

### **Consideration of the Strategic Plan for Fiscal Years 2023-2027**

In February 2022, Board Staff received instructions from the Legislative Budget Board for preparing and submitting the *Board of Nursing (BON) Strategic Plan for Fiscal Years 2023 to 2027*. Staff from all departments worked to produce the draft of the plan which included: Agency Goals and Action Plan; Redundancies and Impediments, Budget Structure—Goals, Objectives and Performance Measures; Measure Definitions; Historically Underutilized Business Plan; Agency Workforce Plan; Report on Customer Service; and the Agency Information Technology Resource Planning Report.

In May 2020, Board Staff submitted the draft to the Board Liaisons who volunteered to review the plan prior to submission. Board Liaisons included: Kathy Shipp, MSN, APRN, FNP, Board President; and Rick Williams, representing Consumers. Following review and completion of edits from the Board Liaisons, the *BON Strategic Plan for Fiscal Years 2023 to 2027* was submitted electronically on May 31, 2022, ahead of the plan due date of June 1, 2022. The *BON Strategic Plan for Fiscal Years 2023 to 2027* can be viewed on the **Publications** page on the BON website ([www.bon.texas.gov](http://www.bon.texas.gov)).

The direct link for the Strategic Plan is:

[https://www.bon.texas.gov/pdfs/publication\\_pdfs/2022%20Board%20of%20Nursing%20Strategic%20Plan.pdf](https://www.bon.texas.gov/pdfs/publication_pdfs/2022%20Board%20of%20Nursing%20Strategic%20Plan.pdf)

This report is for information only. No action is required.

# AGENCY STRATEGIC PLAN

Fiscal Years 2023-2027

by

TEXAS BOARD OF NURSING

<u>Board Member</u>	<u>Dates of Term</u>	<u>Hometown</u>
Kathleen Shipp, MSN, APRN, FNP (President)	2011-2023	Lubbock
Allison Porter-Edwards, DrPH, MS, RN, CNE (Vice-President)	2015-2027	Bellaire
Daryl Chambers, BBA	2015-2027	Grand Prairie
Laura A. Disque, MSN, CGRN	2019-2025	Edinburg
Carol Kay Hawkins, BSN, RN	2019-2025	San Antonio
Mazie Mathews Jamison, BA, MA	2018-2023	Dallas
Kenneth D. "Ken" Johnson, RN	2021-2027	San Angelo
Kathy Leader-Horn, LVN	2009-2027	Granbury
David Edward Saucedo, II	2015-2027	El Paso
Melissa Schat, LVN	2019-2023	Granbury
Rickey "Rick" Williams	2019-2025	Killeen
Kimberly "Kim" Wright, LVN	2018-2023	Big Spring

June 1, 2022

Signed:



---

Katherine Thomas, MN, RN, FAAN  
Executive Director

Approved:



---

Kathleen Shipp, MSN, RN, FNP  
President

## Table of Contents

Agency Mission and Philosophy .....	3
Agency Goals and Action Plan .....	4
Redundancies and Impediments .....	13
Contract Manager Training.....	15
Schedule A. Budget Structure -- Goals, Objectives and Outcome Measures, Strategies and Output, Efficiency, and Explanatory Measures.....	17
Schedule B. Measure Definitions .....	20
Schedule C: Texas Board of Nursing Historically Underutilized Business Plan .....	36
Schedule D: Statewide Capital Plan (not applicable)	
Schedule E: Health and Human Services Strategic Plan (not applicable)	
Schedule F: Board of Nursing Fiscal Year 2019-2023 Workforce Plan .....	37
Schedule G: Report on Customer Service.....	43
Appendix A. Agency Information Technology Resource Planning .....	68

## **Agency Mission and Philosophy**

### **Agency Mission**

The mission of the Texas Board of Nursing is to protect and promote the welfare of the people of Texas by ensuring that each person holding a license as a nurse in the State of Texas is competent to practice safely. The Board fulfills its mission through the regulation of the practice of nursing and the approval of nursing education programs. This mission, derived from the Nursing Practice Act, supersedes the interest of any individual, the nursing profession, or any special interest group.

### **Agency Philosophy**

Acting in accordance with the highest standards of ethics, accountability, efficiency, effectiveness, and openness, the Board approaches its mission with a deep sense of purpose and responsibility and affirms that the regulation of nursing is a public and private trust. The Board assumes a proactive leadership role in regulating nursing practice and nursing education. The Board serves as a catalyst for developing partnerships and promoting collaboration in addressing regulatory issues. The public and nursing community alike can be assured of a balanced and responsible approach to regulation.

# Agency Goals and Action Plan

<b>BOARD OF NURSING OPERATIONAL GOAL AND ACTION PLAN</b>
<p><b>Goal A: Protection of the Public and Enforcement of the Nursing Practice Act</b> – The Board of Nursing is responsible for swift, fair, and effective enforcement of the Nursing Practice Act (NPA) so that consumers are protected from unsafe, incompetent and unethical nursing practice by nurses.</p>
<p><b>SPECIFIC ACTION ITEMS TO ACHIEVE YOUR GOAL</b></p>
<ol style="list-style-type: none"> <li>1. The Board administers a system of enforcement and adjudication and also identifies, refers, and assists those nurses whose practice is impaired. Currently, each of these action items is ongoing and being implemented.               <ol style="list-style-type: none"> <li>a. Adopt rules relating to unprofessional conduct and professional character consistent with recommendations from the Texas Sunset Advisory Commission (done).</li> <li>b. Establish a process for re-evaluation of students immediately prior to licensure (done).</li> <li>c. Adopt rules to establish guidelines for participation in the Board’s peer assistance program-based diagnosis and need by January 1, 2019 (done).</li> <li>d. Implement performance measures for evaluating the Texas Peer Assistance Program for Nurses by January 1, 2019 (done).</li> </ol> </li> <li>2. The Board initiates regulatory actions to address the opioid crisis.               <ol style="list-style-type: none"> <li>a. Adopt rules requiring licensees with prescriptive authority of controlled substances to utilize the statewide prescription drug monitoring program as set forth in statute by January 1, 2019 (done).</li> <li>b. Provide guidance to licensees regarding responsible prescribing of opioids, benzodiazepines, barbiturates, and carisoprodol by January 1, 2019 (done).</li> <li>c. Continue to collaborate with the Texas State Board of Pharmacy and other state agencies in relation to the Prescriptive Drug Monitoring Program.</li> </ol> </li> <li>3. The Board approves innovative alternative programs aimed to assess competency and remediate unsafe nursing practice.</li> <li>4. The Board implements process changes to achieve earlier resolution of complaints through increased use of the alternative dispute resolution process. This action is currently under way and ongoing.</li> <li>5. The Board will adopt rules related to nursing practice in telehealth settings by January 1, 2019 (done).</li> </ol>
<p><b>DESCRIBE HOW YOUR GOAL OR ACTION ITEMS SUPPORTS EACH STATEWIDE OBJECTIVE</b></p>
<p><b>1. Accountable to tax and fee payers of Texas.</b>            The Board demonstrates accountability to taxpayers responding to more than 16,975 complaints annually. BON staff members, in response to complaints, investigate reported violations of the NPA, Board Rules and Regulations, and other laws relating to the safe practice of nursing. Following investigation by Enforcement staff, disciplinary recommendation(s) are offered to nurses in the form of agreed orders. Orders disputed by nurses are brought before an administrative law judge (ALJ) for resolution and cases not resolved by ALJ go to District Court for resolution.</p> <p>Nurses determined to have impaired practice, either by substance use disorders or other mental illnesses, are referred to the Texas Peer Assistance Program for Nurses (TPAPN) for treatment and monitoring. Nurses refusing to participate in the TPAPN program are referred back to the Board for disciplinary action. Actions taken in response to refusal to participate in the TPAPN program may include suspension or revocation of nurse licensure depending on the specific facts of each case.</p>
<p><b>2. Efficient such that maximum results are produced with a minimum waste of taxpayer funds, including through the elimination of redundant and non-core functions.</b>            Efficiency and transparency in achieving this goal is brought about through a consistent response to violations of the NPA, BON Rules and Regulations, or other laws pertaining to the safe practice of nursing. The Board utilizes a disciplinary action matrix when determining disciplinary action in response to investigatory findings.</p>

Utilization of the matrix eliminates inconsistency and guesswork concerning action in response to a complaint or criminal conviction. "Rap Back", where the Board receives and responds to criminal conviction information on nurses from the Texas Department of Public Safety ensures that information pertaining to criminal conduct by nurses is received in a timely manner. A federal "Rap Back" process was implemented on 4/1/2018.

**3. Effective in successfully fulfilling core functions, measuring success in achieving performance measures, and implementing plans to continuously improve.**

The agency fulfills agency core functions and maintains quantifiable accountability to the public through the efficiency, explanatory, and output measures below:

**Efficiency Measures:**

- Average time for RN complaint resolution; and
- Average time for LVN complaint resolution.

**Explanatory Measures:**

- Number of jurisdictional RN complaints received; and
- Number of jurisdictional LVN complaints received.

**Output Measures:**

- Number of RN complaints resolved;
- Number of LVN complaints resolved;
- Number of RNs participating in a peer assistance program; and
- Number of LVNs participating in a peer assistance program.

**4. Attentive to providing excellent customer service.**

The BON is committed to excellent customer service through all aspects of the enforcement and adjudication process. Website resources include Imposter Alerts, Board Policies & Guidelines, Courses & Compliance Resources, a description of what happens when a complaint is filed, downloadable complaint reporting forms, and disciplinary action reports.

**5. Transparent such that agency actions can be understood by any Texan.**

The Board publishes a quarterly notice of disciplinary action included in the agency newsletter and posted on the BON website. Online verification of licensure includes notification of current disciplinary action against a nurse. Agreed order documents which include the findings of the Board and action taken in response to the findings are linked to the verification page. Formal charge documents are provided upon request. Complainants are provided with progress updates 90 days after complaints are received. Online resources are provided describing how the complaint process works. Reporting of disciplinary action statistics takes place at each quarterly board meeting.

**DESCRIBE ANY OTHER CONSIDERATIONS RELEVANT TO YOUR GOAL OR ACTION ITEM**

**Action Item 1:**

House Bill (HB) 2950, the Texas Board of Nursing Sunset Bill, enacted during the 2017 legislative session, amended the Nursing Practice Act as it relates to *Good Professional Character* and *Unprofessional Conduct*

Prior to the passage of HB 2950, the Board charged its Advisory Committee on Licensure, Eligibility and Discipline to review the Sunset Commission's recommendations and make recommendations for changes consistent with the Commission's direction. The Advisory Committee met on May 12, 2017; June 9, 2017; August 11, 2017; and September 15, 2017, to consider the Board's charge. As a result of the Advisory Committee's input and the requirements of HB 2950, the Board adopted changes to 22 Texas Administrative Code §213.27, relating to *Good Professional Character* and 22 Tex. Admin. Code §213.28, relating to *Licensure of Individuals*

*with Criminal History* in February 2018. The Board also amended the Board's Disciplinary Guidelines for Criminal Conduct.

Pursuant to the requirements of HB 2950 and the Board's new rules, the Board no longer takes disciplinary action on misdemeanor crimes relating to drugs and alcohol. For example, misdemeanor crimes, such as driving while intoxicated or possession of controlled substances will no longer result in eligibility or disciplinary orders. Further, crimes occurring off duty that are not clearly and rationally related to the practice of nursing will no longer result in eligibility or disciplinary orders. These types of misdemeanor crimes include disorderly conduct, criminal trespass, harassment, and assault. The Board retains authority, however, to consider felony crimes that could affect an individual's ability to safely practice nursing, as well as substance use disorders and alcohol and drug abuse that is not related to a specific criminal offense. From FY 2018 – FY 2021, the percentage of complaints resulting in discipline has decreased slightly. This decrease may be attributed to the Board's modified approach to review of criminal conduct subsequent to the Sunset Advisory Commission review.

Following passage of HB 375 during the 87<sup>th</sup> Legislative Session, the Board adopted amendments to its Guidelines for Criminal Conduct to include the amended Texas Penal Code §21.02, Continuous Sexual Abuse of Young Child or Children to include disabled individuals, as an offense specified in the enumerated list of crimes in the *Occupations Code* §301.4535 that mandates licensure revocation and denial.

The Board also adopted amendments to 22 Texas Administrative Code §213.33, relating to Factors Considered for Imposition of Penalties/Sanctions. HB 1434, enacted during the 87<sup>th</sup> Legislative Session, created a new disciplinary cause of action for practitioners who conduct pelvic examinations on unconscious or anesthetized patients without proper informed consent, where the procedure is not within the standard scope of a scheduled procedure or diagnostic examination, where the examination is not necessary for the diagnosis or treatment of the patient's medical condition, or where the examination is not for the purpose of collecting evidence. The new disciplinary cause of action is located in the *Occupations Code* §301.452(b)(13). Amendments to the Board's Disciplinary Matrix were necessary for consistency with this statutory change.

Individuals must have good professional character in order to obtain and retain licensure. HB 2950 and the Board's new rules define *good professional character* and specify the Board's burden in cases where an individual's good professional character is at issue.

Also pursuant to the requirements and recommendations of the Sunset Advisory Commission, the Texas Peer Assistance Program for Nurses (TPAPN) underwent an audit by the Citizen's Advocacy Center (CAC) in March 2018. The CAC report was completed in May 2018 and presented to the Board for review and consideration at its meeting in July 2018. TPAPN worked with the Board for several months to implement the recommendations of the CAC. TPAPN also consulted several substance abuse experts to inform decision making regarding the re-organization of TPAPN program tracts. The finalized program plan addresses treatment and monitoring requirements for mild, moderate, and severe substance use disorder diagnoses and is designed to better accommodate participants' individualized needs.

**Action Item 2:**

As one strategy to address the nation's opioid crisis, the Texas Prescription Monitoring Program (PMP) collects and monitors prescription data for all Schedule II, III, IV, and V controlled substances dispensed by a pharmacy in Texas or to a Texas resident from a pharmacy located in another state. The PMP also provides a venue for monitoring patient prescription histories for practitioners and the ordering of Schedule II Texas Official Prescription Forms. The PMP is managed by the Texas State Board of Pharmacy (TSBP).

The 86<sup>th</sup> Texas Legislature continued its efforts to combat the opioid crisis. HB 2174 established new requirements related to electronic prescribing of schedule II controlled substances as well as requirements for

waivers for electronic prescribing in certain situations. The Board participates in regular meetings of the PMP work group that is hosted by the Texas State Board of Pharmacy. The bill also limits prescriptions for controlled substances for the treatment of acute pain to a ten-day supply. Additionally, the bill requires newly licensed prescribers to complete two hours of continuing education related to approved procedures for prescribing and monitoring controlled substances. Board Rules have been amended for this purpose.

HB 2454 further addressed issues related to opioid prescribing by developing a requirement for health care providers who prescribe opioids to complete continuing education annually related to pain management and the prescribing of opioids. Continuing education courses must include content related to standard of care, identification of drug-seeking behavior in patients, and effective communication with patients regarding opioid medications. Board Rules have been amended for this purpose.

A third requirement for continuing education related to opioid prescribing was added by HB 3285. This bill requires annual continuing education related to best practices, alternative treatment options, and multimodal approaches to pain management. The requirements added by this bill were also included in the amendments to Board Rules.

HB 3284 delayed the implementation of the mandatory requirement for prescribers to check the PMP prior to issuing prescriptions for opioids, benzodiazepines, barbiturates, and carisoprodol (Soma) to March 1, 2020. The Board had rules in place for this requirement but delayed implementation of those rules until March 1, 2020 as provided for in HB 3284. Board Staff published an explanation of these continuing education requirements for licensees at: [https://www.bon.texas.gov/education\\_continuing\\_education.asp.html#E](https://www.bon.texas.gov/education_continuing_education.asp.html#E).

HB 278 amended requirements for physicians who delegate prescriptive authority to APRNs via a prescriptive authority agreement. The requirement for face-to-face quality assurance meetings was removed from Texas law. Under the provisions of HB 278, APRNs and their delegating physicians may conduct monthly quality assurance meetings in a manner that is acceptable to both parties. This aligned the requirements for delegation of prescriptive authority via a prescriptive authority agreement to APRNs with those already in effect for PAs. Board Rules were amended to implement the changes to Texas law.

