 11-12	FY 12-13
Action in Another Jurisdiction	0	3	4	5	4
Alcohol/Drug Abuse/Dependency	5	3	7	6	2
Failure to Adhere to CE Requirements	0	0	1	0	0
Practicing Without a License/Registration	37	36	7	18	28
Violation of Board Order	4	0	2	4	5
Violation of WIP	6	6	5	3	2
Failure to comply with investigation	1	2	0	2	0
Other	0	0	2	0	1
INVESTIGATIVE/NON-DISCIPLINE DISPOSITION	FY 08-09	FY 09-10	FY 10-11	FY 11-12	FY 12-13
Positive Response	316	292	143	109	106
PVR's Received	154	184	184	178	154
Dismissal	28	35	22	41	45
Letter of Concern	36	74	96	28	34

43-12.1-17 Nursing education programs.

The board shall adopt rules establishing standards for in-state nursing education programs leading to initial or advanced licensure. A nursing education program may not be provided in this state unless the board has approved the program. The board shall approve, review, and re-approve nursing education programs in this state. The board may not require a statement of intent as part of the approval process under this section.

2012-2013 Surveys of the following existing programs for continued full approval:

- On November 15, 2012, granted full approval of the Sitting Bull College ASPN program through November 2015, as the on-site focused survey completed September 27, 2012 found Sitting Bull College ASPN program in substantial compliance with NDAC 54-03.2 Standards for nursing education programs. The board motioned to require an addendum to accompany the FY 2012-2013 nursing education annual report verifying: A) the presence of adequate and dedicated clerical/assistive support for the Sitting Bull College Division of Nursing and B) incorporation of additional adjunct nursing faculty as deemed appropriate and necessary.
- On May 16, 2013, found Turtle Mountain Community College (TMCC) AASPN program in continued partial compliance with the NDAC 54-03.2; and placed TMCC AASPN program on conditional approval status until January 30, 2014, at which time the NDBON will determine whether stated deficiencies have been sufficiently corrected; and if a level of substantial compliance is not demonstrated by January 30, 2014, the NDBON will determine a course of action, which will include withdrawal of board approval and the setting of a date to discontinue the program; and TMCC AASPN program may not admit a new cohort of AASPN students until the program has achieved substantial compliance. A date for further admission of AASPN students must be mutually agreed upon by the NDBON and TMCC. The TMCC AASPN program administrator must submit the 2012-2013 annual report by October 15, 2013. In addition, a compliance report will be submitted by December 13, 2013 addressing the deficiencies of the "non-compliance", "partial-compliance", and "met progressing" standards for nursing program approval as cited in this survey report.

2012-2013 Granted an extension of the following existing program for continued full approval:

- On July 12, 2012, granted board staff request to extend the Sanford College of Nursing (formerly Medcenter One College of Nursing) BSN program approval from Spring 2017 to the Fall 2017.
- On July 12, 2012, granted program request to extend Minnesota State Community & Technical College (MSCTC) RN Refresher course approval from September 2012 to November 2012.

2012-2013 Major Programmatic changes presented to the board for approval:

- Dickinson State University (DSU) BSN completion program.
- University of North Dakota (UND) graduate programs.
- Sitting Bull College ASPN program.
- ND State College of Science (NDSCS) AASPN program.
- Sanford College of Nursing BSN program.
- ND State University (NDSU) BSN program.
- University of Mary BSN program.
- University of Mary FNP program, as the FNP program has full approval from the ND Board of Nursing and the programmatic changes are in full Compliance with NDAC 54-03.2-06-02. The NDBON required notification of status of NDAC 54-03.2-01-04 Baccalaureate or graduate nurse program faculty qualifications as there must be sufficient faculty with graduate preparation and nursing expertise to achieve the purpose of the program. The program must present evidence of compliance to the board on or before October 15, 2013. The board required notification of status of NDAC 54-03.2-03-03. Baccalaureate and graduate nurse program administrator qualifications. The program administrator must hold a minimum of a master's degree and an earned doctoral degree from an accredited institution and have educational preparation or experience in teaching, curriculum development, and administration, including at least 2 years of nursing experience. The program must present evidence of compliance to the board on or before October 15, 2013.

2012-2013 approved:

- On March 21, 2013, approved proposed revisions to the guidelines for the nurse refresher courses #9B to reflect NDCC 43-12.1-02(5), as recommended by the NEC.

PRACTICAL NURSING PROGRAM ENROLLMENT HISTORY

<i>Year</i>	<i>2008-2009</i>	<i>2009-2010</i>	<i>2010-2011</i>	<i>2011-2012</i>	<i>2012-2013</i>
Dickinson State University (AASPN)	67	75	77	77	69
ND State College of Science (AASPN)	116*	109*	114*	109*	102*
Sitting Bull College (ASPN)	14	12	14	8	19
United Tribes Tech College (AASPN)	20	20	25	26	6
Turtle Mountain Community College (AASPN)	-	-	12	22	29
Dakota Nursing Program PN (Certificate)	91	87	110	135	88
Totals	331	333	352	377	313

*Admits students every January and August. About every 3 years there is a Fargo outreach program, which extends 3 years.

REGISTERED NURSING PROGRAM ENROLLMENT HISTORY

<i>Year</i>	<i>2008-2009</i>	<i>2009-2010</i>	<i>2010-2011</i>	<i>2011-2012</i>	<i>2012-2013</i>
Dickinson State University (BSN)	50	45	40	32	37
Jamestown College (BSN)	107	105	95	103	103
Sanford College (BSN)	140	137	137	150	147
Minot State University (BSN)	117	136	103	91	139
Concordia College (BAN)	108	120	122	124	101
North Dakota State University (BSN)	221	167	191	196	191
University of Mary (BS)	150	185	153	164	157
University of North Dakota (BSN)	382	394	382	403	389
Dakota Nursing Program (AAS)	84	89	92	73	74
ND State College of Science (AS)	24	19	20	25	25
Totals	1383	1394	1335	1361	1363

MASTER'S NURSING PROGRAM ENROLLMENT HISTORY

<i>Year</i>	<i>2008-2009</i>	<i>2009-2010</i>	<i>2010-2011</i>	<i>2011-2012</i>	<i>2012-2013</i>
University of Mary	166**	184**	389**	311**	44**
University of North Dakota	149	204	206*	315	176
North Dakota State University	13	10	14	13	19
Total	328	398	609	639	239

*NDSU FNP Program was expanded to the DNP level 02/2011.

**University of Mary reported inclusion of all master's programs in 2011-12. (FNP, Nurse Educator, and Nurse Administrator)

DOCTORATE NURSING PROGRAM ENROLLMENT HISTORY

<i>Year</i>	<i>2008-2009</i>	<i>2009-2010</i>	<i>2010-2011</i>	<i>2011-2012</i>	<i>2012-2013</i>
North Dakota State University (DNP)	26	22	32	32	33
Total	26	22	32	32	33

<i>Year</i>	<i>2008-2009</i>	<i>2009-2010</i>	<i>2010-2011</i>	<i>2011-2012</i>	<i>2012-2013</i>
GRAND TOTAL (Enrollment All Programs)	2085	2141	2353	2409	1891

* Grand total revised by addition of doctorate program enrollment information for years prior to 2007-08

43-12.1-18. Nursing practice standards. The board shall adopt rules establishing standards for nursing practice. Prescriptive practices must be consistent with the scope of practice of the advanced practice registered nurse.