**Action Item 3:**

In October 2013, the Board approved a two-year pilot program with the Texas A&M Rural and Community Health Institute (RCHI) and the College of Nursing (CON) to offer the Knowledge, Skills, Training, Assessment and Research Nursing (KSTAR) Pilot Program as an option to nurses with practice violations that result in a disciplinary sanction of a warning and below. KSTAR is a comprehensive program that utilizes an individualized assessment of a nurse with practice breakdown issues and designs a personalized remedial education plan aimed at correcting any knowledge deficits that may exist. Based on successful outcomes, the KSTAR Nursing was approved in 2017 as a permanent disciplinary option for nurses meeting eligibility criteria as set out in Board Rule 213.35. The concept of targeted assessment and individualized remediation of nursing practice errors has shown to be a promising alternative to conventional discipline.

Additionally, in 2019, the Board created a resource that may be utilized by nursing peer review committees for a comprehensive evaluation of nursing practice breakdown. Known as Nursing Peer Review Evaluation of Practice-breakdown or N-PREP, this resource was created with the overall intent to support an organization's nursing peer review processes. N-PREP's template is broad enough to provide both guidance and flexibility to the nursing peer review process so that all of the hundreds of nursing peer review committees throughout the state may successfully incorporate the resource into their own organizational structure. N-PREP is a means to support the committee's analysis of incidents to determine if the nurse's conduct is: required to be reported to the Board, constitutes a minor incident that is not required to be reported to the Board and may be remediated at the facility level, or does not constitute a deficit in practice.



During the COVID-19 disaster, Board Staff reviewed and approved proposals from remedial education providers to transition their courses to a virtual format. A total of 25 courses were approved to be offered virtually during the disaster. This innovation allowed nurses in need of practice remediation to avoid delays in completing disciplinary stipulations that has direct patient safety implications. The Board will continue to encourage and consider proposals for pilots aimed to provide individualized remediation.

**Action Item 4:**

The Board engaged the dispute resolution option at the State Office of Administrative Hearings in an effort to resolve eligibility and disciplinary cases in a more efficient manner. The Board continues to find SOAH’s mediation process to work well in meeting this goal. Because the Board is utilizing mediations to resolve more of its cases, it anticipates setting fewer cases for contested case hearings. Additionally, Board Staff has worked with SOAH to remove barriers to docketing cases in a more timely manner, and this has eased the Board’s backlog of disciplinary cases needing resolution through the hearing process. Staff is committed to exploring other options to encourage settlement of cases, including continuing its informal settlement conferences and meeting with individual parties when appropriate.

**Action Item 5:**

At the October 25-26, 2018, quarterly meeting, the Board adopted new 22 Texas Administrative Code §217.24 relating to telemedicine medical service prescriptions as required by Senate Bill 1107 that passed during the 85<sup>th</sup> Legislative Session. The new rule section became effective November 25, 2018. These rules are consistent with the rules adopted by the Texas Medical Board (22 Tex. Admin. Code §174.5). Of note, during the COVID-19 disaster period Board Rule 217.24(e)(1) was temporarily waived by the Governor to allow advanced practice registered nurses to issue prescriptions for controlled substances for treatment of chronic pain via telemedicine. Following expiration of the waiver in June 2020, the Board adopted and re-adopted emergency amendments to the section several times. In July 2021, the Board adopted permanent rule amendments due to the continuation of the pandemic that were effective November 25, 2021.

**BOARD OF NURSING OPERATIONAL GOAL AND ACTION PLAN**

**Goal B.** The Board of Nursing (BON or Board) manages cost-effective, efficient licensure processes that assure the public that licensed nurses in Texas are qualified to provide safe nursing practice.

**SPECIFIC ACTION ITEMS TO ACHIEVE YOUR GOAL**

1. Ensure Minimum Licensure Standards for Applicants for Nurse Licensure – The action items accomplished by the Board are achievement of timely, cost-effective nurse licensure application processing, as well as operation of a reliable, accurate, and efficient licensure/credentialing system for all qualified nurse applicants. Currently, each of these action items is ongoing and being implemented.
2. Leverage technology to increase licensure process efficiencies by 8/31/23.
3. Maintain active participation as a party state in the Enhanced Nurse Licensure Compact.

**DESCRIBE HOW YOUR GOAL OR ACTION ITEMS SUPPORTS EACH STATEWIDE OBJECTIVE**

**1. Accountable to tax and fee payers of Texas.**

The Board demonstrates accountability to nurse licensure fee payers by adjustment of fees when fee changes are warranted, including reductions in nurse licensure and renewal fees. The Board reduced both the endorsement and examination fees by \$25 on February 15, 2021, and February 14, 2022, respectively.

**2. Efficient such that maximum results are produced with a minimum waste of taxpayer funds, including through the elimination of redundant and non-core functions.**

Waste of taxpayer dollars is minimized through utilization of strategies such as agency adoption of paperless operations wherever feasible. Implementation of the Optimal Regulatory Board System (ORBS) process on June

15, 2020, has reduced paper in the licensing process by 90%. Additional paper reducing strategies will be implemented by 8/31/2023.

**3. Effective in successfully fulfilling core functions, measuring success in achieving performance measures, and implementing plans to continuously improve.**

Fulfilling of agency core functions is demonstrated through utilization and analysis of the measures listed above.

**4. Attentive to providing excellent customer service.**

The BON's commitment to customer service includes gathering, analysis and use of feedback from constituents served by the agency through internal and external surveys conducted on an annual basis. Board management reviews messages from ORBS and the webmaster to identify system issues that could affect the customer service experience.

**5. Transparent such that agency actions can be understood by any Texan.**

Transparency of licensure information for stakeholders is accomplished by the agency through the Board website, Customer Service Department telephone system, webmaster e-mails, social media, and regular mail. All licensure requirements, BON Rules and Regulations, and the Nursing Practice Act may be accessed through the agency website. The Board's Examination, and Licensure goals support state strategic planning objectives by fulfilling agency core functions and maintaining accountability to nurse fee payers through the efficiency and explanatory measures below:

**Efficiency Measures**

- Percentage of new individual registered nurse (RN) licenses issued within ten days;
- Percentage of individual RN licenses renewed within seven days;
- Percentage of new individual licensed vocational nurse (LVN) licenses issued within ten days; and
- Percentage of individual LVN licenses renewed within seven days.

**Explanatory Measures**

- Number of individual RNs licensed;
- Number of individual LVNs licensed;
- Number of new individual RN licenses issued;
- Number of individual RN licenses renewed;
- Number of new individual LVN licenses issued; and
- Number of individual LVN licenses renewed.

**DESCRIBE ANY OTHER CONSIDERATIONS RELEVANT TO YOUR GOAL OR ACTION ITEM**

**Action Item 1:**

Immediately following the Governor's disaster declaration on March 13, 2020, the Board implemented measures to ease the burden of licensure to increase the supply of nurses available to respond to the needs of Texans during the pandemic. In accordance with [Section 418.171 of Texas Government Code](#), any out-of-state nurse was authorized to practice in Texas for the purpose of rendering aid, provided the nurse held a current license in good standing in their home state. Therefore, any out-of-state nurse with a license in good standing was not required to hold a Texas license in order to practice nursing in a disaster relief effort operation setting. Additionally, Texas is a member state of the [Nurse Licensure Compact](#). As such, any LVN or RN holding an active compact license already held a privilege to practice in Texas. Several waivers were requested and approved during the disaster relating to licensure including:

- Waived reactivation fees and certain requirements for LVNs, RNs, and APRNs;
- Waived renewal requirements providing an extension to September 30, 2020;
- Extended graduate permits for up to 6 months; and
- Waived certification requirements for new APRN graduates.

**Action Items 2 & 3:**

House Bill (HB) 2950 was enacted by the 85<sup>th</sup> Texas Legislature and became effective September 1, 2017 that allowed the Texas Board of Nursing to enact the Enhanced Nurse Licensure Compact (eNLC), which currently includes 37 states and 2 states awaiting implementation. Texas was a member of the original Compact, which was enacted in 2000 and was codified as Texas Occupations Code Chapter 304. The newly enacted eNLC replaced the original Nurse License Compact. The eNLC allows RNs and LVNs to utilize one multi-state license issued by the home state to practice in other states belonging to the compact, without the necessity of obtaining or maintaining separate licenses in each compact state.

The eNLC is governed by an Interstate Commission of Nurse Licensure Compact Administrators (Commission) who meet regularly to conduct commission business.

The foundation of the compact ensures uniform licensure requirements (ULRs) for a nurse’s eligibility in obtaining a multi-state license. The ULRs include the following requirements for a multi-state license:

- graduated from an approved nursing program and passed the national licensing examination
- completed a criminal background check
- no felony convictions
- no current disciplinary action on the license
- not enrolled in an alternative to discipline program
- a US social security number
- international credentials evaluated by an authorized credential review agency and passing an English proficiency examination if the nursing program was not conducted in English (for internationally educated students)

To accomplish the transition from the prior compact to the eNLC, the Licensing staff had two main tasks:

- allowing licensees in the current compact states not joining the eNLC to apply for and receive a single state license; and,
- aligning current processes and licensing software to fully implement the ULRs

Licensing software and participation with NURSUS allows the Board to implement both objectives above. The Texas BON has initially experienced a reduction in the number of licensees by endorsement with the increase in the number of states joining the compact but it has not had a significant effect on the agency revenue. In fiscal year 2021 and currently, the number of licenses issued by endorsement have surpassed the pre-eNLC implementation and now exceed previous fiscal year numbers.

**BOARD OF NURSING OPERATIONAL GOAL AND ACTION PLAN**

**Goal C: Ensure that Nursing Educational Programs are in Compliance with Board Rules** – The BON ensures that 100% of Texas nursing education programs are in compliance with the Board’s Rules and Regulations.

**SPECIFIC ACTION ITEMS TO ACHIEVE YOUR GOAL**

1. The Board accredits all pre-licensure Texas nursing education programs which must include the essential competencies of graduates in the educational curricula and by ensuring that all Texas Nursing Education programs are meeting Board rules, including required NCLEX pass rates. Currently, each of these actions is ongoing and being implemented.
2. The Board will collaborate with the Texas Higher Education Coordinating Board to establish an approval process for proposals for establishment of baccalaureate nursing degree programs by public junior colleges (done).

**DESCRIBE HOW YOUR GOAL OR ACTION ITEMS SUPPORTS EACH STATEWIDE OBJECTIVE**

**1. Accountable to tax and fee payers of Texas.**

The BON demonstrates accountability for competency in nursing in Texas by ensuring that nursing educational programs meet the requirements set forward in the Differentiated Essential Competencies for Graduates of Nursing Education Programs in Texas. The agency establishes rules governing Texas nurse educational programs leading to licensure as LVNs and RNs, conducts survey visits to educational programs to ensure compliance, and presents survey findings to the Board for further action as warranted by survey visit findings.

**2. Efficient such that maximum results are produced with a minimum waste of taxpayer funds, including through the elimination of redundant and non-core functions.**

Waste of taxpayer dollars is minimized through added program requirements and/or board action, including program closure, for educational programs not meeting standards for passing the national examination for nurses known as the NCLEX examination.

**3. Effective in successfully fulfilling core functions, measuring success in achieving performance measures, and implementing plans to continuously improve.**

Effectiveness is demonstrated through Texas educational program pass rates for the NCLEX examination. Texas pass rates for programs leading to licensure as LVNs and RNs exceed the national standards for the NCLEX-RN and NCLEX-PN exam for 2021.

**4. Attentive to providing excellent customer service.**

The Board's commitment to customer service includes conducting orientations for new deans and directors of nursing educational programs, on-site and virtual visits to programs to offer guidance for program improvement, and communication of Board Policy/Rules/updates through attendance at events for nursing educators.

**5. Transparent such that agency actions can be understood by any Texan.**

Agency transparency concerning nursing educational programs is demonstrated through posting pass rate data, board reports concerning the status of educational programs, the website education page for individuals inquiring about approved Texas nursing education programs, regular meetings with school associations, and surveys conducted by Board staff. Accountability of the Board's Nursing Education goal is also demonstrated through the efficiency and explanatory measures below:

**Output Measures:**

- Number of LVN programs surveyed;
- Number of LVN programs sanctioned;
- Number of RN programs surveyed; and
- Number of RN programs sanctioned.

**DESCRIBE ANY OTHER CONSIDERATIONS RELEVANT TO YOUR GOAL OR ACTION ITEM**

**Action Item 1:**

Since 2006, the Board of Nursing has approved 92 new nursing education programs. Approximately 24% (22) of these programs have since closed due to an inability to achieve and/or maintain a licensing examination (NCLEX-RN or NCLEX-PN) pass rate at or above the required benchmark of 80% for first time test takers, an inability to comply with other rule requirements, or in one instance, a decision not to enroll following initial approval. While the overall NCLEX-RN and NCLEX-PN pass rate averages for all Texas programs are above the 80% benchmark and above the national averages, 12 of the programs approved since 2006 and still active currently have an NCLEX pass rate below the required 80% benchmark. These findings have led Board Staff to review and make improvements to the new program proposal requirements and process, to carefully assess information provided in Self-Study Reports and gathered during site visits, and to identify risk factors for

program success early on so that requirements and monitoring are implemented to address those risk factors. Additionally, NCLEX pass rates dropped slightly during 2020 and 2021, but remain above the national averages. The impact of the pandemic on program operations and clinical education availability was most likely a significant contributor to these decreases. Board staff have engaged with programs to ensure clinical rotations have resumed and that programs with an NCLEX pass rate below 80% have conducted self-studies to identify additional improvement measures to produce graduates ready for entry level, safe nursing practice. The NCLEX examination format will change in April of 2023 in that new items designed to ensure measurement of nursing clinical judgment along with evaluating the candidates' knowledge, skills, and abilities will be launched. As this "Next Generation NCLEX" evolves, Board Staff will continue to serve as a liaison between nursing education programs and the National Council of State Boards of Nursing (NCSBN) to ensure programs are fully informed in order to implement teaching strategies to best prepare graduates. Additionally, Board Staff will review the findings from the NCSBN Education Metrics and Outcomes Committee (currently in publication) that suggest evidence-based outcomes that may be considered for evaluating program quality.

**Action Item 2:**

SB 2118 that passed during the 85<sup>th</sup> Regular Texas Legislative Session authorizes the Texas Higher Education Coordinating Board (THECB) to approve certain public junior colleges to offer baccalaureate degrees in specified fields of study, including nursing. The bill requires that nursing baccalaureate program proposals meet all Board of Nursing requirements, regardless of whether the program is a pre or post licensure baccalaureate degree program. Board and THECB Staff have implemented a coordinated proposal application process that avoids duplication yet assures the required input of the Board's expertise specific to nursing education. The first public junior college approved to offer a baccalaureate degree was Austin Community College, who graduated its first cohort in August 2019. By the end of FY 2021, a total of 13 public junior colleges have been approved to offer baccalaureate degrees in nursing. Board Staff will monitor this closely and continue to work collaboratively with THECB to ensure a coordinated approval process.

## Redundancies and Impediments

Service, (Statute, Rule or Regulation Provide specific citation if possible)	Describe why the Service, Statute, Rule or Regulation is Resulting in Inefficient or Ineffective Agency Operations	Provide Agency Recommendation for Modification or Elimination	Describe the Estimated Cost Savings or Other Benefit Associated with Recommended Change
Texas Occupations Code §301.1581	<p>This section requires the biennial dissemination of information to nursing licensees on prescribing and dispensing pain medications, with particular emphasis on Schedule II and Schedule III controlled substances; abusive and addictive behavior of certain persons who use prescription pain medications; common diversion strategies employed by certain persons who use prescription pain medications, including fraudulent prescription patterns; and the appropriate use of pain medications and the differences between addiction, pseudo-addiction, tolerance, and physical dependence.</p> <p>This information could be provided by other sources that may be able to provide more accurate and tailored information, such as the Texas Pharmacy Board or the Texas Medical Board. Further, some of the required information may not be relevant to nurses (such as dispensing information).</p>	Elimination	

<p>Texas Occupations Code §301.1582</p>	<p>This section requires the dissemination to nursing licensees of information relating to the services provided by poison control centers. This information could be provided by other sources, such as poison control centers, and would likely be more accurate and tailored if provided by another source.</p>	<p>Elimination</p>	
<p>Texas Occupations Code §301.466/Texas Government Code Chapter 552</p>	<p>Requestors routinely seek documents from the Board's investigative file(s) and related materials, including complaints, under the Public Information Act. Although this information is confidential, the Board is still required to submit a request for an opinion from the Attorney General's Office when this information is requested through an open records request (no prior determination has been issued by the Attorney General's Office for this category of information).</p>	<p>Statutory exemption in Chapter 552 or §301.466 that makes clear that the Board does not have to seek an opinion from the Attorney General's Office when an open records request seeks documents from the Board's investigative file(s) or related material, including a copy of the complaint.</p>	<p>In 2021, the Board received 2,093 open records requests. The Board filed 46 requests for opinions with the Attorney General's Office. 39 of these 46 requests for opinions, or 85%, involved requests for Board investigatory material and/or complaints.</p>

## Contract Manager Training

The Comptroller of Public Accounts' Statewide Procurement Division (SPD) administers a training, continuing education, and certification program for Texas public procurement professionals. The term "public procurement professional" refers to any agency employee that conducts purchasing, contract development, or contract management activities.<sup>1</sup> Contract management is defined as: "actions taken following contract execution, including the assessment of risk, verification of contractor performance, monitoring compliance with deliverable and reporting requirements, enforcement of contract terms, monitoring and reporting of vendor performance, and ensuring that contract performance and practices are consistent with applicable rules, laws and the State of Texas Procurement and Contract Management Guide."<sup>2</sup> All public procurement professionals must receive training and continuing education to the extent required by SPD. An agency employee who is required to receive the training may not participate in purchases by the employing agency unless the employee has received the required training.

SPD offers certification for Certified Texas Contract Developers and Certified Texas Contract Managers. Certified Texas Contract Developers and Managers working in Texas state government must attend mandatory courses and pass an exam to become certified. SPD also provides continuing education required for public procurement professionals to maintain certification. A licensed attorney employed by an agency performing procurement or contract management functions, however, is not required to be certified as a Certified Texas Contract Developer or Certified Texas Contract Manager.<sup>3</sup>

The Board's contract management training requirements align with the training and certification required by §656.052 of the Texas Government Code, relating to Training and Certification for Contract Managers. An agency employee who is required to receive the training may not participate in purchases by the Board unless the employee has received the required training. The Board requires its contract manager(s) to attend the required training and have the requisite certification, if applicable. Further, the Board requires its public procurement professionals to stay informed of procurement laws, rules, policies, and procedures, including the Board's Contract Procurement and Management Handbook. Finally, throughout the life of each procurement, the Board's legal department reviews the most current version of the *State of Texas Procurement and Management Guide* and ensures that any updates to the law and procedures are outlined and followed.

---

<sup>1</sup> *State of Texas Procurement and Contract Management Guide* Version 2.0, page 3.

<sup>2</sup> *Id.*

<sup>3</sup> 34 Tex. Admin. Code § 20.133(c)(5).



**Supplemental Schedules**

**Schedules A-I**

## **Schedule A. Budget Structure -- Goals, Objectives and Outcome Measures, Strategies and Output, Efficiency and Explanatory Measures**

The Board of Nursing, in conjunction with the Legislative Budget Board and the Governor's Office of Budget and Planning, has identified the following goals for the 2022/2023 biennium. This section is organized with the objectives, strategies, and outcome, output, efficiency, and effectiveness measures aligned with each goal.

**Goal A: Licensing - To manage cost-effective, quality programs of accreditation, examination, licensure and regulation that ensure legal standards for nursing education and practice, and which effectively serve the market demand for qualified nurses.**

**Objective A.1: Ensure Minimum Licensure Standards for Applicants - To ensure timely and cost-effective application processing and licensure/Credentialing systems for 100 percent of all qualified applicants for each fiscal year.**

**Strategy A.1.1: Licensing - Operate Efficient System of Nursing Credential Verification.**

### **Efficiency Measures:**

- Percentage of New Individual Licenses Issued within Ten Days (RN)**
- Percentage of Individual Licenses Renewed within Seven Days (RN)**
- Percentage of New Individual Licenses Issued within Ten Days (LVN)**
- Percentage of Individual Licenses Renewed within Seven Days (LVN).**

### **Explanatory Measures:**

- Total Number of Individuals Licensed (RN)**
- Total Number of Individuals Licensed (LVN)**

### **Outcomes:**

- Percentage of Licensees with No Recent Violations (RN)**
- Percent of Licensees Who Renew Online (RN)**
- Percent of New Individual Licenses Issued Online (RN)**
- Percentage of Licensees with No Recent Violations (LVN)**
- Percent of Licensees Who Renew Online (LVN)**
- Percent of New Individual Licenses Issued Online (LVN)**
- Percentage of Licensees with No Recent Violations (APRN)**
- Percent of Licensees Who Renew Online (APRN)**
- Percent of New Individual Licenses Issued Online (APRN)**

### **Output Measures:**

- Number of New Licenses Issued to Individuals (RN)**
- Number of Individual Licenses Renewed (RN)**
- Number of New Licenses Issued to Individuals (LVN)**
- Number of Individual Licenses Renewed (LVN)**
- Number of New Licenses Issued to Individuals (APRN)**
- Number of Individual Licenses Renewed (APRN)**

*NOTE: On June 15, 2020, the Texas Board of Nursing launched the ORBS (Optimal Regulatory Board System) platform creating a 100% paperless licensing system for our stakeholders. The new system requires a valid email address for all users and allows our*

customers to renew seamlessly and upload documents if required. This efficiency allows licensees to renew quicker and students to schedule the NCLEX sooner.

**Objective A.2: Ensure Nursing Education Programs are in Compliance with the Rules - To ensure that 100 percent of nursing programs are in compliance with the Board of Nursing's rules.**

**Strategy A.2.1: Accreditation - Accredite programs that include Essential Competencies Curricula.**

**Efficiency Measure:**

**Average Cost of Program Survey Visit (RN and LVN)**

**Explanatory Measures:**

**Total Number of Programs Approved (RN)**

**Total Number of Programs Approved (LVN)**

**Outcome Measures:**

**Percentage of Nursing Programs in Compliance with Rules (RN)**

**Percentage of Nursing Programs in Compliance with Rules (LVN)**

**Output Measures:**

**Total Number of Programs Surveyed (LVN)**

**Total Number of Programs Sanctioned (LVN)**

**Total Number of Programs Surveyed (RN)**

**Total Number of Programs Sanctioned (RN)**

**Goal B: Protect Public - To ensure swift, fair and effective enforcement of the Nursing Practice Act (NPA) so that consumers are protected from unsafe, incompetent and unethical nursing practice by nurses.**

**Objective B.1: Protect Public and Enforce Nursing Practice Act – Adjudicate Violations - Investigate and resolve complaints about violations of the Nursing Practice Act.**

**Strategy B.1.1: Adjudicate Violations - Administer system of enforcement and adjudication.**

**Efficiency Measures:**

**Average Time for Complaint Resolution (Days) (RN)**

**Average Time for Complaint Resolution (Days) (LVN)**

**Average Time for Complaint Resolution (Days) (APRN)**

**Explanatory Measures:**

**Number of Jurisdictional Complaints Received (RN)**

**Number of Jurisdictional Complaints Received (LVN)**

**Number of Jurisdictional Complaints Received (APRN)**

**Outcome Measures:**

**Percent of Complaints Resolved Resulting in Discipline (RN)**

**Percent of Complaints Resolved Resulting in Discipline (LVN)**

**Percent of Complaints Resolved Resulting in Discipline (APRN)**

**Percent of Complaints Resolved in Six Months (RN)**

**Percent of Complaints Resolved in Six Months (LVN)**

**Output Measures:**

**Number of Complaints Resolved (RN)**

**Number of Complaints Resolved (LVN)**

**Number of Complaints Resolved (APRN)**

**Strategy B.1.2: Peer Assistance - Identify, refer and assist those nurses whose practice is impaired.**

**Outcome Measures:**

**Recidivism Rate for RNs Enrolled in TPAPN**

**Recidivism Rate for LVNs Enrolled in TPAPN**

**Output Measures:**

**Number of Individuals Licensed Participating in a Peer Assistance Program (RN)**

**Number of Individuals Licensed Participating in a Peer Assistance Program (LVN)**

**Number of Individuals Licensed Participating in a Peer Assistance Program (APRN)**

## Schedule B. Measure Definitions

**Goal No. 1**      **Accredit, Examine, and License Nurse Education and Practice**  
**Objective No. 1**    **Ensure Minimum Licensure Standards for Applicants**  
**Outcome No. 1**    **Percentage of Licensees with No Recent Violations (RN)**

### Definition

The percent of the total number of licensed registered nurses at the end of the reporting period who have not incurred a violation within the current and preceding two years (three years total).

### Data Limitations

With regard to the total number of registered nurses currently licensed, the agency has limited control over the number of persons who wish to obtain and renew their license.

### Data Source

Agency software program captures the number of total licensed Registered Nurses and the number of Disciplined Registered Nurses. Our Information Systems Department compiles the statistics by which the Operations Director compiles the final percentage and reports the information on a quarterly basis to the Board and the appropriate State oversight agencies. The Operations Director is responsible for this data.

### Methodology

The total number of registered nurses currently licensed by the agency who have not incurred a violation within the current and preceding two years divided by the total number of individuals currently licensed by the agency. The numerator for this measure is calculated by subtracting the total number of licensees with violations during the three-year period from the total number of licensees at the end of the reporting period. The denominator is the total number of licensees at the end of the reporting period. The measure is calculated by dividing the numerator by the denominator and multiplying by 100 to achieve a percentage.

### Purpose

Licensing registered nurses helps ensure that practitioners meet minimum legal standards for professional education and practice which is a primary agency goal. This measure is important because it indicated how effectively the agency's activities deter violations of professional standards established by statute and rule.

### Definition

The percent of the total number of licensed registered nurses at the end of the reporting period who have not incurred a violation within the current and preceding two years (three years total).

### Data Limitations

With regard to the total number of registered nurses currently licensed, the agency has limited control over the number of persons who wish to obtain and renew their license.

### Data Source

Agency software program captures the number of total licensed Registered Nurses and the number of Disciplined Registered Nurses. Our Information Systems Department compiles the statistics by which the Operations Director compiles the final percentage and reports the information on a quarterly basis to the Board and the appropriate State oversight agencies. The Operations Director is responsible for this data.

### Methodology

The total number of registered nurses currently licensed by the agency who have not incurred a violation within the current and preceding two years divided by the total number of individuals currently licensed by the agency. The numerator for this measure is calculated by subtracting the total number of licensees with violations during the three-year period from the total number of licensees at the end of the reporting period. The denominator is the total number of licensees at the end of the reporting period. The measure is calculated by dividing the numerator by the denominator and multiplying by 100 to achieve a percentage.

### Purpose

Licensing registered nurses helps ensure that practitioners meet minimum legal standards for professional education and practice which is a primary agency goal. This measure is important because it indicated how effectively the agency's activities deter violations of professional standards established by statute and rule.

**Goal No. 1**      **Accredit, Examine, and License Nurse Education and Practice**  
**Objective No. 1**    **Ensure Minimum Licensure Standards for Applicants**  
**Outcome No. 2**    **Percent of Licensees Who Renew Online (RN)**

**Definition**

The percentage of the total number of RN license applications processed online via the Texas.gov service for any one monthly cohort of license renewals as compared to those processed by paper within the office.

**Data Limitations**

None

**Data Source**

The agency renews RN licenses on a monthly basis. Each month, the agency mails license renewal postcards sixty days prior to their license expiring. Each monthly cohort has sixty days to renew their license. The agency licensing software tracks both types of renewals by calculating the total number of online renewals as to the total possible number of renewals for each monthly cohort.

**Methodology**

On the first day following the last day of each month, the agency licensing software calculates the total number of licensees who renewed online as compared to the total number of possible renewals for that month's license renewal cohort.

**Purpose**

This measures the ability of the agency to expedite online renewal applications and be responsive to a primary constituent group.

**Definition**

The percentage of the total number of RN license applications processed online via the Texas.gov service for any one monthly cohort of license renewals as compared to those processed by paper within the office.

**Data Limitations**

None

**Data Source**

The agency renews RN licenses on a monthly basis. Each month, the agency mails license renewal postcards sixty days prior to their license expiring. Each monthly cohort has sixty days to renew their license. The agency licensing software tracks both types of renewals by calculating the total number of online renewals as to the total possible number of renewals for each monthly cohort.

**Methodology**

On the first day following the last day of each month, the agency licensing software calculates the total number of licensees who renewed online as compared to the total number of possible renewals for that month's license renewal cohort.

**Purpose**

This measures the ability of the agency to expedite online renewal applications and be responsive to a primary constituent group.

<b>Goal No.</b>	<b>1</b>	<b>Accredit, Examine, and License Nurse Education and Practice</b>
<b>Objective No.</b>	<b>1</b>	<b>Ensure Minimum Licensure Standards for Applicants</b>
<b>Outcome No.</b>	<b>3</b>	<b>Percent of New Individual Licenses Issued Online (RN)</b>

**Definition**

The number of RN licenses issued to previously unlicensed RNs during the reporting period.

**Data Limitations**

The agency has limited control over the number of students who take the NCLEX-RN exam through Texas or request to endorse into our state. The measure is explanatory and provides a workload measure.

**Data Source**

Agency licensing software program captures the number of new RN licenses issued by examination and endorsement. The Operations Director adds both numbers to identify the total number of new RN licenses. The Operations Director is responsible for this data.

**Methodology**

This measure counts the total number of RN licenses issued to previously unlicensed RNs during the reporting period, regardless of when the application was originally received. Those RNs who had a license in the previous reporting period are not counted. Only new RN licenses by endorsement and examination are counted.

**Purpose**

A successful licensing structure must ensure that legal standards for nursing education and practice are met prior to licensure. This measure is a primary workload indicator which is intended to show the number of unlicensed RNs who were documented to have successfully met all licensure criteria established by statute and rule as verified by the agency during the reporting period.

**Definition**

The number of RN licenses issued to previously unlicensed RNs during the reporting period.

**Data Limitations**

The agency has limited control over the number of students who take the NCLEX-RN exam through Texas or request to endorse into our state. The measure is explanatory and provides a workload measure.

**Data Source**

Agency licensing software program captures the number of new RN licenses issued by examination and endorsement. The Operations Director adds both numbers to identify the total number of new RN licenses. The Operations Director is responsible for this data.

**Methodology**

This measure counts the total number of RN licenses issued to previously unlicensed RNs during the reporting period, regardless of when the application was originally received. Those RNs who had a license in the previous reporting period are not counted. Only new RN licenses by endorsement and examination are counted.

**Purpose**

A successful licensing structure must ensure that legal standards for nursing education and practice are met prior to licensure. This measure is a primary workload indicator which is intended to show the number of unlicensed RNs who were documented to have successfully met all licensure criteria established by statute and rule as verified by the agency during the reporting period.

**Goal No. 1      Accredit, Examine, and License Nurse Education and Practice**  
**Objective No. 1    Ensure Minimum Licensure Standards for Applicants**  
**Outcome No. 4     Percent of Licensees with No Recent Violations (LVN)**

**Definition**

The percent of the total number of licensed vocational nurses at the end of the reporting period who have not incurred a violation within the current and preceding two years (three years total).

**Data Limitations**

With regard to the total number of vocational nurses currently licensed, the agency has limited control over the number of persons who wish to obtain and renew their license.

**Data Source**

Agency software program captures the number of total licensed vocational nurses and the number of Disciplined licensed vocational nurses. Our Information Systems Department compiles the statistics by which the Operations Director compiles the final percentage and reports the information on a quarterly basis to the Board and the appropriate State oversight agencies. The Operations Director is responsible for this data.