APRN WITH PRESCRIPTIVE PRIVILEGES BY FISCAL YEAR

<i>Year</i>	<i>Fiscal Yr 2008-2009</i>	<i>Fiscal Yr 2009-2010</i>	<i>Fiscal Yr 2010-2011</i>	<i>Fiscal Yr. 2011-2012</i>	<i>Fiscal Yr. 2012-2013</i>
Certified Registered Nurse Anesthetist	0	1	1	1	2
Certified Nurse Midwife	9	10	11	12	13
Certified Nurse Midwife/Nurse Practitioner	-	-	-	1	1
Clinical Nurse Specialist	24	26	26	24	28
Nurse Practitioner	354	365	405	457	511
Clinical Nurse Specialist/Nurse Practitioner	2	2	3	4	3
Certified Registered Nurse Anesthetist/ Nurse Practitioner	1	1	1	1	0
Total	390	405	447	500	558

NDCC 43-12.1-20 Continuing education requirements. The board shall adopt rules requiring every nurse licensed under this chapter to fulfill continuing education requirements. Before the board may renew or reactivate a license, the licensee shall submit evidence to the board establishing that the required continuing education requirements have been met. The following courses were approved by the board in 2012-2013.

Course Number	Course Name	Sponsor	Date
1001	PASRR and Level of Care Training (Patient Assessment Screening & Resident Review)	ND Long Term Care Association Bismarck, ND	June 4 & 7, 2012 May
1002	Under 21 Training for Hospitals and PRTF's: Providing Under 21 Services	ND Long Term Care Association Bismarck, ND	June 5 & 6, 2012 May
1003	Clinician/Practitioner Consultant	TrainND NE - LRSC Devils Lake, ND	June 2012 – June 2013 May
1004	2012 North Dakota State Immunization Conference	UND / Office of Professional Serv Grand Forks, ND	June 12 & 13, 2012 May
1005	A Day in the Life of a Resident/Tenant and Caregiver	Valley Mem Homes Foundation Grand Forks, ND	June 26, 2012 May
1006	Hospital Preparedness Program Conference	ND Dept of Health, ND Hospital Assoc, ND Long Term Care Assoc Bismarck, ND	June 21, 2012 June
1007	OSHA Standards & the ND Century Code Relating to Bloodborne Pathogens	ND Department of Health Division of Disease Control Bismarck, ND	June 27, 2012 June
1008	Bullying & Harassment: A Sepsis in Health Care	Fargo VA Health Care System Fargo, ND	June 20 & 21, 2012 June
1009	Detox for Prairie St. John's	Prairie St John's Fargo, ND	June 28, 2012 June
1010	Overcoming Breastfeeding Obstacles	Bis-Man Breastfeeding Partnership Bismarck, ND	August 16, 2012 June
1011	Treatment of Hypertension	Blue Cross Blue Shield of ND Fargo	July 2012 – July 2014 July - Reoccurring
1013	Teaming Up For Quality	North Dakota Health Care Review Minot	August 15, 2012 July
1014	NDNA Centennial Conference	North Dakota Nurses Association Mandan	September 21, 2012 July
1015	Pain Management at End of Life	MCO Home Health and Hospice Bismarck	Aug 2012 – Aug 2014 August Reoccurring
1016	Northern Plains Conference on Aging and Disability	MN State Comm & Tech College Moorhead, MN	September 25-27, 2012 August
1017	North Dakota Board of Nursing Retreat	North Dakota Board of Nursing Bismarck	September 19, 2012 August
1018	Preventing and Responding to Injuries	North Dakota Department of Health Bismarck	October 3-4, 2012 August
1019	There's No Place Like Home (NDLTCA Fall Conference)	ND Long Term Care Assoc. Bismarck	September 19-21, 2012 August
1020	North Dakota Home Visitation Coalition 2 nd Annual Conference	North Dakota Department of Health Bismarck	September 26-27, 2012 August

1021	The Burden of COPD (Chronic Obstructive Pulmonary Disease)	Lisbon Area Health Services Lisbon	October 10, 2012 August
1022	Update 2012: Advantage Healthcare Net	Advantage Healthcare Net Grand Forks	October 22-23, 2012 September
1023	ND CAH Quality Network Annual Meeting	The Center for Rural Health - UND Grand Forks	October 8, 2012 September
1024	The ABC's of Blood Transfusion	Heart of America Medical Center Rugby	October 23, 2012 September
1025	Justice for Child Victims with Disabilities	Children's Advocacy Centers of ND Bismarck	October 22-23, 2012 September
1026	Infection Control Potpourri	MN State Comm & Tech College Moorhead, MN	Nov 2012 - Nov 2014 September - Reoccurring
1027	Medical Emergencies: The First Five Minutes	MN State Comm & Tech College Moorhead, MN	Oct 2012 – Oct 2014 September - Reoccurring
1028	A Coaching Approach to Paraprofessional Supervision	Valley Memorial Homes Grand Forks	Nov 2012 – Nov 2014 October - Reoccurring
1029	Evidence Collection Training	Mercy Medical Center Williston	October 30, 2012 October
1030	Sexual Assault Nurse Examiner (SANE) Training	ND Council on Abused Women's Services/Coalition Against Sexual Assault in ND Bismarck	November 5-9, 2012 October
1031	CPI Nonviolent Crisis Intervention	Anne Carlsen Center Jamestown	Sept 2012 – Sept 2014 October - Reoccurring
1032	A Guide to Excellence in Dementia Communication	ND Long Term Care Association Bismarck	December 13-14, 2012 October
1033	Resident Assessment Instrument Basic MDS (Version 3.0) Training	ND Department of Health Bismarck	Nov 2012 – Nov 2014 November - Reoccurring
1034	School Nursing: Contagious Diseases & Immunization Issues	ND School Nurses Organization Fargo	November 20, 2012 November
1035	Provision of High Quality Nursing Care	North Dakota Board of Nursing Bismarck	Nov 2012 – Nov 2014 November - Reoccurring
1036	Mastering the Art of SNF Medicare Coverage	Sanford Continuing Care Center Mandan	December 6 or 7, 2012 November
1037	Pediatric Advanced Life Support	Anne Carlsen Center Jamestown	Nov 2012 – Nov 2014 November - Reoccurring
1038	40 th Annual ND Safety and Health Conference	North Dakota Safety Council Bismarck	February 5-7, 2013 December
1039	Therapy Functional Reporting Requirements 2013	ND Long Term Care Association Bismarck	January 24, 2013 January
1040	SNF PPS and the Medicare Claims Process	ND Long Term Care Association Bismarck	February 12-13, 2013 January
1041	Certified Dementia Care Specialist Training	Bethany Retirement Living Fargo	Jan 2013 – Jan 2015 January - Reoccurring
1042	Healthy Living	ND Nurses Association District 1 Minot	April 12, 2013 January
1043	ND NADONA 19 th Annual Convention	Wishek Living Center Wishek	February 20-21, 2013 January
1044	Putting Prevention and Disease Management to Work: Creating Healthy Environments to Live, Learn, Work, and Play	ND Department of Health Bismarck	Feb 2013 – Feb 2015 January - Reoccurring
1045	Your Disaster Plan - - Making It Real	ND Longer Term Care Association Bismarck	March 4-5, 2013 (Fargo) Mar 6-7, 2013 (Bismarck) January
1046	AFIX Program Assessment	ND Dept of Hlth - Disease Control Bismarck	March 2013 – March 2015 February - Reoccurring
1047	Vaccine Storage and Handling	ND Dept of Hlth - Disease Control Bismarck	March 2013 – March 2015 February - Reoccurring
1048	ND Immunization Information System (NDIIS) Training	ND Dept of Hlth - Disease Control Bismarck	March 2013 – March 2015 February - Reoccurring
1049	Child and Adolescent Immunization Update	ND Dept of Hlth - Disease Control Bismarck	March 2013 – March 2015 February - Reoccurring
1050	Adolescent and Adult Immunization Update	ND Dept of Hlth - Disease Control Bismarck	March 2013 – March 2015 February - Reoccurring
1051	Immunization Update	ND Dept of Hlth - Disease Control Bismarck	March 2013 – March 2015 February - Reoccurring
1052	Vaccines for Children (VFC) Program Enrollment	ND Dept of Hlth - Disease Control Bismarck	March 2013 – March 2015 February - Reoccurring
1053	Prevention Partnership Program Enrollment	ND Dept of Hlth - Disease Control Bismarck	March 2013 – March 2015 February - Reoccurring
1054	Drugs and Society	AD Student Nurse Organization Dakota Nursing Program Devils Lake	March 1, 2013 February
1055	Smiles for Life	ND Dept of Hlth – Oral Health Div Bismarck	March 2013 – March 2015 February – Reoccurring