**Methodology**

The total number of vocational nurses currently licensed by the agency who have not incurred a violation within the current and preceding two years divided by the total number of individuals currently licensed by the agency. The numerator for this measure is calculated by subtracting the total number of licensees with violations during the three-year period from the total number of licensees at the end of the reporting period. The denominator is the total number of licensees at the end of the reporting period. The measure is calculated by dividing the numerator by the denominator and multiplying by 100 to achieve a percentage.

**Purpose**

Licensing vocational nurses helps ensure that practitioners meet minimum legal standards for vocational education and practice which is a primary agency goal. This measure is important because it indicated how effectively the agency's activities deter violations of nursing standards established by statute and rule.

**Definition**

The percent of the total number of licensed vocational nurses at the end of the reporting period who have not incurred a violation within the current and preceding two years (three years total).

**Data Limitations**

With regard to the total number of vocational nurses currently licensed, the agency has limited control over the number of persons who wish to obtain and renew their license.

**Data Source**

Agency software program captures the number of total licensed vocational nurses and the number of Disciplined licensed vocational nurses. Our Information Systems Department compiles the statistics by which the Operations Director compiles the final percentage and reports the information on a quarterly basis to the Board and the appropriate State oversight agencies. The Operations Director is responsible for this data.

**Methodology**

The total number of vocational nurses currently licensed by the agency who have not incurred a violation within the current and preceding two years divided by the total number of individuals currently licensed by the agency. The numerator for this measure is

calculated by subtracting the total number of licensees with violations during the three-year period from the total number of licensees at the end of the reporting period. The denominator is the total number of licensees at the end of the reporting period. The measure is calculated by dividing the numerator by the denominator and multiplying by 100 to achieve a percentage.

**Purpose**

Licensing vocational nurses helps ensure that practitioners meet minimum legal standards for vocational education and practice which is a primary agency goal. This measure is important because it indicated how effectively the agency's activities deter violations of nursing standards established by statute and rule.

**Goal No. 1     Accredit, Examine, and License Nurse Education and Practice**  
**Objective No. 1    Ensure Minimum Licensure Standards for Applicants**  
**Outcome No. 5     Percent of Licensees Who Renew Online (LVN)**

**Definition**

The percentage of new LVN licenses, registrations, or certifications issued online to LVNs during the reporting period.

**Data Limitations**

The agency has moved to "semi-mandatory" online renewal but cannot require complete compliance due to the lack of access to computer technology.

**Data Source**

Agency licensing software program captures the number of LVN licenses renewed online versus the number of LVN licenses renewed by paper.

**Methodology**

Total number of individual LVN licenses, registrations, or certifications renewed online divided by the total number of individual LVN licenses, registrations, or certifications renewed during the reporting period. The result should be multiplied by 100 to achieve a percentage.

**Purpose**

To track use of online license issuance technology by the licensee population.

**Definition**

The percentage of new LVN licenses, registrations, or certifications issued online to LVNs during the reporting period.

**BL 2023 Data Limitations**

The agency has moved to "semi-mandatory" online renewal but cannot require complete compliance due to the lack of access to computer technology.

**BL 2023 Data Source**

Agency licensing software program captures the number of LVN licenses renewed online versus the number of LVN licenses renewed by paper.

**BL 2023 Methodology**

Total number of individual LVN licenses, registrations, or certifications renewed online divided by the total number of individual LVN licenses, registrations, or certifications renewed during the reporting period. The result should be multiplied by 100 to achieve a percentage.

**BL 2023 Purpose**

To track use of online license issuance technology by the licensee population.

**Goal No. 1     Accredit, Examine, and License Nurse Education and Practice**  
**Objective No. 1    Ensure Minimum Licensure Standards for Applicants**  
**Outcome No. 6     Percent of New Individual Licenses Issued Online (LVN)**

**Definition**

The number of LVN licenses issued by examination and endorsement to previously unlicensed LVNs during the reporting period.

**Data Limitations**

The agency has limited control over the number of LVN students who take the examination through Texas or request to endorse into our state. This measure is explanatory and provides a workload measure.



**Data Source**

Agency licensing software program captures the number of new LVN licenses issued by examination and endorsement. The Operations Director adds both numbers to identify the total number of new LVN licensees. The Operations Director is responsible for this data.

**Methodology**

This measure counts the total number of LVN licenses issued to previously unlicensed LVNs during the reporting period, regardless of when the application was originally received. Those individuals who had a LVN license in the previous reporting period are not counted. Only new LVN licenses issued by endorsement and examination are counted.

**Purpose**

A successful licensing structure must ensure that legal standards for education and practice are met prior to licensure. This measure is a primary workload indicator which is intended to show the number of unlicensed persons who were documented to have successfully met all licensure criteria established by statute and rule as verified by the agency during the reporting period.

**Definition**

The number of LVN licenses issued by examination and endorsement to previously unlicensed LVNs during the reporting period.

**Data Limitations**

The agency has limited control over the number of LVN students who take the examination through Texas or request to endorse into our state. This measure is explanatory and provides a workload measure.

**Data Source**

Agency licensing software program captures the number of new LVN licenses issued by examination and endorsement. The Operations Director adds both numbers to identify the total number of new LVN licensees. The Operations Director is responsible for this data.

**Methodology**

This measure counts the total number of LVN licenses issued to previously unlicensed LVNs during the reporting period, regardless of when the application was originally received. Those individuals who had a LVN license in the previous reporting period are not counted. Only new LVN licenses issued by endorsement and examination are counted.

**Purpose**

A successful licensing structure must ensure that legal standards for education and practice are met prior to licensure. This measure is a primary workload indicator which is intended to show the number of unlicensed persons who were documented to have successfully met all licensure criteria established by statute and rule as verified by the agency during the reporting period.

<b>Goal No. 1</b>	<b>Accredit, Examine, and License Nurse Education and Practice</b>
<b>Objective No. 1</b>	<b>Ensure Minimum Licensure Standards for Applicants</b>
<b>Outcome No. 7</b>	<b>Percentage of Licensees with No Recent Violations (APRN)</b>

**Definition**

The percent of the total number of licensed advanced practice registered nurses (APRN) at the end of the reporting period who have not incurred a violation within the current and preceding two years (three years total).

**Data Limitations**

With regard to the total number of advanced practice registered nurses currently licensed, the agency has limited control over the number of persons who wish to obtain and renew their license.

**Data Source**

Agency software program captures the number of total licensed advanced practice registered nurses and the number of disciplined advanced practice registered nurses. Our Information Systems Department compiles the statistics by which the Operations Director compiles the final percentage and reports the information on a quarterly basis to the Board and the appropriate State oversight agencies. The Operations Director is responsible for this data.

**Methodology**

The total number of advanced practice registered nurses currently licensed by the agency who have not incurred a violation within the current and preceding two years divided by the total number of individuals currently licensed by the agency. The numerator for this measure is calculated by subtracting the total number of licensees with violations during the three-year period from the total number of licensees at the end of the reporting period. The denominator is the total number of licensees at the end of the reporting period. The measure is calculated by dividing the numerator by the denominator and multiplying by 100 to achieve a percentage.

**Purpose**

Licensing advanced practice registered nurses helps ensure that practitioners meet minimum legal standards for professional education and practice which is a primary agency goal. This measure is important because it indicates how effectively the agency's activities deter violations of professional standards established by statute and rule.

**Definition**

The percent of the total number of licensed advanced practice registered nurses (APRN) at the end of the reporting period who have not incurred a violation within the current and preceding two years (three years total).

**Data Limitations**

With regard to the total number of advanced practice registered nurses currently licensed, the agency has limited control over the number of persons who wish to obtain and renew their license.

**Data Source**

Agency software program captures the number of total licensed advanced practice registered nurses and the number of disciplined advanced practice registered nurses. Our Information Systems Department compiles the statistics by which the Operations Director compiles the final percentage and reports the information on a quarterly basis to the Board and the appropriate State oversight agencies. The Operations Director is responsible for this data.

**Methodology**

The total number of advanced practice registered nurses currently licensed by the agency who have not incurred a violation within the current and preceding two years divided by the total number of individuals currently licensed by the agency. The numerator for this measure is calculated by subtracting the total number of licensees with violations during the three-year period from the total number of licensees at the end of the reporting period. The denominator is the total number of licensees at the end of the reporting period. The measure is calculated by dividing the numerator by the denominator and multiplying by 100 to achieve a percentage.

**Purpose**

Licensing advanced practice registered nurses helps ensure that practitioners meet minimum legal standards for professional education and practice which is a primary agency goal. This measure is important because it indicates how effectively the agency's activities deter violations of professional standards established by statute and rule.

**Goal No. 1      Accredit, Examine, and License Nurse Education and Practice**  
**Objective No. 1    Ensure Minimum Licensure Standards for Applicants**  
**Outcome No. 8     Percent of Licensees Who Renew Online (APRN)**

**Definition**

The percentage of the total number of APRN license applications processed online via the Texas.gov service for any one monthly cohort of license renewals as compared to those processed by paper within the office.

**Data Limitations**

None

**Data Source**

The agency renews APRN licenses on a monthly basis. Each month, the agency mails license renewal postcards sixty days prior to their license expiring. Each monthly cohort has sixty days to renew their license. The agency licensing software tracks both types of renewals by calculating the total number of online renewals as to the total possible number of renewals for each monthly cohort.

**Methodology**

On the first day following the last day of each month, the agency licensing software calculates the total number of licensees who renewed online as compared to the total number of possible renewals for that month license renewal cohort.

**Purpose**

This measures the ability of the agency to expedite online renewal applications and be responsive to a primary constituent group.

**Definition**

The percentage of the total number of APRN license applications processed online via the Texas.gov service for any one monthly cohort of license renewals as compared to those processed by paper within the office.

**Data Limitations**

None

**Data Source**

The agency renews APRN licenses on a monthly basis. Each month, the agency mails license renewal postcards sixty days prior to their license expiring. Each monthly cohort has sixty days to renew their license. The agency licensing software tracks both types of renewals by calculating the total number of online renewals as to the total possible number of renewals for each monthly cohort.

**Methodology**

On the first day following the last day of each month, the agency licensing software calculates the total number of licensees who renewed online as compared to the total number of possible renewals for that month license renewal cohort.

**Purpose**

This measures the ability of the agency to expedite online renewal applications and be responsive to a primary constituent group.

**Goal No. 1     Accredit, Examine, and License Nurse Education and Practice**  
**Objective No. 1    Ensure Minimum Licensure Standards for Applicants**  
**Outcome No. 9     Percent Of New Individual Licenses Issues Online (APRN)**

**Definition**

The number of APRN licenses issued online to previously unlicensed APRNs during the reporting period.

**Data Limitations**

The agency has limited control over the number of APRN students who graduate and pass an APRN national certifying exam or request to endorse into our Texas. The measure is explanatory and provides a workload measure.

**Data Source**

Agency licensing software program captures the number of new APRN licenses issued online after graduation and national certification and endorsement. The Operations Director adds both numbers to identify the total number of new APRN licenses. The Operations Director is responsible for this data.

**Methodology**

This measure counts the total number of APRN licenses issued online to previously unlicensed APRNs during the reporting period, regardless of when the application was originally received. Those APRNs who had a license in the previous reporting period are not counted.

**Purpose**

A successful licensing structure must ensure that legal standards for nursing education and practice are met prior to licensure. This measure is a primary workload indicator which is intended to show the number of unlicensed APRNs who were documented to have successfully met all licensure criteria established by statute and rule as verified by the agency during the reporting period.

**Definition**

The number of APRN licenses issued online to previously unlicensed APRNs during the reporting period.

**Data Limitations**

The agency has limited control over the number of APRN students who graduate and pass an APRN national certifying exam or request to endorse into our Texas. The measure is explanatory and provides a workload measure.

**Data Source**

Agency licensing software program captures the number of new APRN licenses issued online after graduation and national certification and endorsement. The Operations Director adds both numbers to identify the total number of new APRN licenses. The Operations Director is responsible for this data.

**Methodology**

This measure counts the total number of APRN licenses issued online to previously unlicensed APRNs during the reporting period, regardless of when the application was originally received. Those APRNs who had a license in the previous reporting period are not counted.

**Purpose**

A successful licensing structure must ensure that legal standards for nursing education and practice are met prior to licensure. This measure is a primary workload indicator which is intended to show the number of unlicensed APRNs who were documented to have successfully met all licensure criteria established by statute and rule as verified by the agency during the reporting period.

**Goal No. 1     Accredit, Examine, and License Nurse Education and Practice**  
**Objective No. 2    Ensure Nursing Programs Are in Compliance with the Rules**  
**Outcome No. 1     Percent of Professional Nursing Programs in Compliance**

**Definition**

The total number of RN programs or schools approved by the Board of Nursing at the end of the reporting period.

**Data Limitations**

This information is explanatory and a workload issue. The Board has limited control over program compliance.

**Data Source**

The pass rate of each program is received from the National Council of State Boards of Nursing. Other information on the programs come from school survey visits. The Director of Nursing is responsible for this data.

**Methodology**

The total number of RN programs with full approval by the Board divided by the total number of RN programs.

**Purpose**

The measure shows the number of RN programs and/or schools that has achieved an 80% pass rate on the licensure examination which is an indicator of overall program performance.

**Definition**

The total number of RN programs or schools approved by the Board of Nursing at the end of the reporting period.

**Data Limitations**

This information is explanatory and a workload issue. The Board has limited control over program compliance.

**Data Source**

The pass rate of each program is received from the National Council of State Boards of Nursing. Other information on the programs come from school survey visits. The Director of Nursing is responsible for this data.

**Methodology**

The total number of RN programs with full approval by the Board divided by the total number of RN programs.

**Purpose**

The measure shows the number of RN programs and/or schools that has achieved an 80% pass rate on the licensure examination which is an indicator of overall program performance.

**Goal No. 1      Accredit, Examine, and License Nurse Education and Practice**  
**Objective No. 2    Ensure Nursing Programs Are in Compliance with the Rules**  
**Outcome No. 2     Percent of LVN Programs in Compliance**

**Definition**

The number of LVN programs that meet Board requirements and have been granted full approval by the Board.

**Data Limitations**

Integrity of outside information.

**BL 2022 Data Source**

The data is derived from the National Council State Board of Nursing quarterly reports, Board staff program surveys/inspections, program annual reports and meeting minutes.

**Methodology**

The total number of programs that meet the Board requirements, divided by the total number of LVN programs. The information is compiled on a quarterly basis by the Education Division.

**Purpose**

The measure shows the number of schools that achieve an 80% pass rate on the licensure examination for the year.

**Definition**

The number of LVN programs that meet Board requirements and have been granted full approval by the Board.

**Data Limitations**

Integrity of outside information.

**Data Source**

The data is derived from the National Council State Board of Nursing quarterly reports, Board staff program surveys/inspections, program annual reports and meeting minutes.

**Methodology**

The total number of programs that meet the Board requirements, divided by the total number of LVN programs. The information is compiled on a quarterly basis by the Education Division.

**Purpose**

The measure shows the number of schools that achieve an 80% pass rate on the licensure examination for the year.

**Goal No. 2      Protect Public and Enforce Nursing Practice Act**  
**Objective No. 1    Investigate and Resolve Complaints about Violations of the Act**  
**Outcome No. 1     Percent of Complaints Resulting in Disciplinary Action (RN)**

**Definition**

Percent of complaints against registered nurses which were resolved during the reporting period that resulted in disciplinary action.

**Data Limitations**

This is explanatory and a workload issue. The agency has limited control over this measure.

**Data Source**

The disciplinary data is entered into the agency's discipline software module. The agency licensing software then calculates the number of disciplinary actions against registered nurses entered into the system during the reporting period. The Director of Enforcement is responsible for this data.

**Methodology**

The total number of RN complaints resolved during the reporting period that resulted in disciplinary action (numerator) is divided by the total number of RN complaints resolved during the reporting period (denominator). The result should be multiplied by 100 to achieve a percentage. Disciplinary action includes agreed orders, reprimands, warnings, suspensions, probation, revocation, restitution, and/or fines on which the board/commission has acted.