1056	Get in the Know: Learn the Dangerous Choices Youth are Facing Today	Community Action Partnership Dickinson	March 5, 2013 February
1057	Brain Injury Conference: Mind Matters 2013	Head Injury Association of ND Valley City ND Dept of Human Services	March 13 & 14, 2013 February
1058	Seizure Recognition and Response	Epilepsy Foundation Minnesota St. Paul, MN	March 2013 – March 2015 February - Reoccurring
1059	Update on Fertility	The Midwest Ctr for Reproductive Health, PA Maple Grove, MN	March 2013 – March 2015 February - Reoccurring
1060	2013 Kappa Upsilon at-Large Research Event	Sigma Theta Tau International, Inc. Kappa Upsilon at-Large Chapter Bismarck	March 18, 2013 February
1061	I Am Hope: Organ, Tissue, and Eye Donation	Hospital Liaison, Life Source Mahnomen, MN	May 2013 – May 2015 February - Reoccurring
1062	Ethical Decision Making	MN State Comm & Tech College Moorhead, MN	April 2013 – April 2015 March - Reoccurring
1063	Cancer Care Conference 2013	MN State Comm & Tech College Moorhead, MN	April 26, 2013 March
1064	Meth Use and Its Effects on the Body	MN State Comm & Tech College Moorhead, MN	April 2013 – April 2015 March - Reoccurring
1065	Infant Adoption Training Initiative	Infant Adoption Training Initiative Sioux Falls	March 2013 – March 2015 March - Reoccurring
1066	2013 ND EMS Association Conference	ND EMS Association Bismarck	April 18-20, 2013 March
1067	Infection Prevention Training Bundle	ND Department of Health Bismarck	April 2013 - Sept 2013 March
1068	Immunization Program Lunch and Learn	ND Department of Health Bismarck	May 2013 – May 2014 April - Reoccurring
1069	2013 AARC Domestic Violence and Sexual Assault Conference	Abused Adult Resource Center Bismarck	April 24-25, 2013 April
1070	NDLTCA's 36 th Annual Conference & Trade Show	ND Long Term Care Association Bismarck	April 30 – May 3, 2013 April
1071	2013 NDAPA Primary Care Seminar	UND Office of Professional Serv Grand Forks	May 2-3, 2013 April
1072	Immunization Program: Centers for Disease Control	ND Department of Health Bismarck	June 2013 – June 2015 April - Reoccurring
1073	Pediatric Advanced Life Support (PALS) Full Course	Heart of America Medical Center Rugby	May 2013 – May 2015 April - Reoccurring
1074	Advanced Cardiac Life Support (ACLS) Full Course	Heart of America Medical Center Rugby	July 2013 – July 2015 April - Reoccurring
1075	Northern Plains Laboratory Seminar	ND Board of Clinical Lab Practice Bismarck	May 2, 2013 April
1076	Tying Together Practice, Partnership, and Policy	Minot State University Minot	June 20, 2013 April
1077	Your Patient with Diabetes: Updates on Patient Care and Education	City and Country Health Clinic Minot	June 27, 2013 April
1078	12 – Lead EKG Interpretation	Mountrail County Medical Center Stanley	May 16, 2013 April
1079	Mental Health First Aid Training Course	Coal Country Comm Health Ctr Beulah	May 2013 – Feb 2014 May - Reoccurring
1080	North Dakota Flex CAH Pre-Conference	Center for Rural Health - UND Grand Forks	June 5, 2013 May
1081	Dementia Training Series: Hand in Hand	North Dakota Veterans Home Lisbon	June 2013 – June 2015 May - Reoccurring

APPROVED CONTINUING EDUCATION PROGRAMS

Year	Fiscal Yr. 2008-2009	Fiscal Yr. 2009-2010	Fiscal Yr. 2010-2011	Fiscal Yr. 2011-2012	Fiscal Yr. 2012-2013
Approved Continuing Education Programs	111	70	76	58	81

CONTINUING EDUCATION AUDIT 2012

AUDIT LIST	TOTAL (that were audited)
Examination	23 (17 - RN) (6 - LPN)
LPN	36
RN	115
APRN	3
APRN with Prescriptive Authority	3
Total	180

CONTINUING EDUCATION AUDIT 2012 REPORT

Continuing education was mandated in 2003 for license renewal in North Dakota. Nurses are randomly selected for audit annually. During the 2012 renewal period, a request for audit was generated through the online renewal process to obtain a random sample of 180 nurses who renewed for the 2013 – 2014 licensure period and verified completion of 12 contact hours of continuing education. The 180 nurses were asked to submit documents to verify completion of the required contact hours for the previous 2 years by furnishing a copy of the verification of attendance for the earned contact hours. This included 23 licenses by examination renewal applicants. The majority of nurses chose to meet the continuing education requirements by obtaining the appropriate number of contact hours. The table above illustrates the compliance of the North Dakota nurses with the CE requirement. One hundred and seventy nine fully met the requirements.

LPN IV Therapy Courses Approved 2012-2013:

- On September 20, 2012, granted approval of the LPN IV Therapy Course at Dakota College, Bottineau developed by Lori Slaubaugh, MSN, RN, as the course is in full compliance with the requirements for the LPN IV Therapy course as set forth by the ND Board of Nursing and is in full compliance with NDAC 54-05-01 Standards of Practice for Licensed Practical Nurses. Approval effective for four years (September 2012-September 2016).

RN/LPN Refresher Courses Approved 2012-2013:

- On November 15, 2012, granted approval of the RN Refresher Course offered by Minnesota State Community and Technical College (MSCTC) for four years (November 2012-November 2016), finding the program in full compliance with the board guidelines as set forth by NDAC 54-02-05-05 (8).
- On May 16, 2013, granted approval of the LPN Refresher Course offered by Minnesota State Community and Technical College (MSCTC) for four years (May 2013-May 2017), finding the program in full compliance with the board guidelines as set forth by NDAC 54-02-05-05 (8).

NDCC 43-51-07 License compacts.

- 24 states in NLC

APPENDIX I

NURSING EDUCATION PROGRAMS APPROVED BY BOARD OF NURSING - JUNE 30, 2013 North Dakota Board of Nursing is the recognized approver of the nursing programs in ND by the United States Department of Education

<i>Program Name and Director</i>	<i>Address</i>	<i>Type of Program</i>	<i>Term of Board Approval</i>	<i>Nat'l Nursing Organization for Accreditation</i>	<i>NCLEX® FY 11-12 Candidates Pass Rate</i>	<i>NCLEX® FY 12-13 Candidates Pass Rate</i>
North Dakota State University Dr. Carla Gross	136 Sudro Hall PO Box 6050 Fargo, ND 58108- 6050	Doctor of Nursing Practice	Full Approval through May 2017	CCNE	NA	NA
University of Mary Dr. Glenda Reemts	7500 University Drive, Bismarck, ND 58504	Masters Degree	Full Approval through May 2016	CCNE	NA	NA
University of North Dakota Dr. Denise Korniewicz	430 Oxford St. Stop 9025 Grand Forks, ND 58201	Masters Degree	Full Approval through November 2015	CCNE	NA	NA
Dickinson State University Dr. Mary Anne Marsh	291 Campus Drive, Dickinson, ND 58601-4896	Baccalaureate Degree	Full Approval through November 2016	NLNAC	95.8%	92.31%
Jamestown College Dr. Jacqueline Mangnall	Box 6010, Jamestown, ND 58401-6010	Baccalaureate Degree	Full Approval through November 2014	NLNAC	84.4%	71.88%
Sanford College of Nursing (formerly MedCenter One College Of Nursing Dr. Karen Latham	512 North 7 th St., Bismarck, ND 58501-4494	Baccalaureate Degree	Full Approval through March 2017	CCNE	92.8%	81.40%
Minot State University Nicola Roed, MSN	500 University Ave W, Minot, ND 58707	Baccalaureate Degree	Full Approval through May 2016	NLNAC	94.9%	96.00%
University Of Mary Dr. Glenda Reemts	7500 University Drive, Bismarck, ND 58504	Baccalaureate Degree	Full Approval through May 2016	CCNE	80.33%	81.48%
University Of North Dakota Dr. Denise Korniewicz	430 Oxford St. Stop 9025 Grand Forks, ND 58201	Baccalaureate Degree	Full Approval Through November 2015	CCNE	87.5%	87.83%
North Dakota State University Dr. Carla Gross	136 Sudro Hall PO Box 6050 Fargo, ND 58108- 6050	Baccalaureate Degree	Full Approval through May 2017	CCNE	93.9%	95.18%
Concordia College Dr. Polly Kloster	901 South 8th Street Moorhead, MN 56562	Baccalaureate Degree	Full Approval through November 2014	CCNE	97.6% (reported by MN-BON)	100%

Dakota Nursing Program Julie Traynor, MS	Bismarck State College Lake Region State College Dakota College- Bottineau Williston State College Ft Berthold CC	Associate Degree - RN	Full Approval through March 2014	None	90.5%	(BSC 95.65; Bottineau 88.89; FBCC 100; LRSC 73.33; WSC 85.71) Total: 88.72%
North Dakota State College of Science Barbara Diederick, MS	800 6 th St. North, Wahpeton, ND 58075-3602	Associate Degree - RN	Full Approval through March 2016	None	100%	85.71%
Dickinson State University Dr. Mary Anne Marsh	291 Campus Drive, Dickinson, ND 58601-4896	Associate Degree – PN	Full Approval through November 2016	NLNAC	96%	87.80%
North Dakota State College of Science Barbara Diederick, MS	800 6 th St. North, Wahpeton, ND 58075-3602	Associate Degree – PN	Full Approval through March 2016	NLNAC	90.2%	87.04%
United Tribes Technical College Evelyn Orth, MSN, MMGT	3315 University Dr., Bismarck, ND 58504-7596	Associate Degree – PN	Full Approval through November 2016	NLNAC	92.0%	100%
Sitting Bull College Dr. D'Arlyn Bauer	1341 92 ND Street, Fort Yates, ND 58538	Associate Degree – PN	Full Approval through November 2012	None	100%	100%
Turtle Mountain Community College JoAnne Blue, MS	P.O. Box 340 Belcourt, ND 58316	Associate Degree - PN	Continued Initial Approval through May 2013	None	NA	50%
Dakota Nursing Program Julie Traynor, MS	Bismarck State College Lake Region State College Dakota College at Bottineau Williston State College Fort Berthold CC	Certificate PN	Full Approval through March 2014	None	97.8%	BSC 96.55%; Bottineau 100%; FBCC 100%; LRSC 100%; WSC 100%) Total: 99.31%

**APPENDIX II
FINANCIAL REPORTS**

**NORTH DAKOTA BOARD OF NURSING
SCHEDULE OF REVENUES AND EXPENSES - BUDGET AND ACTUAL
YEAR ENDED JUNE 30, 2013**

		GENERAL FUND		
		Original and Final Budget	Actual	Variance
REVENUES				
	Endorsements			
	Professional	77,000	85,690	8,690
	Practical	12,100	17,545	5,445
	Re-registration			
	Professional	472,000	466,600	(5,400)
	Practical	133,000	121,975	(11,025)
	Exams			
	Professional	60,500	68,970	8,470
	Practical	33,000	36,575	3,575
	Fees			
	Professional	500	475	(25)
	APRN License Renewal	16,000	16,440	440
	Reactivation Fee	4,050	4,590	540
	Advanced Licensure	9,600	10,263	663
	Prescriptive Authority	15,250	16,000	750
	Initial/Renewal Specialty Practice RN	200	0	(200)
	Unlicensed Assistive Person Renewal/Reactivation	7,050	6,060	(990)
	Unlicensed Assistive Person Registry	2,250	5,670	3,420
	Medication Assistant	4,000	4,840	840
	Labels and mailing list	2,500	3,467	967
	Disciplinary Fees – Late Renewal	5,000	8,330	3,330
	Penalty Fees	30,000	50,846	20,846
	Workplace Impairment Program	3,600	4,020	420
	Encumbrance Fees	5,400	3,900	(1,500)
	School Surveys	1,000	500	(500)
	Publications	500	188	(312)
	Course Review Fee	500	1,300	800
	Continuing Education Presentations	1,000	600	(400)
	Continuing Education Approval Fee	6,000	8,120	2,120
	NNAAP Testing	30,000	33,021	3,021
	NEL Application Fee	600	825	225
	CHRC Processing Fee – RN/LPN	37,700	45,980	8,280
	Interest	5,000	2,307	(2,693)
	Center for Nursing	255,240	251,730	(3,510)
	Other	6,000	8,100	2,100
	Total Revenues	1,236,540	1,284,927	48,387

APPENDIX II CONTINUED FINANCIAL REPORTS DETAILED STATEMENT OF REVENUES AND EXPENSES - BUDGET AND ACTUAL - page 2				
		GENERAL FUND		
		Original and Final Budget	Actual	Variance
EXPENSES				
	Salaries	550,000	558,191	(8,191)
	Benefits	101,100	99,815	1,285
	EAP Program Premiums	150	149	1
	Health Insurance	85,120	86,002	(882)
	Life Insurance	75	130	(55)
	Workers Compensation & State Unemployment Tax	1,050	502	548
	Staff Expenses	1,000	572	428
	<i>Total employee compensation & benefits</i>	<i>738,495</i>	<i>745,361</i>	<i>(6,866)</i>
	Board Staff Expenses	9,000	6,228	2,772
	Board Meeting Expenses	43,000	41,812	1,188
	Meeting Expenses	250	0	250
	<i>Total Board Expenses</i>	<i>52,250</i>	<i>48,040</i>	<i>4,210</i>
	Rent	32,820	32,820	0
	Phone Expense	6,500	5,750	750
	Office Supplies Expense	6,000	5,263	737
	Records Storage Expense	500	233	267
	Postage Expense	10,000	9,116	884
	Printing Expense	1,000	988	12
	Publications & Subscriptions	1,000	524	476
	Service contract	600	564	36
	Repairs & Parts	250	0	250
	Office Insurance	1,300	788	512
	Disciplinary Process	1,500	77	1,423
	NCSBN	6,000	6,000	0
	Bank Charges	100	35	65
	Audit Fees	8,000	8,000	0
	Legal Fees	42,600	38,760	3,840
	Legislative Consultant	8,000	10,780	(2,780)
	Technology Maintenance	6,100	6,388	(288)
	Online Renewal/Verification	21,000	22,558	(1,558)
	Equipment Expense	2,750	1,958	792
	Internet Service	15,000	13,696	1,304
	Office Maintenance	2,400	2,165	235
	Program Enhancements	12,000	5,931	6,069
	Administrative Rule Changes	2,000	226	1,774
	Miscellaneous	500	0	500
	Center for Nursing	255,240	251,730	3,510
	Center for Nursing funding	55,000	55,000	0
	Datrue	20,000	8,542	11,458
	Depreciation Expense	0	25,435	(25,435)
	<i>Total Other Operating Expense</i>	<i>518,160</i>	<i>513,327</i>	<i>4,833</i>
	Total Expenses	1,308,905	1,306,728	2,177
	REVENUES OVER EXPENSES	\$ (72,365)	\$(26,581)	\$50,990