**Purpose**

The measure is intended to show the extent to which the agency exercises its disciplinary authority in proportion to the number of RN complaints received. It is important that both the public and licensees have an expectation that the agency will work to ensure fair and effective enforcement of the act and this measure seeks to indicate agency responsiveness to this expectation.

**Definition**

Percent of complaints against registered nurses which were resolved during the reporting period that resulted in disciplinary action.

**Data Limitations**

This is explanatory and a workload issue. The agency has limited control over this measure.

**Data Source**

The disciplinary data is entered into the agency's discipline software module. The agency licensing software then calculates the number of disciplinary actions against registered nurses entered into the system during the reporting period. The Director of Enforcement is responsible for this data.

**Methodology**

The total number of RN complaints resolved during the reporting period that resulted in disciplinary action (numerator) is divided by the total number of RN complaints resolved during the reporting period (denominator). The result should be multiplied by 100 to achieve a percentage. Disciplinary action includes agreed orders, reprimands, warnings, suspensions, probation, revocation, restitution, and/or fines on which the board/commission has acted.

**Purpose**

The measure is intended to show the extent to which the agency exercises its disciplinary authority in proportion to the number of RN complaints received. It is important that both the public and licensees have an expectation that the agency will work to ensure fair and effective enforcement of the act and this measure seeks to indicate agency responsiveness to this expectation.

**Goal No. 2 Protect Public and Enforce Nursing Practice Act**  
**Objective No. 1 Investigate and Resolve Complaints about Violations of the Act**  
**Outcome No. 2 Recidivism Rate for Those Receiving Disciplinary Action (RN)**

**Definition**

The number of repeat RN offenders at the end of the reporting period as a percentage of all offenders during the most recent three-year period.

**Data Limitations**

This is explanatory and a workload issue. The board has limited control over this measure.

**Data Source**

The agency licensing software captures those registered nurses with two or more violations. The Director of Enforcement is responsible for this data.

**Methodology**

The number of individuals against whom two or more disciplinary actions were taken by the board or commission within the current and preceding two fiscal years is divided by the total number of individuals receiving disciplinary actions within the current and preceding two fiscal years. The result should be multiplied by 100 to achieve a percentage.

**Purpose**

The measure is intended to show how effectively the agency enforces its regulatory requirements and prohibitions. It is important that the agency enforce its act and rules strictly enough to ensure consumers are protected from unsafe, incompetent and unethical practice by registered nurses.

**Definition**

The number of repeat RN offenders at the end of the reporting period as a percentage of all offenders during the most recent three-year period.

**Data Limitations**

This is explanatory and a workload issue. The board has limited control over this measure.

**Data Source**

The agency licensing software captures those registered nurses with two or more violations. The Director of Enforcement is responsible for this data.

**Methodology**

The number of individuals against whom two or more disciplinary actions were taken by the board or commission within the current and preceding two fiscal years is divided by the total number of individuals receiving disciplinary actions within the current and preceding two fiscal years. The result should be multiplied by 100 to achieve a percentage.

**Purpose**

The measure is intended to show how effectively the agency enforces its regulatory requirements and prohibitions. It is important that the agency enforce its act and rules strictly enough to ensure consumers are protected from unsafe, incompetent and unethical practice by registered nurses.

**Goal No. 2 Protect Public and Enforce Nursing Practice Act**  
**Objective No. 1 Investigate and Resolve Complaints about Violations of the Act**  
**Outcome No. 3 Percent of Documented Complaints Resolved within Six Months (RN)**

**Definition**

The percent of RN complaints resolved during the reporting period, that were resolved within a six-month period from the time they were initially received by the agency.

**Data Limitations**

None

**Data Source**

The agency discipline software captures the initial date of the RN complaint and calculates the number of days that elapse between date of entry to the date of resolution. The Director of Enforcement is responsible for this data.

**Methodology**

The number of RN complaints resolved within a period of six months or less from the date of receipt (numerator) is divided by the total number of RN complaints resolved during the reporting period (denominator). The result should be multiplied by 100 to achieve a percentage.

**Purpose**

The measure is intended to show the percentage of complaints against RNs which are resolved within a reasonable period of time. It is important to ensure the swift enforcement of the NPA which is an agency goal.

**Definition**

The percent of RN complaints resolved during the reporting period, that were resolved within a six-month period from the time they were initially received by the agency.

**Data Limitations**

None

**Data Source**

The agency discipline software captures the initial date of the RN complaint and calculates the number of days that elapse between date of entry to the date of resolution. The Director of Enforcement is responsible for this data.

**Methodology**

The number of RN complaints resolved within a period of six months or less from the date of receipt (numerator) is divided by the total number of RN complaints resolved during the reporting period (denominator). The result should be multiplied by 100 to achieve a percentage.

**Purpose**

The measure is intended to show the percentage of complaints against RNs which are resolved within a reasonable period of time. It is important to ensure the swift enforcement of the NPA which is an agency goal.

- Goal No. 2 Protect Public and Enforce Nursing Practice Act**
- Objective No. 1 Investigate and Resolve Complaints about Violations of the Act**
- Outcome No. 4 Recidivism Rate for Peer Assistance Programs (RN)**

**Definition**

The percent of RNs who relapse within 3 years of the end of the reporting period as part of the total number of RNs who participate in the program during the previous 3 years.

**Data Limitations**

This is an explanatory measure. The agency has very limited control over this measure.

**Data Source**

This data is provided by the Texas Peer Assistance Program for Nurses (TPAPN). The Operations Director is responsible for this data.

**Methodology**

The RNs successfully completing the program in fiscal year X-3, (where X is the current fiscal year) is derived from the database of TPAPN, the percent of RNs receiving related disciplinary action from the board anytime between the beginning of the fiscal year X-3 and the end of fiscal year X (i.e., the current fiscal year).

**Purpose**

The measure is intended to show the 3-year recidivism rate for those RNs who have been through the peer assistance program. It is important because it indicates that consumers are being protected from unsafe, incompetent and unethical practice as a result of the peer assistance program.

**Definition**

The percent of RNs who relapse within 3 years of the end of the reporting period as part of the total number of RNs who participate in the program during the previous 3 years.

**Data Limitations**

This is an explanatory measure. The agency has very limited control over this measure.

**Data Source**

This data is provided by the Texas Peer Assistance Program for Nurses (TPAPN). The Operations Director is responsible for this data.

**Methodology**

The RNs successfully completing the program in fiscal year X-3, (where X is the current fiscal year) is derived from the database of TPAPN, the percent of RNs receiving related disciplinary action from the board anytime between the beginning of the fiscal year X-3 and the end of fiscal year X (i.e., the current fiscal year).

**Purpose**

The measure is intended to show the 3-year recidivism rate for those RNs who have been through the peer assistance program. It is important because it indicates that consumers are being protected from unsafe, incompetent and unethical practice as a result of the peer assistance program.

- Goal No. 2 Protect Public and Enforce Nursing Practice Act**
- Objective No. 1 Investigate and Resolve Complaints about Violations of the Act**
- Outcome No. 5 One-year Completion Rate for Peer Assistance Programs (RN)**

**Definition**

Of all RNs who have agreed to participate in the peer assistance program, in fiscal year X-1, (where X is the current fiscal year) the percent who have successfully participated in the program for one year with no relapses. Non-cumulative. Percent of RNs who successfully completed the peer assistance program during the prior year to the reporting period and have not relapsed during the one-year period.

**Data Limitations**

This is an explanatory measure. The agency has limited control over outcomes. The Operations Director is responsible for obtaining data through the Texas Peer Assistance Program for Nurses. The BON is unable to determine how many RN's will be referred to the peer assistance program due to chemical dependency.

**Data Source**

The information is obtained from the Texas Peer Assistance Program for Nurses. It is stored in their software programs and submitted to BON on a quarterly basis.

**Methodology**

The number of registered nurses successfully participating in the board's approved peer assistance program (numerator) is divided by the total number participating in the program (denominator) during the fiscal year. The result is multiplied by 100 to achieve a percentage.

**Purpose**

It is important because it indicates that consumers are being protected from unsafe, incompetent and unethical nursing practice as a result of the peer assistance program.

**Definition**

Of all RNs who have agreed to participate in the peer assistance program, in fiscal year X-1, (where X is the current fiscal year) the percent who have successfully participated in the program for one year with no relapses. Non-cumulative. Percent of RNs who successfully completed the peer assistance program during the prior year to the reporting period and have not relapsed during the one-year period.

**Data Limitations**

This is an explanatory measure. The agency has limited control over outcomes. The Operations Director is responsible for obtaining data through the Texas Peer Assistance Program for Nurses. The BON is unable to determine how many RN's will be referred to the peer assistance program due to chemical dependency.

**Data Source**

The information is obtained from the Texas Peer Assistance Program for Nurses. It is stored in their software programs and submitted to BON on a quarterly basis.

**Methodology**

The number of registered nurses successfully participating in the board's approved peer assistance program (numerator) is divided by the total number participating in the program (denominator) during the fiscal year. The result is multiplied by 100 to achieve a percentage.

**Purpose**

It is important because it indicates that consumers are being protected from unsafe, incompetent and unethical nursing practice as a result of the peer assistance program.

<b>Goal No. 2</b>	<b>Protect Public and Enforce Nursing Practice Act</b>
<b>Objective No. 1</b>	<b>Investigate and Resolve Complaints about Violations of the Act</b>
<b>Outcome No. 6</b>	<b>Percent of Complaints Resulting in Disciplinary Action (LVN)</b>

**Definition**

Percent of LVN complaints which were resolved during the reporting period that resulted in disciplinary action.

**Data Limitations**

This is explanatory and a workload issue. The agency has limited control over this measure.

**Data Source**

The disciplinary data is entered into the agency's discipline software module. The agency licensing software then calculates the number of LVN disciplinary actions entered into the system during the reporting period. The Director of Enforcement is responsible for this data.

**Methodology**

The total number of LVN complaints resolved during the reporting period that resulted in disciplinary action (Numerator) is divided by the total number of LVN complaints resolved during the reporting period (denominator). The result should be multiplied by 100 to achieve a percentage. Disciplinary action includes agreed orders, reprimands, warnings, suspensions, probation, revocation, restitution, and/or fines on which the board/commission has acted.

**Purpose**

The measure is intended to show the extent to which the agency exercises its disciplinary authority in proportion to the number of LVN complaints received. It is important that both the public and licensees have an expectation that the agency will work to ensure fair and effective enforcement of the act and this measure seeks to indicate agency responsiveness to this expectation.

**Definition**

Percent of LVN complaints which were resolved during the reporting period that resulted in disciplinary action.



**Data Limitations**

This is explanatory and a workload issue. The agency has limited control over this measure.

**Data Source**

The disciplinary data is entered into the agency's discipline software module. The agency licensing software then calculates the number of LVN disciplinary actions entered into the system during the reporting period. The Director of Enforcement is responsible for this data.

**Methodology**

The total number of LVN complaints resolved during the reporting period that resulted in disciplinary action (Numerator) is divided by the total number of LVN complaints resolved during the reporting period (denominator). The result should be multiplied by 100 to achieve a percentage. Disciplinary action includes agreed orders, reprimands, warnings, suspensions, probation, revocation, restitution, and/or fines on which the board/commission has acted.

**Purpose**

The measure is intended to show the extent to which the agency exercises its disciplinary authority in proportion to the number of LVN complaints received. It is important that both the public and licensees have an expectation that the agency will work to ensure fair and effective enforcement of the act and this measure seeks to indicate agency responsiveness to this expectation.

**Goal No. 2 Protect Public and Enforce Nursing Practice Act**  
**Objective No. 1 Investigate and Resolve Complaints about Violations of the Act**  
**Outcome No. 7 Recidivism Rate for Those Receiving Disciplinary Action (LVN)**

**Definition**

The number of repeat LVN offenders at the end of the reporting period as a percentage of all offenders during the most recent three-year period.

**Data Limitations**

This is explanatory and a workload issue. The Board has limited control over this measure.

**Data Source**

The agency licensing software captures those licensed vocational nurses with two or more violations. The Director of Enforcement is responsible for this data.

**Methodology**

The number of LVNs against whom two or more disciplinary actions were taken by the board or commission within the current and preceding two fiscal years is divided by the total number of LVNs receiving disciplinary actions within the current and preceding two fiscal years. The result should be multiplied by 100 to achieve a percentage.

**Purpose**

The measure is intended to show how effectively the agency enforces its regulatory requirements and prohibitions. It is important that the agency enforce its act and rules strictly enough to ensure consumers are protected from unsafe, incompetent and unethical practice by licensed vocational nurses.

**Definition**

The number of repeat LVN offenders at the end of the reporting period as a percentage of all offenders during the most recent three-year period.

**Data Limitations**

This is explanatory and a workload issue. The Board has limited control over this measure.

**Data Source**

The agency licensing software captures those licensed vocational nurses with two or more violations. The Director of Enforcement is responsible for this data.

**Methodology**

The number of LVNs against whom two or more disciplinary actions were taken by the board or commission within the current and preceding two fiscal years is divided by the total number of LVNs receiving disciplinary actions within the current and preceding two fiscal years. The result should be multiplied by 100 to achieve a percentage.

**Purpose**

The measure is intended to show how effectively the agency enforces its regulatory requirements and prohibitions. It is important that the agency enforce its act and rules strictly enough to ensure consumers are protected from unsafe, incompetent and unethical practice by licensed vocational nurses.

**Goal No. 2 Protect Public and Enforce Nursing Practice Act**  
**Objective No. 1 Investigate and Resolve Complaints about Violations of the Act**  
**Outcome No. 8 Percent of Documented Complaints Resolved within Six Months (LVN)**

**Definition**

The percent of LVN complaints resolved during the reporting period, that were resolved within a six-month period from the time they were initially received by the agency.

**Data Limitations**

None

**Data Source**

The agency discipline software captures the initial date of the LVN complaint and calculates the number of days that elapse between date of entry to the date of resolution. The Director of Enforcement is responsible for this data.

**Methodology**

The number of LVN complaints resolved within a period of six months or less from the date of receipt (numerator) is divided by the total number of LVN complaints resolved during the reporting period (denominator). The result should be multiplied by 100 to achieve a percentage.

**Purpose**

The measure is intended to show the percentage of LVN complaints which are resolved within a reasonable period of time. It is important to ensure the swift enforcement of the NPA which is an agency goal.

**Definition**

The percent of LVN complaints resolved during the reporting period, that were resolved within a six-month period from the time they were initially received by the agency.

**Data Limitations**

None

**Data Source**

The agency discipline software captures the initial date of the LVN complaint and calculates the number of days that elapse between date of entry to the date of resolution. The Director of Enforcement is responsible for this data.

**Methodology**

The number of LVN complaints resolved within a period of six months or less from the date of receipt (numerator) is divided by the total number of LVN complaints resolved during the reporting period (denominator). The result should be multiplied by 100 to achieve a percentage.

**Purpose**

The measure is intended to show the percentage of LVN complaints which are resolved within a reasonable period of time. It is important to ensure the swift enforcement of the NPA which is an agency goal.

**Goal No. 2 Protect Public and Enforce Nursing Practice Act**  
**Objective No. 1 Investigate and Resolve Complaints about Violations of the Act**  
**Outcome No. 9 Recidivism Rate for Peer Assistance Program (LVN)**

**Definition**

The percent of LVNs who relapse within 3 years of the end of the reporting period as part of the total number of LVNs who participate in the program during the previous 3 years.

**Data Limitations**

This is an explanatory measure. The agency has very limited control over this measure.

**Data Source**

This data is provided by the Texas Peer Assistance Program for Nurses (TPAPN). The Operations Director is responsible for this data.

**Methodology**

The LVNs successfully completing the program in fiscal year X-3, (where X is the current fiscal year) is derived from the database of TPAPN, the percent of LVNs receiving related disciplinary action from the board anytime between the beginning of the fiscal year X-3 and the end of fiscal year X (i.e., the current fiscal year).

**Purpose**

The measure is intended to show the 3-year recidivism rate for those LVNs who have been through the peer assistance program. It is important because it indicates that consumers are being protected from unsafe, incompetent and unethical practice as a result of the peer assistance program.

**Definition**

The percent of LVNs who relapse within 3 years of the end of the reporting period as part of the total number of LVNs who participate in the program during the previous 3 years.