APPENDIX III

	Fiscal Yr 2009-2010		Fiscal Yr 2010-2011		Fiscal Yr 2012-2013	
CATEGORIES	LPN	RN	LPN	RN	LPN	RN
Licensed Nurses	3667	11431	3694	12219	3744	12810
Exam	289	557	273	616	341	590
Endorsement	90	625	139	722	141	726
Advanced Practice RN	0	807	0	898	0	959
Prescriptive Authority	0	447	0	500	0	558
GENDER STATISTICS						
Male	120	719	129	798	137	868
Female	3547	10712	3565	11421	3607	11942
ETHNIC						
African American	22	91	30	131	43	150
Asian	3	43	7	71	16	101
Asian Indian	36	45	35	46	31	47
Other Asian	10	37	12	40	9	89
Hispanic	25	59	28	69	35	75
Native American	87	113	93	128	100	142
Other	20	72	22	87	24	94
Pacific Islander	4	11	6	13	5	13
White not of Hispanic Origin	3460	10960	3461	11634	3481	12099
EMPLOYMENT						
Employed Full Time	2291	8096	2287	8729	2284	9310
Employed Part Time	906	2428	853	2282	817	2178
Not Employed	413	756	417	840	483	853
Nursing Volunteer	1	21	5	41	5	46
Per Diem	48	108	113	263	127	345
Retired	8	22	19	64	28	78
EMPLOYMENT SETTING						
Academic Setting	1	21	1	43	1	50
Ambulatory Care Clinic	239	636	261	719	301	819
Church	1	46	1	49	1	48
Correctional Facility	1	9	4	22	6	27
Government	54	267	52	267	60	279
Home Health	71	288	81	314	83	309
Hospital	639	5449	595	5824	543	6176
Insurance Claims/Benefits	2	42	4	116	4	203
Military	8	59	8	62	4	61
Nursing Home/Extended Care	1076	1009	1103	1047	1081	1034
Nursing Education Program	9	264	8	264	5	259
Occupational Health	12	51	14	58	17	74
Other	692	2043	696	2167	764	2124
Physicians Office	757	698	758	721	762	800
Policy/Planning/Regulatory/ Licensing Agency	0	3	1	4	1	6
Public/Community Health	46	342	47	334	49	335
School Health Services	29	67	28	67	23	68
Self Employed	10	71	12	65	12	61
Social Services	8	21	8	20	11	19
Temporary Agency	11	25	12	27	16	28
Volunteer	1	20	0	29	0	30

APPENDIX III CONTINUED

	Fiscal Yr 2010-2011		Fiscal Yr 2011-2012		Fiscal Yr 2012-2013	
PRACTICE AREA	LPN	RN	LPN	RN	LPN	RN
Anesthesia	0	269	0	285	0	291
Chemical Dependency	14	30	16	31	14	33
Community	3	10	8	23	15	35
Critical Care	14	599	12	635	11	685
Emergency Care	23	444	22	452	18	498
Family Practice	422	482	436	518	436	574
Geriatrics	1023	987	1022	998	1015	976
Home Health	57	292	63	293	66	295
Maternal Child	68	473	62	475	55	513
Medical/Surgical	316	1645	294	1744	275	1793
Mental Health	99	408	94	442	80	460
Neonatology	5	227	4	233	4	243
Nursing Administration	14	305	13	321	12	311
Occupational Health	5	8	9	34	10	57
Oncology	32	285	25	323	22	350
Other	1287	3411	1319	3706	1421	3892
Palliative Care	4	21	6	40	6	36
Parish	3	60	2	62	1	57
Pediatrics	86	272	86	287	94	305
Perioperative	23	461	20	498	15	546
Public/Community Health	51	312	46	312	47	307
Quality Assurance	9	112	10	127	11	147
Rehabilitation	62	147	66	165	58	166
School	29	132	26	129	20	125
Trauma	0	9	1	13	2	16
Women's Health	18	30	32	73	36	99
NURSING POSITION						
Advanced Practice RN	0	756	0	843	0	895
Advanced Practice w/ RN in other Compact State	0	51	0	55	0	64
Prescriptive Authority APRNs	0	447	0	500	0	558
Nurse Administrator	7	272	6	269	5	271
Nurse Consultant	1	120	1	194	2	189
Nurse Educator	8	282	8	304	6	314
Nurse Executive	0	13	0	30	0	42
Nursing Faculty	29	104	30	120	32	123
Nursing Manager	69	786	64	840	58	857
Office Nurse	628	521	625	563	641	621
Other	709	2035	737	2177	810	2192
Specialty Practice Nurse	0	3	0	7	0	5
Staff Nurse	2195	6471	2189	6774	2147	7158
Travel Nurse	21	68	34	98	42	122
EDUCATION						
Vocational Certificate/Diploma	1482	1248	1465	1208	1447	1145
Associate Degree	2081	2486	2105	2824	2177	2969
Bachelors in Nursing	11	6220	12	6546	11	6895
Bachelors in Other	88	225	101	229	101	251
Masters in Nursing	0	837	1	960	0	1074
Masters in Other	5	243	7	256	8	267

Doctorate in Nursing	0	44	0	68	0	81
Doctorate in Other	0	39	0	40	0	45
AP Post Basic Education	0	68	0	66	0	60
Post BS Anesthesia	0	21	0	22	0	23

**APPENDIX IV
FISCAL YEAR COUNTY DISTRIBUTION OF LICENSED NURSES**

	Fiscal Yr 2010-2011		Fiscal Yr 2011-2012		Fiscal Yr 2012-2013	
County	LPN	RN	LPN	RN	LPN	RN
Adams	13	42	12	42	11	45
Barnes	57	101	56	104	52	109
Benson	27	27	27	31	24	36
Billings	5	8	3	9	4	7
Bottineau	43	73	41	80	42	79
Bowman	13	39	13	41	10	40
Burke	8	14	8	20	5	18
Burleigh	264	1649	290	1747	289	1844
Cass	735	2373	765	2557	809	2771
Cavalier	33	37	32	37	33	41
Dickey	30	59	26	64	22	62
Divide	8	27	11	31	12	28
Dunn	11	26	15	30	14	26
Eddy	20	22	19	26	16	23
Emmons	10	31	10	33	10	34
Foster	22	50	20	53	16	55
Golden Valley	1	9	0	10	0	11
Grand Forks	308	917	308	932	299	978
Grant	10	25	14	26	14	25
Griggs	23	17	23	18	25	18
Hettinger	10	23	9	23	6	22
Kidder	4	23	5	24	5	26
Lamoure	24	43	24	43	23	47
Logan	9	20	10	18	10	18
McHenry	19	61	21	67	22	70
McKenzie	20	39	22	38	22	42
McIntosh	23	41	23	47	27	48
McLean	47	109	47	111	48	117
Mercer	27	80	22	81	25	80
Morton	103	401	105	411	116	443
Mountrail	31	52	26	50	29	57
Nelson	22	37	24	38	27	39

APPENDIX IV CONTINUED

	Fiscal Yr 2010-2011		Fiscal Yr 2011-2012		Fiscal Yr 2012-2013	
County	LPN	RN	LPN	RN	LPN	RN
Oliver	5	10	3	12	4	10
Out of State	527	2521	539	2829	550	2917
Pembina	47	58	46	61	47	55
Pierce	37	37	35	45	29	48
Ramsey	83	122	73	115	77	119
Ransom	44	47	46	46	49	51
Renville	7	26	8	31	8	33
Richland	92	125	88	129	94	140
Rolette	52	103	50	108	52	109
Sargent	31	29	31	35	28	34
Sheridan	6	18	5	19	4	17
Sioux	4	13	4	13	6	14
Slope	4	1	3	2	3	2
Stark	106	266	109	284	118	285
Steele	10	27	7	27	6	27
Stutsman	101	287	101	286	109	305
Towner	17	22	14	26	14	31
Traill	51	96	55	102	53	103
Walsh	92	113	88	123	83	128
Ward	220	780	202	814	187	838
Wells	30	49	32	52	30	56
Williams	121	206	124	218	126	229
Total	3667	11431	3694	12219	3744	12810

APPENDIX V
NORTH DAKOTA BOARD OF NURSING STRATEGIC PLAN 2010-2013
July 1, 2012 – June 30, 2013 Report

OUTCOME	TACTICS	ACTIVITIES
Goal 1: Public Protection Is Ensured Through Evidence-Based Regulation		
1. Proactively address the impact of the dynamic health care environment.	1. Monitor trend data on healthcare in North Dakota, regionally and nationally.	- Reviewed Nurse Practices Act and Rules annually at the July Board Meeting. - Board Members provided with the latest iteration of the Nurse Practices Act. Rules available on the website. - Retired the following practice statements: (A) Markman Hair Implantar (B) Delegation of Peritoneal Dialysis (C) Limited Ultrasound (D) Removal of Implanted Tunneled Catheter (E) Removal of Tunneled Catheter. - Temporary Reassignment practice statement revised. - Retired Occupational Respiratory Protection OSHA Standards practice statement. - Atkinson & Atkinson Audit has been completed and the results have been assigned to the board committees and staff has begun the review of the recommendations. - Continued commitment to contracting with University of North Dakota Center for Rural Health for the Nursing Needs Study through FY 2010-2012. - Contracted with the North Dakota Center for Nursing to conduct the 2011- 2012 study. - Reviewed Snapshot of North Dakota's Health Care Workforce- July 2010 Board Meeting. - Report of High School Student Survey- July 2011 Board meeting. - July 2011 – Patricia Moulton, PhD presented the results of the Year 9 Nursing Needs Study. Surveys this year related to the North Dakota Nursing Education Consortium and use of technology, simulation equipment and HS Student Survey. - Nursing Needs Study research hosted on the UND Center for Rural Health website and the North Dakota Center for Nursing website. - Facility Survey is has been conducted by the North Dakota Center for Nursing. Results and report pending at July 2013 Board Meeting.

		Revised APRN applications to eliminate the requirement to submit a paper copy of a scope of practice and replaced it with a verification statement.
2. Ensure the licensure and registration of qualified individuals for the practice of nursing.	1. Improve the accuracy and efficiency of electronic enhancements to licensure/registration processes.	- FY 2010-2011- continues implementation of electronic (paperless) system for licensure. - Cardless renewal completed successfully for 2011-2013 licensees. - Notification has been included in every issue of the Dakota Nurse Connection. - Explore the feasibility of the receipt of official transcripts electronically on an ongoing basis. - Technology Committee Agenda – December 2010 & October 27, 2011 – Script Safe was discussed and the need to wait for nursing programs to have capability. Recommend the committee continue to assess the usage annually and to monitor availability. - The committee discussed the capability to provide electronic transcripts through AVOW Systems and the website link for AVOW Systems will be added to the NDBON website for the committee to review. - Spring 2013- A process for receipt of electronic transcripts through The National Student Clearinghouse Transcripts was developed and initiated. Nearly one hundred were successfully transmitted by NDSU Bachelors nursing program and Minot State University without incident.
3. Continued Competence: Evaluate the standards for continued competence.	1. Clarify the scope of practice for all licensure levels of nursing practice.	- Commence review of literature related to scope of practice. - FY 2010-2011 Conduct select samples review of state's statute regarding scope of practice. - Joint collaborative discussion with Sanford Clinic (5 states) re: RN/LPN/ Unlicensed SOP document. - FY 2011-2012 Review the Nurse Practices Act as it relates to scopes of practice. - Atkinson & Atkinson Audit is currently in process. - Atkinson & Atkinson Audit has been completed and the results have been assigned to board committees and staff has begun the review of the recommendations. - FAQs and Scope of Practice document submitted in June 2012 for publication in the Dakota Nurse Connection Fall of 2012. - FY 2013 Continue to require that students in programs leading to a degree as a medical assistant or surgical technician be required to register on the BON

		UAP/Technician registry as required according to NDCC 43-12.1-02 and NDAC54-05-04-04 Standards of Delegation 4. Develop a prioritized plan of action to implement recommended changes from research results. - Proposed revisions to NDCC 43.12.1 Nurse Practices Act submitted as agency legislation for 2013 Session. - HB 1091 Proposed revisions to the NDCC 43-12.1 Nurse Practices Act were successful passed and signed into law and will be effective August 1, 2013.
4. Ensure the outcome of nursing programs is preparation of qualified candidates for licensure.	Evaluate standards and outcomes for nursing education programs.	1. FY 2012-2013 the Nursing Education Committee and invited stakeholders will evaluate the program survey process. - NEC Task Force composed of 4 committee members and 4 external stakeholders completed a comprehensive evaluation of the present survey process in May/June 2011. - Recommendations were formulated and were approved by the Board at the July 2011 meeting. The revised survey process document has been utilized to guide the onsite survey process for 8 programs from fall 2011-June 2013.
	Promote innovation in nursing practice and education through regulation and collaboration with stakeholders.	1. FY 2012-2013 Data from national studies on nursing is presented to nursing education committee and nursing education program representatives for curricular decisions. - Assoc. Director for Education attended a national conference on innovation and emerging technologies in nursing education in July 2011. Information was shared with NEC and CUNEA members at November 2011 NEC meeting. Hard-copy packets containing conference highlights, contact person (presenter) info, and 15 selected abstracts were shared with NEC and CUNEA members present, and mailed to those absent. Conference slides are available in online CE library for review by nurse educators (via Director for Education account) until July 2013. 2. FY 2012-2013 Submission of annual report will be accomplished in an electronic format. - Board approved the technology budget to include development of an electronic format for submission of the Nursing Education Annual Report. - The Electronic Education Report went "live" on the website on December 6, 2011. Deadline for submission of data by nursing education programs was set at