**Data Limitations**

This is an explanatory measure. The agency has very limited control over this measure.

**Data Source**

This data is provided by the Texas Peer Assistance Program for Nurses (TPAPN). The Operations Director is responsible for this data.

**Methodology**

The LVNs successfully completing the program in fiscal year X-3, (where X is the current fiscal year) is derived from the database of TPAPN, the percent of LVNs receiving related disciplinary action from the board anytime between the beginning of the fiscal year X-3 and the end of fiscal year X (i.e., the current fiscal year).

**Purpose**

The measure is intended to show the 3-year recidivism rate for those LVNs who have been through the peer assistance program. It is important because it indicates that consumers are being protected from unsafe, incompetent and unethical practice as a result of the peer assistance program.

**Goal No. 2 Protect Public and Enforce Nursing Practice Act**  
**Objective No. 1 Investigate and Resolve Complaints about Violations of the Act**  
**Outcome No. 10 One-year Completion Rate for Peer Assistance Programs (LVN)**

**Definition**

Percent of LVNs who successfully completed the peer assistance program during the year prior to the reporting period and have not relapsed during the one-year period.

**Data Limitations**

This is an explanatory measure. The agency has limited control over outcomes. The Operations Director is responsible for obtaining data through the Texas Peer Assistance Program for Nurses. The BON is unable to determine how many LVN's will be referred to the peer assistance program due to chemical dependency.

**Data Source**

The information is provided to the Board by the Texas Peer Assistance Program for Nurses.

**Methodology**

Of all the LVNs who have been referred to the peer assistance program in the prior fiscal year, the percent who have successfully participated in the program for one year with no relapse.

**Purpose**

Indicates that consumers are being protected from unsafe, incompetent and unethical vocational nurse practice as a result of the peer assistance program.

**Definition**

Percent of LVNs who successfully completed the peer assistance program during the year prior to the reporting period and have not relapsed during the one-year period.

**Data Limitations**

This is an explanatory measure. The agency has limited control over outcomes. The Operations Director is responsible for obtaining data through the Texas Peer Assistance Program for Nurses. The BON is unable to determine how many LVN's will be referred to the peer assistance program due to chemical dependency.

**Data Source**

The information is provided to the Board by the Texas Peer Assistance Program for Nurses.

**Methodology**

Of all the LVNs who have been referred to the peer assistance program in the prior fiscal year, the percent who have successfully participated in the program for one year with no relapse.

**Purpose**

Indicates that consumers are being protected from unsafe, incompetent and unethical vocational nurse practice as a result of the peer assistance program.

**Goal No. 2 Protect Public and Enforce Nursing Practice Act**  
**Objective No. 1 Investigate and Resolve Complaints about Violations of the Act**  
**Outcome No. 11 Percent of Complaints Resulting in Disciplinary Action (APRN)**

**Definition**

Percent of complaints against advanced practice registered nurses which were resolved during the reporting period that resulted in disciplinary action.

**Data Limitations**

This is explanatory and a workload issue. The agency has limited control over this measure.

**Data Source**

The disciplinary data is entered into the agency's discipline software module. The agency licensing software then calculates the number of disciplinary actions against advanced practice registered nurses entered into the system during the reporting period. The Director of Enforcement is responsible for this data.

**Methodology**

The total number of APRN complaints resolved during the reporting period that resulted in disciplinary action (numerator) is divided by the total number of APRN complaints resolved during the reporting period (denominator). The result should be multiplied by 100 to achieve a percentage. Disciplinary action includes agreed orders, reprimands, warnings, suspensions, probation, revocation, restitution, and/or fines on which the board/commission has acted.

**Purpose**

The measure is intended to show the extent to which the agency exercises its disciplinary authority in proportion to the number of APRN complaints received. It is important that both the public and licensees have an expectation that the agency will work to ensure fair and effective enforcement of the act and this measure seeks to indicate agency responsiveness to this expectation.

**Definition**

Percent of complaints against advanced practice registered nurses which were resolved during the reporting period that resulted in disciplinary action.

**Data Limitations**

This is explanatory and a workload issue. The agency has limited control over this measure.

**Data Source**

The disciplinary data is entered into the agency's discipline software module. The agency licensing software then calculates the number of disciplinary actions against advanced practice registered nurses entered into the system during the reporting period. The Director of Enforcement is responsible for this data.

**Methodology**

The total number of APRN complaints resolved during the reporting period that resulted in disciplinary action (numerator) is divided by the total number of APRN complaints resolved during the reporting period (denominator). The result should be multiplied by 100 to achieve a percentage. Disciplinary action includes agreed orders, reprimands, warnings, suspensions, probation, revocation, restitution, and/or fines on which the board/commission has acted.

**Purpose**

The measure is intended to show the extent to which the agency exercises its disciplinary authority in proportion to the number of APRN complaints received. It is important that both the public and licensees have an expectation that the agency will work to ensure fair and effective enforcement of the act and this measure seeks to indicate agency responsiveness to this expectation.

## **Schedule C: Texas Board of Nursing Historically Underutilized Business Plan**

Texas Administrative Code §20.13(b) requires that each state agency make a good faith effort to award procurement opportunities to businesses certified as historically underutilized. The goal of this good faith effort is to ensure that a fair share of state business is awarded to Historically Underutilized Businesses (HUBs).

The Historically Underutilized Business (HUB) program is governed by the Texas Government Code, Title 10, Subtitle D, Chapter 2161. The purpose of the program is to increase contracting opportunities with the State of Texas for minority and women-owned businesses.

### **HUB Mission Statement**

Texas Board of Nursing will make a good faith effort to award procurement opportunities to historically underutilized businesses. Texas Board of Nursing has developed strategies to increase the agency's HUB participation and ensure that the agency remains in compliance with all of the laws and rules established for the HUB program.

### **HUB Goals**

Texas Board of Nursing has set an overall goal of purchasing 20% of all agency services and goods from historically underutilized businesses. Procurement awarded to HUBs should provide the agency the best value and must be the most cost effective.

### **HUB Program Strategy**

In an effort to meet the agency's goals, the Texas Board of Nursing has strategies that include:

- Complying with HUB planning and reporting requirements
- Following the HUB purchasing procedures and requirements established by the Comptroller's Texas Procurement and Support Services division
- Attending HUB Coordinator meetings and any HUB training
- Utilizing HUB resellers from the DIR contracts as often as possible
- Utilizing the Comptroller's Centralized Master Bidders List (CMBL) and HUB search to ensure that a good faith effort is made to award goods and services contracts to HUBs
- Promoting HUBs in the competitive bid process for goods and services

# Schedule F: Board of Nursing Fiscal Year 2022-2026 Workforce Plan

## I. AGENCY OVERVIEW

The Board of Nursing (BON) has one of the largest licensee databases in the State of Texas. The Board regulates over 410,000 nurses and over 200 schools of nursing. The Board of Nursing issues licenses to more than 27,000 nurses per year by examination to new graduates and by endorsement to licensees from other states seeking a Texas license. This is a unique challenge to investigate alleged violations of the Nurse Practice Act with the size of Texas and limited staff.

The Agency is mission-driven and has a strict governance code which spells out the duties of the Board as appointed by the Governor, the Executive Director, and the agency staff. All rules and policies are reviewed within the framework of protecting the public. The agency has streamlined, revised, and eliminated policies that did not fit this mission. The agency has the appropriations approval to hire 125.7 positions. The agency has 49 FTEs in the Enforcement Division, 40.7 FTES in the Operations Division, 20 FTEs in the Nursing Division and 16 FTEs in General Counsel and Administration. The majority of staff is located in the Austin area. The board has 13 members from throughout the State of Texas. Board members are appointed by the Governor with the advice and consent of the Senate.

### A. Agency Mission

The mission of the Texas Board of Nursing is to protect and promote the welfare of the people of Texas by ensuring that each person holding a license as a nurse in the State of Texas is competent to practice safely. The Board fulfills its mission through the regulation of the practice of nursing and the approval of schools of nursing. This mission, derived from **Chapters 301, 303, and 304 of the Occupations Code**, supersedes the interest of any individual, the nursing profession, or any special interest group.

### B. Agency Strategic Goals and Objectives

Goal A	Licensing & Accreditation: To manage cost-effective, quality programs of accreditation, examination, licensure, and regulation that ensure standards for nursing education and practice, and which effectively serve the market demand for qualified nurses.
Objective A.1	Licensing & Examination: To ensure timely and cost-effective application processing and licensure/credentialing systems for 100 percent of all qualified applicants for each fiscal year.
Objective A.2	Accreditation: to ensure that 100 percent of nursing programs are in compliance with the Board of Nursing's rules.
Goal B	Enforcement: To ensure swift, fair, and effective enforcement of the Nursing Practice Act (NPA) so that consumers are protected from unsafe, incompetent and unethical nursing practice by nurses.
Objective B.1	Protect Public: To guarantee that 100 percent of written complaints received annually regarding nursing practice or non-compliance with the Board of Nursing's rules are investigated and resolved in accordance with the Nursing Practice Act (NPA) and Administrative Procedures Act (APTRA) or are appropriately referred to other regulatory agencies.

### ***C. Business Functions***

The Board of Nursing licenses Licensed Vocational Nurses, Registered Nurses, and Advanced Practice Registered Nurses (APRNs), approves schools of nursing, approves eligible students to take the national nursing exams, and investigates alleged violations of the Nursing Practice Act and the Board's Rules and Regulations.

### ***D. Anticipated Changes to the Mission, Strategies and Goals over the Next Five Years***

No changes to the agency mission are anticipated in the next five years. The Board continues to implement strategies to go paperless by using available technology. For example, the Board of Nursing migrated to the Optimal Regulatory Board System (ORBS) in 2020. Plans are being made to implement additional strategies in the future.

### ***E. Additional Considerations***

#### ***Key Economic and Environmental Factors***

In FY 2017-2021, the Board experienced a steady annual increase of 3.5% for currently licensed RNs and 12% for APRNs. LVN licensure declined by 1.7%. The number of new Texas licensees from examination and endorsement has added to this increase due to the dramatic growth of students. The continued growth of licensees in Texas has resulted in higher revenue from license renewals. The BON attempts to maintain a balance of funds approved by the Texas Legislature, but the sustained growth of RNs and APRNs provides additional revenue beyond projections.

The agency was required to reduce the budget by 5% in FY 2020, of which the agency was able to receive about 60% back in the current biennium. To meet this reduction, the agency had to delay hiring staff. The Board of Nursing is now actively trying to fill vacant positions that were delayed in hiring due to the budget reduction.

#### ***Challenges to Providing Competitive Salaries***

The BON regards the agency staff as the agency's most valuable resource. The BON strives to recruit and retain the best employees in the State of Texas. The Board has addressed turnover by consistently allowing for pay for performance via the merit raise system and implementing the compensation philosophy of exceeding the average mid-range in the state classification pay groups. The agency is experiencing increased competition for nursing staff. As with the entire state, employee pay remains the agency's lowest satisfaction category. The BON continues to look for extrinsic rewards for staff as agency salaries continue to slip behind the agency's counterparts in the private sector. The Board has implemented extrinsic reward strategies, including increasing availability of telework and flexible work schedules. The Board believes these strategies have contributed to our turnover rate being approximately half the average rate for all state agencies.

#### ***Agency Workload***

The BON continues to receive numerous phone, written, and e-mail inquiries. Agency statistics show the following number of phone calls accessing our automated system:

Fiscal Year 2019- 130,775

Fiscal Year 2020- 126,601

Fiscal Year 2021- 99,118

Fiscal Year 2022- approximately 25,500 per quarter

The phone call numbers above do not include the number of direct calls that go to a staff member nor does it

include the number of e-mails. The BON has a customer service department and eleven staff members dedicated to the task of answering calls.

## II. CURRENT WORKFORCE PROFILE (SUPPLY ANALYSIS)

### A. Agency Demographics

Gender: Female 73.7%  
Male 26.3%

Race: African-American 13.6%  
Hispanic 22.0%  
Asian 2.5%  
Caucasian 61.9%

Percentage of Workforce Eligible to Retire in the Next Five Years: 20.3%

Job Categories	State Civilian Workforce					
	African American		Hispanic American		Female	
	BON %	State %	BON %	State %	BON %	State %
Officials, Administration	20.0	12.3	0.0	19.9	40.0	51.3
Professionals	2.1	13.0	21.3	18.1	72.3	48.7
Technicians	0.0	21.9	0.0	34.5	0.0	60.6
Administrative Support	19.0	20.2	28.6	33.2	85.7	85.0

### B. Employee Turnover

Turnover decreased in FY 21 to the lowest rates the BON has experienced in five years. However, due to resignations and retirements, the Board has lost valuable institutional knowledge. To compensate for this loss, detailed policies and procedures are being created or revised.

#### Agency Turnover Percentages: 2017-2021

Fiscal Year	Headcount	Terminations Including Interagency Transfers	Turnover Rate Including Interagency Transfers	Terminations Excluding Interagency Transfers	Turnover Rate Excluding Interagency Transfers
2017	113.75	16	14.1%	13	11.4%
2018	116	14	12.1%	8	6.9%
2019	118.5	20	16.9%	16	13.5%
2020	115.25	17	15.6%	13	11.3%
2021	114.25	12	10.5%	9	7.9%



### ***C. Workforce Skills Critical to the Mission and Goals of the Agency***

Nurses - The agency requires a minimum of Associate Degree prepared nurses for Enforcement and Master's Degree prepared nurses for consulting. Both need critical thinking skills to apply their expertise in areas outside their particular training and education. All nurses need to be proficient in use of computer software programs since they will be processing their cases from receiving the complaint to filing formal charges, drafting orders, and writing reports on school survey visits.

All staff will have to become more proficient in various technologies as the BON will be moving to paperless functions within the next five years. Staff members will need the ability to manipulate programs for word processing, documenting, imaging, web-based services, and records retention.

All staff will need to advance their communication skills since the Board's focus is and will continue to be providing excellent customer service to the public.

Each staff member is required in some way to interact with internal and external customers which necessitates the ability to appreciate diversity and how it affects business processes.

### ***D. Projected Employee Attrition Rate over the Next Five Years***

Fiscal Year 2022 - 16%

Fiscal Year 2023 - 16%

Fiscal Year 2024 - 16%

Fiscal Year 2025 - 16%

Fiscal Year 2026 - 16%

The BON is continuing to feel the effect of baby boomer retirements, which have been ongoing since fiscal year 2015. Beginning in fiscal year 2023, there will be 18 staff members eligible for retirement.

## **III. FUTURE WORKFORCE PROFILE (DEMAND ANALYSIS)**

### ***A. Expected Workforce Changes Driven by Factors such as changing Mission, Technology, Work, Workloads and/or Work Processes***

As the agency moves towards a paperless environment, it is anticipated that additional and ongoing training in the area of computer software and imaging processes will be needed.

### ***B. Future Workforce Skills Needed***

To facilitate the ongoing business processes, the agency must be able to become better knowledge agents. This will require staff to be able to use critical thinking skills, become change agents, anticipate the future, use technology wisely, and manage time.

Board staff must be able to enforce the NPA by conducting timely investigations of alleged violations of the law and rules since this directly affects the protection of the public. Staff must also be able to collect fees, process license applications and license nurses as quickly as possible for the public to have adequate access to healthcare.

#### IV. GAP ANALYSIS

The Board does not anticipate a shortage of the pool of administrative staff over the next five years due to the available workforce in the Central Texas area. However, it is anticipated that a shortage of RNs to fill Enforcement and Nursing Consultant duties due to the public and private demand for the limited number of RNs in the workforce.

Currently, 30 positions require registered nurses. The agency anticipates the need for additional RNs by the end of the next five-year cycle. They will be needed in the Practice Department to testify on alleged violations of the law and rules and will be used in a consultant capacity to interpret complex practice issues and serve as expert witnesses on cases.

Supply and demand projections published by the Texas Center for Nursing Workforce Studies predict that the deficit of available RNs will increase steadily through the year 2030. They anticipate that through 2030, RNs will experience a larger growth in the deficit between supply and demand than any other nurse type. By 2030, they predict a statewide deficit of 59,970 RNs, and a shortage of 7,459 RNs in Central Texas. These deficits of available RNs will make recruitment and retention of RNs more competitive in the future.