		December 28, 2011. National Nursing Workforce <i>Minimum Dataset Requirements</i> were incorporated into the new templates of the electronic report. The completed report was presented to the Board for approval at the January 2012 meeting. • Feedback regarding the first EER process was elicited & received from NEC and CUNEA in March 2012. Feedback was considered in the revision of some aspects of the process & some of the templates. • Feedback was also received from the Technology Committee on June 7, 2012 positive feedback with discussion on suggested enhancements. • Fiscal year 2011-2012 Annual Education Report completed electronically. Enhancements implemented to further develop online submission process. 3. FY 2010-2011 Revise educational standards to allow innovation using model rules as a guide. • Following completion of the rule promulgation process, newly-adopted standards to allow for nursing education innovation became effective April 1, 2011. • In summer 2011, information regarding the revised educational standards, and particularly <i>Chapter 54-03.2-10 Innovation in Nursing Education</i>, was disseminated to each individual nursing education program administrator via hard-copy mailing with changes and new sections highlighted for ease of comparing the “old” and the “new.” • Specific educational sessions at the spring 2011 NEC meeting and summer 2011 CUNEA meeting were presented to apprise programs of rule changes/additions. 4. FY 2010-2013 Continue to identify and build on successful innovations. • In May 2012, a draft template for submission of applications and proposals relative to Innovative Nursing Education was presented to NEC and CUNEA. Comments regarding the draft were invited until June 15, 2012. As of June 30, 2012, no requests for consideration of proposals had been received by the Board office.
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		5. Support establishment of a Center for Nursing as a repository for innovations. • Approved use of Board funds to match Bremer Foundation Grant in 2011. • Executive Director hired; incorporation, organization chart and establishment of a name completed. Executive Director began work on July 18, 2011. • Board funded the Center for a total of \$52,000. • Executive Director & one Board Member are on the Board for the CFN for 2011-2013. • Board staff is providing in-kind services related to finances and other administrative work. Services decreased significantly with CFN hiring Brady Martz as their accounting firm (2012-2013). • March 2012 began the rule promulgation process to increase the renewal, endorsement and reactivation fees by \$30 to support the work of the North Dakota Center for Nursing. • Rules effective October 1, 2012 for fee increase of \$30 for renewal, endorsement & reactivation to fund the North Dakota Center for Nursing. 6. Identify sources of data, types of data, and review potential data elements that require collection on an ongoing basis for innovation in nursing education. • Beginning in 2012-2013, focus will center upon identifying and collecting appropriate data, based upon education programs' interests/requests and actual innovative proposals received. 7. Utilized the Atkinson & Atkinson Audit findings to recommend revisions to 43-12.1-09 subsections 2.a.(2) and 2.a. (3); and 43-12.1-17 subsections 1,2,3. Also utilized an assessment related to the consumer friendly/unfriendly components of website by Citizens Advocacy Center (CAC). The community of nurses and the North Dakota Center for Nursing also contributed recommendations on improvements to the website. 8. Collaborate with the North Dakota Center for Nursing Leadership Teams regarding programs and projects relevant to nursing education.
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5. Assure patient safety through a best practice disciplinary and non-disciplinary process model.	1. Evaluate best practices in disciplinary/non-disciplinary processes.	1. FY 10-11 Review regulatory disciplinary/ non-disciplinary models • Discussed by PMC in 2010. Approximately 7 boards reported having an audit conducted of their discipline programs. Audit costs varied and ranged up to \$34,000. NCSBN has designated funds available for audits. • 2011-2012 NDBON received \$20,000 from NCSBN to conduct external audit. • May 2012 the Atkinson & Atkinson Audit has been completed and the results have been assigned to board committees and staff has begun the review of the recommendations. • July 2013: Utilized the Atkinson & Atkinson Audit findings to recommend revisions to Nurse Practices Act. 2. FY 10-11 Evaluate current NCSBN CORE data r/t best practices for disciplinary/non-disciplinary processes • FY 2007 CORE data regarding nurses' perceptions of the Discipline Process was reviewed. 94.9 % of respondents felt the extent of disciplinary regulation in ND was adequate compared to the aggregate response rate of 90.5%. Other data showed effective and very effective responses. 3. FY 11-13 Conduct external review of NDBON disciplinary/ non-disciplinary processes. • 3 Proposals to conduct audit to be reviewed by BON at 7/11 meeting. Atkinson & Atkinson/FARB selected by Board to conduct audit. • FY 11-12 Audit is being conducted by outside firm (Atkinson & Atkinson/FARB). • The 2011 NCSBN Delegate Assembly adopted the revised 2011 Uniform Licensure Requirements (to be incorporated with recommended audit changes). • A&A audit findings were presented at May 2012 Board meeting. • Atkinson & Atkinson Audit has been completed and the results have been assigned to board committees and staff has begun the review of the recommendations. 4. FY 12-13 Establish a prioritized plan to implement recommended changes from external review. • Systematic and thorough review of recommendations and suggested changes to the Nurse Practices Act for the 2013 Legislative Session.
6. Assure consumer protection through a solid, defensible, monitoring program.	1. Identify best practices for alternative programs.	1. FY 10-11 Review other regulatory alternative program models • Presentation by NC BON regarding CAC Review Process of their Alternative Program.

		- NCSBN is developing Alternative Program Guidelines which will be useful in conjunction with BON audit review. - FY 10-11 Evaluate current NCSBN CORE data r/ best practices for alternative programs. - No data available for committee to discuss. - FY 11-13 Conduct external review of NDBON Workplace Impairment Program. 3 Proposals to conduct audit to be reviewed by BON at 7/11 meeting. Atkinson & Atkinson/FARB selected by Board to conduct audit. - FY 11-12 Audit is being conducted by outside firm (Atkinson & Atkinson/FARB) - A&A audit findings were presented at May 2012 Board meeting. - Atkinson & Atkinson Audit has been completed and the results have been assigned to board committees and staff has begun the review of the recommendations. - FY 12-13 Establish a prioritized plan to implement recommended changes from external review. - Systematic and thorough review of recommendations and suggested changes to the Nurse Practices Act for the 2013 Legislative Session.
Goal 2: Effective Coalitions Exist With Stakeholders		
Build coalitions with healthcare professional organizations and policy makers.	Enhance communication among regulatory boards, nursing organizations, education organizations, and policy makers.	- Board Members contact policy makers on legislative issues as necessary. - Hired Legislative Monitor for 2010-2011 session. Monitor reported to Board at the January, March & May Board Meetings. - Hired Legislative Monitor for 2012-2013 session. Will be reporting to Board as desired. - Develop an outreach plan for maintaining contact with legislators and key stakeholders. - Discussed contacting legislators at the November 2010, January, March & May Board Meeting. - Board Retreat – provided presentation and discussion on working with legislators - No Formal plan developed. - Board Members attended legislative hearings on January 16 including HB 1091 and contacted their District Legislators. Several Board Members attended the hearing in the Senate on HB 1091. - Board Members were introduced to additional components of the legislative process throughout the session. - Participate in North Dakota Nurse Leadership Council as an Associate member (non-voting). - Plan to attend the January 5, 2011 meeting for the potential merger of