The agency anticipates ongoing difficulty in filling Nurse Investigator and Nurse Consultant positions at least until fiscal year 2030 due to competition for nursing faculty and staff at schools and hospitals. If unable to secure sufficient operating funds, the agency will look for new ways to apply the merit raise system, which is the most effective tool in the recruitment and retention of staff.

The agency anticipates increased competition in recruitment and hiring of Information Technology professionals. Several tech companies are either moving into Austin or expanding their existing operations in this area. These companies include Tesla, Google, Amazon, SpaceX, Apple, Facebook, Canva and Oracle. This increased competition will likely increase the difficulty of recruiting and retaining IT staff.

The BON believes staff have the fundamental skills to complete tasks but need additional training to enhance their skills to perform more efficiently and effectively. Since there is movement towards more technology-based business processes, there will no longer be a need for microfilming skills.

#### V. STRATEGY DEVELOPMENT

In order for the agency to recruit and retain some of the most critical skills such as nursing knowledge, the agency will have to leave unfilled positions open longer to have the funds to hire and retain nurses at the mid-range of the pay scale. To bring the Nurse Investigators along faster in the enforcement area, they will be paired with mentors within the agency. Use of the Council on Licensure, Enforcement and Regulation (CLEAR) organization will facilitate investigator training. Leaders will be identified within the organization to provide internal and external training opportunities to enhance skills and help the agency in succession planning.

Goal 1	Recruit and retain a competent workforce
Rationale:	To establish a consistent, productive business atmosphere, the BON needs a well-trained and stable workforce to protect the public. This includes the ongoing internal training of current staff to fill open positions and possibly consolidate some work processes to enhance staff compensation with current or available funds.
Action Steps:	1. Request additional operating funds in the next legislative session to enhance employee compensation especially in the recruitment and retention of nurses. 2. Develop and revise agency policy and procedures to be consistent and detailed.

	<ol style="list-style-type: none"> <li>3. Develop mandatory training components for recognized agency sub-par skill sets.</li> <li>4. Establish a mentorship program with current staff and those from other small state agencies to demonstrate best practices in needed skill sets.</li> <li>5. Complete a succession plan which incorporates time lines and minimal skill sets.</li> <li>6. Conduct a risk assessment to the agency due to potential knowledge loss of key staff.</li> <li>7. Establish and implement a career ladder for all staff.</li> </ol>
Goal 2	Establish an agency culture of change enhancements to business processes
Rationale:	Resources will always be limited. At best, funding will remain constant but staff will be required to do more. This necessitates doing business more efficiently and effectively. To do this, staff will need to accept change as a way of life and not be afraid to try new ideas. It doesn't always have to be done the way it's always been done before.
Action Steps:	<ol style="list-style-type: none"> <li>1. Develop an ongoing mandatory training module on change enhancements.</li> <li>2. Add the skill of change enhancements and change management to the minimal core of essential job functions.</li> <li>3. Reorganize agency structure around processes.</li> <li>4. Develop a pay system that rewards constructive change management.</li> </ol>

**Schedule G: Report on Customer Service**

**Texas Board of Nursing**

***Report on Customer Service  
for Fiscal Years 2023-2027***



***Submitted: June 1, 2022***

## I. Inventory of Customers Served by the BON

A critical component of the Strategic Plan is the report on Customer Service. Chapter 2114 of the Government Code requires state agencies to develop standards and assessment plans for the purpose of enhancing customer service and satisfaction.

The Board of Nursing (BON or Board) definition of customer includes the following groups:

- The Public (citizens of Texas) - The mission of the BON is to protect and promote the welfare of the people of Texas by ensuring that each person holding a license as a nurse in the State of Texas is competent to practice safely.
- Nurses - The Board has a responsibility to assist nurses in the safe practice of nursing by keeping them informed of rules and regulations applicable to their practice. The BON does this through the agency website, the *Texas Board of Nursing Bulletin*, the BON Facebook page, written, phone and electronic communication.
- Health Care Organizations - The Board is responsible for providing information to health care organizations concerning the licensure or disciplinary action status of nurses they may employ or utilize.
- The Legislature - The Legislature, in its capacity of protecting the public and acting in the interest of its constituents, must be kept informed of issues involving the safe practice of nursing where legislative action may be the best course of action in ensuring safe nursing practice.
- Professional Associations - Professional associations seek data and information that may assist them in their efforts to advocate on behalf of the profession of nursing. Professional associations can assist the BON in researching issues impacting the safe practice of nursing.
- Schools of Nursing - The Board approves 128 RN Nursing Programs and 91 LVN Nursing Programs in Texas. The BON works with schools to ensure that nursing students receive satisfactory preparation and that the schools understand the Board's requirements.
- Nursing Students - As customers, the Board provides students with the information needed to choose a Texas nursing education program and assists students in registering and taking the exams needed for licensure.
- Respondents - The Enforcement Department of the BON must afford respondents due process in the course of investigating complaints.

## II. Information-Gathering Methods

During this biennium, the Board obtained stakeholder feedback from two sources:

- Survey data from the 2022 BON Stakeholder Focused Feedback Survey conducted from April 1 to April 20, 2022; and
- Data from the 2022 BON Customer Service Survey conducted from April 1 to May 4, 2022, utilizing the survey questions set forth in the *Instructions for Preparing and Submitting Agency Strategic Plans for Fiscal Years 2023 to 2027* issued by the Legislative Budget Board in February 2022.

The **2022 BON Stakeholder Focused Feedback Survey** gathered perceptions of: issues, conditions, or problems related to the practice of nursing; the most significant needs and demands of the Board's stakeholders; strengths, weaknesses, opportunities, or obstacles affecting the BONs relationship with its stakeholders; to what extent stakeholders are satisfied with the services the Board provides; and what progress has been made by the BON toward achieving the Board's objectives and desired outcomes.

The **2022 BON Customer Service Survey** was received 89 responses during the four-week period during which the survey, hosted by *Survey Monkey*, was linked from the home page of the BON website. The survey announcements appeared: on the cover of the April 2022 issues of the *Board of Nursing Bulletin*, on the BON website home page, and on the BON Facebook page.

The 2022 BON Customer Service Survey gathered stakeholder perceptions of the agency website, the agency newsletter - *Board of Nursing Bulletin*, the agency Facebook page, and interactions with agency customer service staff through the BON phone system. The survey also gathered stakeholder feedback concerning: the agency's facilities, including access to the agency, the office location, signs, and cleanliness; agency staff, including employee courtesy, friendliness, and knowledgeability, and whether staff members adequately identified themselves to customers by name, including the use of name plates or tags for accountability; agency communications, including toll-free telephone access, average time spent on hold, call transfers, access to a live person, letters, and electronic mail; the agency's website, including the ease of use of the site, mobile access to the site, information on the location of the site and the agency, information accessible through the site such as a listing of services and programs, and whom to contact for further information or to complain to; the agency's complaint handling process, including whether it is easy to file a complaint and whether responses are timely; the agency's ability to timely serve customers, including the amount of time spent waiting for service in person; satisfaction with agency brochures or other printed information, including the accuracy of that information; and overall satisfaction with the agency.

### III. Inventory of External Customers by Strategy

The Governor's Office and Legislative Budget Board require all state agencies to provide an inventory of their external customers organized by the strategies listed in the General Appropriations Act, as well as a brief description of the types of services provided. For the Board of Nursing, these are as follows:

#### Strategy: Licensing

Section/Division	External Customer Groups	Customer Services
Operations	The Public, Nurses, Health Care Organizations, and the Legislature	Operate efficient system of nursing credential verification

#### Strategy: Accreditation

Section/Division	External Customer Groups	Customer Services
Nursing	The Public, Schools of Nursing, Nursing Students, Nurses, and the Legislature	Accredit programs that include Essential Competencies Curricula

### Strategy: Adjudicate Violations

Section/Division	External Customer Groups	Customer Services
Enforcement, Legal, Nursing, Operations	The Public, Nurses, Health Care Organizations, Schools of Nursing, Nursing Students, Respondents, and the Legislature	Administer system of enforcement and adjudication

### Strategy: Peer Assistance

Section/Division	External Customer Groups	Customer Services
Enforcement, Legal, Nursing	The Public, Nurses, Health Care Organizations, Respondents	Identify, refer, and assist those nurses whose practice is impaired

## IV. Analysis of Findings

### A. 2022 Board of Nursing Customer Service Survey

The Board conducted an online survey in 2022, hosted by Survey Monkey, which was linked through the Board’s website home page.

#### Methodology

The BON posted a link to the Customer Service Survey on the Board website in April 2022. The survey was also announced on page one of the April 2022 issue of the *Board of Nursing Bulletin*, which was sent to all currently licensed nurses in Texas, as well as all paid newsletter subscribers. The total number of *Bulletins* mailed in April 2022 was 419,497. The survey, which consisted of 25 questions, solicited opinions concerning: the *Texas Board of Nursing Bulletin*; the Board of Nursing website; interactions with the Customer Service Department; the agency Facebook page and webmaster inquiries. The survey was posted on the BON website from April 1, 2022, until May 4, 2022. Results from the survey are provided below.

The BON Customer Service Survey was taken a total of 89 times, which is a low response rate for more than 419,000 licensees reached (.002 percent of those contacted). Factors influencing the response rate may include delayed delivery of the *Bulletin* due to pandemic-related delays in receiving paper, which pushed mail distribution back several weeks and a website outage which occurred during the survey period.

## Findings of the Nursing Customer Service Survey

### Feedback on the *Board of Nursing Bulletin*

Survey questions eight and nine concerned the usefulness of content included in the *Board of Nursing Bulletin*.

<b>8. The <i>Bulletin</i> feature articles, notifications, and updates are useful and/or informative.</b>		
<b>Answer Options</b>	<b>Response Percent</b>	<b>Response Count</b>
5 = Very Satisfied	41.77%	33
4 = Satisfied	34.18%	27
3 = Neutral	12.66%	10
2 = Unsatisfied	3.80%	3
1 = Very Unsatisfied	7.59%	6
<b>answered question</b>		<b>79</b>
<b>skipped question</b>		<b>10</b>

- \* More than seventy-five percent of respondents indicated that they were very satisfied (41.77%) or satisfied (34.18%) with the feature articles, notifications, and updates appearing in the *BON Bulletin*.

<b>9. The Notice of Disciplinary Actions and Imposter Warnings are useful and/or informative.</b>		
<b>Answer Options</b>	<b>Response Percent</b>	<b>Response Count</b>
5 = Very Satisfied	36.71%	29
4 = Satisfied	32.91%	26
3 = Neutral	24.05%	19
2 = Unsatisfied	2.53%	2
1 = Very unsatisfied	3.80%	3
<b>answered question</b>		<b>79</b>
<b>skipped question</b>		<b>10</b>

- \* Almost seventy percent of respondents (69.62%) indicated that they were very satisfied (36.71%) or satisfied (32.91) with the *Notice of Disciplinary Actions* and *Imposter Warning* sections.

### Feedback on Telephone Inquiries

Survey questions 1-7 related to frequency, wait time, reason for calling, as well as how knowledgeable, courteous, and helpful board staff members were in responding to calls.

#### 1. How often do you contact the Board of Nursing by phone?



Answer Options	Response Percent	Response Count
0 = Never	23.60%	21
1 = First time accessed	8.99%	8
2 = Once or twice a year	37.08%	33
3 = Once or twice every 1-6 months	15.73%	14
4 = Once or twice a month	10.11%	9
5 = Once or twice a week	4.49%	4
<b>answered question</b>		<b>89</b>
<b>skipped question</b>		<b>0</b>

- \* More than half of respondents indicated that they contact the BON once or twice a year to once or twice every one to six months.

<b>2. How long did you wait for a BON representative to take your call?</b>		
Answer Options	Response Percent	Response Count
No Wait	19.67%	12
Less than five (5) minutes	31.15%	19
More than five (5) minutes	8.20%	5
More than fifteen (15) minutes	40.98%	25
<b>answered question</b>		<b>61</b>
<b>skipped question</b>		<b>28</b>

- \* More than half of respondents indicated that they waited five minutes or less to talk to a BON representative.
- \* More than eight percent of respondents indicated that they waited more than five minutes.
- \* More than forty percent of respondents indicated that they waited more than fifteen minutes to speak to a customer service representative. Increased call volume may factor into the increased wait time for callers. The Board received 51,469 calls in the first and second quarter of Fiscal Year (FY) 2022 and 99,118 calls in FY 2021.

<b>3. Why do you contact the Board of Nursing? (Check all that apply)</b>		
Answer Options	Response Percent	Response Count
Advanced Practice Information	8.06%	5
Check Status of an application	19.35%	12
Complaint against a nurse	9.68%	6
Continuing Education	8.06%	5

Disciplinary Action	8.06%	5
Laws & Rules	32.26%	20
Licensure by Endorsement	6.45%	4
Licensure by Examination	16.13%	10
Nursing Education Information	43.55%	27
Nursing Practice Information	16.13%	10
Renew License	25.81%	16
Verify License	18.60%	40
Other (If checked, please describe)	12.90%	8
<b>answered question</b>		<b>62</b>
<b>skipped question</b>		<b>27</b>

- \* Fifty-one percent of respondents indicated that they were contacting the Board about nursing education or nursing continuing education.
- \* Thirty-two percent of respondents indicated that they were inquiring about laws and rules.
- \* Sixty-three percent of respondents indicated that they were renewing a license, verifying a licensure, or checking the status of an application.

<b>4. The information was provided in a courteous manner.</b>		
<b>Answer Options</b>	<b>Response Percent</b>	<b>Response Count</b>
5 = Very Satisfied	45.76%	27
4 = Satisfied	28.81%	17
3 = Neutral	10.17%	6
2 = Unsatisfied	1.69%	1
1 = Very Unsatisfied	13.56%	8
<b>answered question</b>		<b>59</b>
<b>skipped question</b>		<b>30</b>

- \* More than forty-five percent of respondents were very satisfied and more than twenty-eight percent were satisfied with the courteousness of how the information was provided to them.

<b>5. Board Staff were knowledgeable and helpful.</b>		
<b>Answer Options</b>	<b>Response Percent</b>	<b>Response Count</b>
5 = Very Satisfied	42.37%	25
4 = Satisfied	28.81%	17
3 = Neutral	11.86%	7
2 = Unsatisfied	1.69%	1
1 = Very Unsatisfied	15.25%	9

<i>answered question</i>	<b>59</b>
<i>skipped question</i>	<b>30</b>

- \* More than forty-two percent of respondents indicated that they were very satisfied with the information received from BON staff.
- \* More than twenty-eight percent of respondents indicated that they were satisfied with the response they received from BON staff.

<b>6. The information was provided in a timely manner.</b>		
<b>Answer Options</b>	<b>Response Percent</b>	<b>Response Count</b>
5 = Very Satisfied	42.37%	25
4 = Satisfied	25.42%	15
3 = Neutral	10.17%	6
2 = Unsatisfied	3.39%	2
1 = Very Unsatisfied	18.64%	11
<i>answered question</i>		<b>59</b>
<i>skipped question</i>		<b>30</b>

- \* More than two thirds of respondents indicated that they were very satisfied (42.37%) or satisfied (16.18%) with the timeliness of the information provided to them by the Customer Service Group.

<b>7. Board Staff were able to answer my questions.</b>		
<b>Answer Options</b>	<b>Response Percent</b>	<b>Response Count</b>
5 = Very Satisfied	45.0%	27
4 = Satisfied	21.67%	13
3 = Neutral	8.33%	5
2 = Unsatisfied	10.00%	6
1 = Very Unsatisfied	15.00%	9
<i>answered question</i>		<b>60</b>
<i>skipped question</i>		<b>29</b>

- \* Two thirds of respondents indicated that they were very satisfied (45.0%) or satisfied (21.67%) with the ability of the staff of the Customer Service Group to answer respondent questions.

## Feedback on the BON Website

Questions 10 -15 sought website user feedback concerning the Board of Nursing website including: frequency of access, ease of navigation, sections visited, topic location, and understandability of instructions.