		NDNLN & NDNEST. • Merger accomplished and established the Center for Nursing Leadership Board.
Goal 3: Nursing Workforce Issues Are Addressed In Collaboration With Stakeholders		
1. Be proactive and innovative in addressing issues related to the availability of nursing resources.	1. Continue participation in state, regional, national and international initiatives to support a competent and mobile nursing workforce.	• Utilize data from state, regional, national and international workforce initiatives on an ongoing basis. • Patricia Moulton PhD presented at the July Board Meeting; 2010 Snapshot of ND Health Care Workforce; ND Nursing Needs Study and Related Projects 2010. • July 2011- reported on the High School Student Survey. • July 2011 – Patricia Moulton, PhD presented the results of the Year 9 Nursing Needs Study. Surveys this year related to the North Dakota Nursing Education Consortium and use of technology, simulation equipment and HS Student Survey. • 2012- Conducted Facility Survey. Projection report will be given at the January 2013 Board Meeting. • Provided an annual report on the recommendations from the Nursing Needs Study to healthcare organizations. • Nursing Needs Study research hosted on the UND Center for Rural Health Website and North Dakota Center for Nursing website. • 2010-2011-NNS research reported to legislative committees. • All meetings attended by Staff and Board Members are identified on agenda of the regular BON meetings.
Goal 4: Board Member Leadership Is Effective		
1. Provide Board Members - opportunities for leadership development.	1. Design a structured format for Board Member role development.	1. FY 2010-2011 Evaluate the orientation process of the new Board members. • Board Orientation Manual revised. • Newly appointed Board Member attended Board staff and Disciplinary Review Panel orientation. • New board members offered the opportunity to participate in Disc Analysis with Excel Leadership of Bismarck. 2. Increase NDBON attendance and active participation at the state and national level. • President and ED attended NCSBN Delegate Assembly and Mid-Year Meeting 2010, 2011, 2012 & 2013. • Board Members attended the 2010 -2012 NDNA Annual Meeting and ND Health

		- Care Association Annual Meeting. - Board Members attended the 2012-2013 ND Health Care Association Annual Meeting and NDLTCA Meeting. 2010-2013 North Dakota Organization of Nurse Executives and Colleges & University Nursing Education Administrators. - Executive Director & one Board Member on the CFN Board. - Executive Director appointed for a two year term to the APRNs Committee of National Council of State Boards of Nursing. Term expired 2013. - Executive Director elected as a member at large to the Board of the Nurse Licensure Compact Administrators for 2012-2013. 2011-2013 Associate Director provided assistance to other member boards interested in utilizing the Taxonomy of Error Root Cause Analysis Practice - Responsibility tool. 3. FY 2010-2013 Increase knowledge of fiduciary responsibilities. 4. FY 2011-2012 Improve clarity of role development and job descriptions. 5. FY 2011-2012 Develop a Board succession plan for the future.
Goal 5: Nursing Regulation is Enhanced Through Responsive Infrastructure		
1. Be proactive and innovative in addressing information management needs.	1. Study the capability and capacity for enhancement of information management.	1. FY 2010-2011 reviewed necessary revisions to the Bylaws to establish a Technology Committee. - Revisions adopted May 2010 Board Meeting. 2. FY 2010-2011 Conduct an external review of current information management systems. - Technology Committee met on December 9, 2010; January 19, March 31, 2011. - Recommended technology update to board room, paperless system for board meetings with a member's only side of the website. Approved by Board May 2011. - Board Members and Staff received an orientation to use of their board assigned laptop at the September 2011 meeting. - The first paperless board meeting was held November 2011. - Installed Audio-Visual equipment in the Board Room in fall 2011. - All board members and staff received a laptop with accessories for accessing the Board Agenda Packet and all agendas and minutes for committees on the members' only side of the website as of September 2011. 2012-2013 – Online Reactivation & APRN applications developed; - Revamp of Website discussed;

		recommendations reviewed at December 12, 2012 mtg. Plan to forward recommendations to the May Board Meeting. • Web-streaming- update from NorthStar Audio. Committee discussed live-streaming the Board Meeting and then have the meeting archived for a period of time. • Offering of Continuing Education presentations were also discussed in-depth. At the May 2013, the Board approved that <u>some</u> of the presentations be offered free of charge while others be charged for at a minimal fee of \$10 per contact hour. • The Technology Committee is currently reviewing surveys that could be used for assessing the educational needs and utilization of technology by/for Board Members and Staff. September 2013 meeting of the Board has been targeted for this survey.
	2. Establish a systematic technology management processes.	• Establish a prioritized plan for technology infrastructure based on the results of the external review. • Technology Committee met on December 9, 2010; January 19, March 31, 2011, October 27, December 8, 2011; • February 16, June 7; October 24 & December 12, 2012; • January 9, and May 9, 2013 • Recommended technology update to board room, paperless system for board meetings with a member's only side of the website. Approved by Board May 2011 and completed September 2012. • January Board Meeting 2011 was broadcast over the BTWAN and IVN systems to numerous locations from Technology Center at BSC. • January Board Meeting 2012 was broadcast over the BTWAN and IVN systems to numerous locations from the Board Room. • 2012-2013 Numerous meetings and conference calls have been conducted utilizing the Polycom System in the Board Room. • 2012 – Contracted with Dakota Backup for a secure off site security system. • 2012 – 100 % Certified PCI Compliant. Trustwave did a scan of our physical system here in the office and the website www.ndbon.org to check for vulnerabilities to the systems. The system office passed. • Datrue Process Automation is continuing

		the transfer of transcripts to CDs. Approximately 50% completed as of May 15, 2013. • Board staff received an updated computer system and server as of July/August 2011. • Web-streaming set up in place as of July 12, 2013. Staff will have the ability to tape a presentation and upload it to the web for viewing. Editing software will be available. Board Meetings can also be web-streamed.
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APPENDIX VI
NDCC 43-12.1-04. PERSONS EXEMPT FROM PROVISIONS OF CHAPTER.

NDCC 43.12.1-04(12). Upon written notification to the board by an out-of-state nursing program, a student practicing nursing as a part of a nursing education program preparing for initial or advanced licensure as a registered nurse or licensed practical nurse which is approved by a board of nursing and is located in an institution of higher education that offers transferable credit.

***Out of State Students Practicing in North Dakota
2012 – 2013***

**Note that Concordia College is approved by the ND Board of Nursing. Therefore, Concordia College nursing students are not included in the above figures.*

**The 2011-2012 report reflected Summer 2011, Fall 2011, and Spring 2012. The table changed in 2013 to reflect the annual recognition fee periods of Fall, Spring, Summer. Included in the table is the adjusted 2011-2012 data to reflect Fall 2011, Spring 2012, and Summer 2012.*

Type of Program/Student						Percentage for program type	Change from 2011-2012
	Fall 2012	Spring 2013	Summer 2013	Total	Total Fall, Spring, Summer 2011-2012		
Certificate PN	0	0	0	0	0	N/A	
ASPN/AASPN	209	220	95	524	433	73.9%	+ 91 (+8%)
ADN/ASN	58	26	0	84	102	11.9%	-18 (-8%)
BSN	16	34	7	57	92	8%	-35 (-6%)
CRNA	7	3	4	14	8	2%	+6 (+6%)
FNP/ANP/PNP/WHNP	8	10	7	25	15	3.5%	+10 (+6%)
CNM	2	1		3	2	0.42%	+1 (+6%)
DNP	1	1 (CNM)		2	4	0.28%	-2 (-5%)
TOTAL	301	295	113	709	656	100%	+53 (+7%) more in 2012-13 than in 2011-12

As evidenced above, the 3 significant changes this past year over the previous year are these:

- ❖ An 8% increase in ASPN/AASPN students as compared to previous year.
- ❖ An 8% decrease in total number of ADN (RN) students, which was consistent with previous year.
- ❖ A 6% decrease in total number of BSN (RN) students, which was consistent with previous year.
- ❖ Increase in total number of students by 7%, as compared to the previous year. In 2011-2012, there was a 13% decrease in total students as compared to 2010-2011.