10. How often do you access the Board of Nursing website?		
Answer Options	Response Percent	Response Count
0 = Never	0.00%	0
1 = First time accessed	2.53%	2
2 = Once or twice a year	32.91%	26
3 = Once or twice every 1-6 months	11.39%	9
4 = Once or twice a month	21.52%	17
5 = Once or twice a week	31.65%	25
<i>answered question</i>		<b>79</b>
<i>skipped question</i>		<b>10</b>

- \* More than thirty-one percent (31.65%) of respondents indicated that they visit the site once or twice a week, 21.52% of respondents indicated that they visit the site once or twice a month, and more than thirty-two percent of respondents (32.91%) visit once or twice a year.

11. Which section(s) did you visit? (Check all that apply)		
Answer Options	Response Percent	Response Count
Main Menu Tabs (e.g., Home, Public, Nurses, Students, Employers, Military, Contact Us)	41.03%	32
About - Newsletters, Publications, Employment Opportunities	32.05%	25
Forms - Applications and Online Services	38.46%	30
News - Board Meetings, Committee Meetings, Calendar of Events	33.33%	26
Licensure - Verification, Renewal, Endorsement, Examination	79.49%	62
Practice - Nursing Practice Information, Scope of Practice, BON Position Statements & Guidelines	48.72%	38
Education - Approved Nursing Programs, Education Guidelines, Refresher Courses, Remedial Education	55.13%	43
Discipline & Complaints - Complaints, Policies & Procedures, Imposter Alerts	8.97%	7
Laws & Rules - Nursing Practice Act, Rules & Regulations, Rule Changes	53.85%	42
FAQs - Frequently Asked Questions	39.74%	31
Updates, News and Notices	29.49%	23
Continuing Education Course Catalog	19.23%	15

Board of Nursing Facebook Page	10.26%	8
<b>answered question</b>		<b>78</b>
<b>skipped question</b>		<b>11</b>

- \* More than seventy-nine percent of respondents (79.49%) indicated that licensure verification, renewal, endorsement, or examination sections were visited; followed by inquiries about approved nursing education programs, education guidelines, and refresher or remedial education courses (55.13%).

<b>12. The website is clear and easy to navigate.</b>		
<b>Answer Options</b>	<b>Response Percent</b>	<b>Response Count</b>
5 = Very Satisfied	19.23%	15
4 = Satisfied	42.31%	33
3 = Neutral	17.95%	14
2 = Unsatisfied	11.54%	9
1 = Very Unsatisfied	8.97%	7
<b>answered question</b>		<b>78</b>
<b>skipped question</b>		<b>11</b>

- \* More than 61% of survey takers indicated that they were very satisfied (19.23%) or satisfied (42.31%) with the ease and clarity of navigating the BON website.

<b>13. The instructions on the website are clear and easy to understand.</b>		
<b>Answer Options</b>	<b>Response Percent</b>	<b>Response Count</b>
5 = Very Satisfied	20.51%	16
4 = Satisfied	43.59%	34
3 = Neutral	17.95%	14
2 = Unsatisfied	12.82%	10
1 = Very Unsatisfied	5.13%	4
<b>answered question</b>		<b>78</b>
<b>skipped question</b>		<b>11</b>

- \* Instructions on the website were clear and easy to understand for more than sixty-four percent of respondents with 20.51% indicating that they were very satisfied and 43.59% of respondents satisfied with the instructions on the website.

<b>14. The information obtained from the Board of Nursing website is useful.</b>		
<b>Answer Options</b>	<b>Response Percent</b>	<b>Response Count</b>
5 = Very Satisfied	32.05%	25

4 = Satisfied	44.87%	35
3 = Neutral	10.26%	8
2 = Unsatisfied	5.13%	4
1 = Very Unsatisfied	7.69%	6
<b>answered question</b>		<b>78</b>
<b>skipped question</b>		<b>11</b>

- \* More than seventy-six percent of survey takers indicated that the information is useful. Thirty-two percent (32.05%) of respondents were very satisfied and 44.87% of respondents were satisfied with the usefulness of information obtained from the BON website.

<b>15. It is easy to search and locate topics.</b>		
<b>Answer Options</b>	<b>Response Percent</b>	<b>Response Count</b>
5 = Very Satisfied	17.95%	14
4 = Satisfied	39.74%	31
3 = Neutral	16.67%	13
2 = Unsatisfied	14.10%	11
1 = Very Unsatisfied	11.54%	9
<b>answered question</b>		<b>78</b>
<b>skipped question</b>		<b>11</b>

- \* When asked if it is easy to search and locate topics, 17.95% were very satisfied and 39.74% of respondents were satisfied with the ease of searching for and locating topics on the BON website.

### **Feedback on the Facebook Page**

Questions 16-17 requested feedback concerning the agency's Facebook page, which was launched in January 2015.

<b>16. How often do you access the Board of Nursing Facebook postings?</b>		
<b>Answer Options</b>	<b>Response Percent</b>	<b>Response Count</b>
0 = Never	67.95%	53
1 = First time accessed	6.41%	5
2 = Once or twice a year	12.82%	10
3 = Once or twice every 1-6 months	3.85%	3
4 = Once or twice a month	5.13%	4
5 = Once or twice a week	3.85%	3
<b>answered question</b>		<b>78</b>
<b>skipped question</b>		<b>11</b>

- \* More than two thirds of respondents (67.95%) indicated that they had never visited the BON Facebook page. Among those who have visited the site, the largest percentage (12.82%) visit the page once or twice a year.

<b>17. Facebook Postings are useful and informative.</b>		
<b>Answer Options</b>	<b>Response Percent</b>	<b>Response Count</b>
5 = Very Satisfied	16.00%	4
4 = Satisfied	28.00%	7
3 = Neutral	44.00%	11
2 = Unsatisfied	4.00%	1
1 = Very Unsatisfied	8.00%	2
<b>answered question</b>		<b>25</b>
<b>skipped question</b>		<b>64</b>

- \* More than sixty-seven percent of survey takers had not visited the BON Facebook page (see Question 16 above) so only twenty-eight percent of respondents provided feedback concerning how useful or informative the BON Facebook page is. Among those who responded, forty-four percent were very satisfied or satisfied with how useful and informative the postings were.

**Feedback on the Agency’s Facilities, Staff Interactions, Communications, Website, Complaint Handling Process, Timeliness, Printed Information, and Overall Satisfaction with the Agency**

The survey questions below measure respondent satisfaction with the agency’s physical location, communication experiences with BON staff, the agency’s complaint handling process, timeliness, printed information, and overall satisfaction with the agency, as prescribed in the Legislative Budget Board’s instructions for preparation of the agency strategic plan.

<b>18. How satisfied are you with the agency’s facilities, including your ability to access the agency, the office location, signs, and cleanliness?</b>		
<b>Answer Options</b>	<b>Response Percent</b>	<b>Response Count</b>
5 = Very Satisfied	16.00%	12
4 = Satisfied	14.67%	11
3 = Neutral	9.33%	7
2 = Unsatisfied	1.33%	1
1 = Very Unsatisfied	8.00%	6
N/A = Not applicable	50.67%	38
<b>answered question</b>		<b>75</b>
<b>skipped question</b>		<b>14</b>

**19. How satisfied are you with agency staff, including employee courtesy, friendliness, and knowledgeability, and whether staff members adequately identify themselves to customers by name, including the use of name plates or tags for accountability?**

Answer Options	Response Percent	Response Count
5 = Very Satisfied	37.84%	28
4 = Satisfied	10.81%	8
3 = Neutral	10.81%	8
2 = Unsatisfied	1.35%	1
1 = Very Unsatisfied	5.41%	1
N/A = Not applicable	33.78%	25
<b>answered question</b>		<b>74</b>
<b>skipped question</b>		<b>15</b>

**20. How satisfied are you with agency communications, including toll-free telephone access, the average time you spend on hold, call transfers, access to a live person, letters, electronic mail, and any applicable text messaging or mobile applications?**

Answer Options	Response Percent	Response Count
5 = Very Satisfied	29.73%	22
4 = Satisfied	20.27%	15
3 = Neutral	10.81%	8
2 = Unsatisfied	10.81%	8
1 = Very Unsatisfied	13.51%	10
N/A = Not applicable	14.86%	11
<b>answered question</b>		<b>74</b>
<b>skipped question</b>		<b>15</b>

**21. How satisfied are you with the agency's Internet site, including the ease of use of the site, mobile access to the site, information on the location of the site and the agency, and information accessible through the site such as a listing of services and programs and whom to contact for further information or to complain?**

Answer Options	Response Percent	Response Count
5 = Very Satisfied	28.00%	21
4 = Satisfied	36.00%	27
3 = Neutral	13.33%	10
2 = Unsatisfied	4.00%	3
1 = Very Unsatisfied	9.33%	7
N/A = Not applicable	9.33%	7
<b>answered question</b>		<b>75</b>
<b>skipped question</b>		<b>14</b>



**22. How satisfied are you with the agency's complaint handling process, including whether it is easy to file a complaint and whether responses are timely?**

<b>Answer Options</b>	<b>Response Percent</b>	<b>Response Count</b>
5 = Very Satisfied	16.00%	12
4 = Satisfied	13.33%	10
3 = Neutral	10.67%	8
2 = Unsatisfied	5.33%	4
1 = Very Unsatisfied	9.33%	7
N/A = Not applicable	45.33%	34
<b>answered question</b>		<b>75</b>
<b>skipped question</b>		<b>14</b>

**23. How satisfied are you with the agency's ability to timely serve you, including the amount of time you wait for service in person?**

<b>Answer Options</b>	<b>Response Percent</b>	<b>Response Count</b>
5 = Very Satisfied	25.68%	19
4 = Satisfied	17.57%	13
3 = Neutral	12.16%	9
2 = Unsatisfied	8.11%	6
1 = Very Unsatisfied	9.46%	7
N/A = Not applicable	27.03%	20
<b>answered question</b>		<b>74</b>
<b>skipped question</b>		<b>15</b>

**24. How satisfied are you with any agency brochures or other printed information, including the accuracy of that information?**

<b>Answer Options</b>	<b>Response Percent</b>	<b>Response Count</b>
5 = Very Satisfied	27.03%	20
4 = Satisfied	28.38%	21
3 = Neutral	13.51%	10
2 = Unsatisfied	1.35%	1
1 = Very Unsatisfied	5.41%	4
N/A = Not applicable	24.32%	18
<b>answered question</b>		<b>74</b>
<b>skipped question</b>		<b>15</b>

<b>25. Please rate your overall satisfaction with the agency.</b>		
<b>Answer Options</b>	<b>Response Percent</b>	<b>Response Count</b>
5 = Very Satisfied	41.10%	30
4 = Satisfied	26.03%	19
3 = Neutral	12.33%	9
2 = Unsatisfied	4.11%	3
1 = Very Unsatisfied	10.96%	8
N/A = Not applicable	5.48%	4
	<b><i>answered question</i></b>	<b>73</b>
	<b><i>skipped question</i></b>	<b>16</b>

## **BON Customer Service Data Survey Analysis – LBB Questions**

Feedback from respondents from the 2022 BON survey in response to Legislative Budget Board questions was favorable towards the agency with the highest average scores for Question 25 relating to overall satisfaction with the agency with more than sixty-six percent of respondents indicating that they were very satisfied (41.10%) or satisfied (26.03%) with the agency. Areas identified where respondents indicated the least satisfaction were access to the BON office, which has been closed to the public during the pandemic. Respondents also indicated some dissatisfaction with the ease of filing complaints and speed of processing complaints. The agency will look at all feedback received to identify ways to make improvements or changes in those areas in which negative feedback was received.

## **2022 BON Stakeholder Focused Feedback Survey**

Beginning in late March 2022, the BON reached out to 335 stakeholders to solicit focused feedback concerning: issues, conditions, or problems related to the practice of nursing; the most significant needs and demands of the Board's stakeholders; strengths, weaknesses, opportunities, or obstacles affecting the BON's relationship with its stakeholders; to what extent stakeholders are satisfied with the services the Board provides; and what progress has been made by the BON toward achieving the Board's objectives and desired outcomes. Stakeholders contacted included all Deans/Directors of Nursing education programs in Texas, professional associations related to Nursing, current and past members of advisory committees acting on behalf of the Board, other state agencies that have a role in regulating nurses or nursing education programs, and other health occupation licensing boards. Eleven individuals and organizations responded to the Board's request for feedback. Questions and responses received are provided below.

### **1. What major issues, conditions, or problems related to the practice of nursing are relevant to the delivery of the BON's services?**

- alleviating the nursing shortage through piloting creative models and partnerships between academia and acute care facilities,
- In the current environment, the BON role is paramount in ensuring public safety,
- Removal of regulatory barriers restricting nurse practitioner practice in Texas,
- Enforcement of BON rules related to practice,
- The BON's turnaround, answering phones, emails, is extremely long (2).

- The BON has a major responsibility regarding safety and enforcement of policies and regulations.
- Maternity deserts in rural and urban areas and the overall lack of primary care providers have resulted in diminished health outcomes for vulnerable populations.
- There are not enough primary care providers to care for the patients in a timely manner. Therefore, access to care by enhancing the accessibility to trained providers such as APRN's in Texas is the greatest issue to advanced practice nursing.
- Removal of requirement for prescriptive authority agreement with physician delegation, and
- Shortage of clinical placements across both acute care, long-term care, and community-based settings, as many practices suspended their training and clinical rotations to minimize the spread of COVID-19.

## **2. What are the most significant needs and demands of the Board's stakeholders?**

- Alleviating the nursing shortage.
- Continuous regulation of practice to ensure safety.
- Following the current and relevant literature to promote patient safety.
- Many staff nurses and managers are stressed do not trust their HR departments and may be hesitant to seek out mental health consulting for fear of losing their license.
- Much discussion took place about the nurse who made errors and was convicted. There is ongoing concern this could happen to any nurse so this heightened case and how it was handled might obviously impact the BON.
- New nursing graduates need support in the first year of practice. There are elevated risks in their new working environment due to current staffing and healthcare challenges.
- We need the BON to assist with securing hands-on clinical rotation opportunities for pre-licensure students. The BON also needs to assist with securing precepted clinical opportunities for senior nursing students.
- The most significant need of the Board's APRN stakeholders is to have the backing of a Board who evaluates APRN's according to ability. Stakeholders significantly desire an approach to extirpate APRN's who are not qualified for advanced practice.
- Full practice authority for Nurse Practitioners.
- Growing demand for APRN scope of practice frequently asked questions (FAQs), case studies, resources, and educational information.
- Continued need to process APRN applications in a timely manner.
- Greater support of nurse mental health across all roles.
- promotion of safe workplace environments along with organizational initiatives to promote Diversity, Equity, and Inclusion in the nursing workforce and indeed within the Texas BON, committees, and staff; and
- Promotion of safe workplace environments along with organizational initiatives to promote diversity, equity, and inclusion in the nursing workforce and indeed within the Texas BON, committees, and staff.

## **3. What strengths, weaknesses, opportunities, or obstacles characterize the BON's relationships with its stakeholders?**

- Its relationships with organizational stakeholders and its ability to convene and forge collaborative projects with external organizations.
- BON's communication with stakeholders (2).
- The BON's strength is its people. It is very easy to contact resources to promote patient safety and follow the guidelines and rules.

- The Board of Nursing has a great relationship with the schools of nursing. Our education liaison is awesome and very helpful whenever I have a question.
- We would like to see a minor change in Rule 214 pertaining to vocational nursing education programs related to the students needing two consecutive days off. With the difficulty in placing students in quality clinical sites, sometimes scheduling would be easier if they were not required to have two consecutive days off.
- Many stakeholders (public/students) lack understanding of the BON's role.
- Nursing portal, new Affidavit of Graduation portal, license verification through NURSYS, Electronic Newsletter, allowing the board meetings to be in-person and virtual, allowing the Deans and Directors orientation to be in-person and virtual.
- The Board is committed to collaboration with stakeholders to increase access to health care services in Texas and to evaluate the route to APRN education.
- Goals of evaluating APRN scope of practice and education requirements are essential to build the reputability that is necessary for APRN's to advance scope of practice.
- Nurses are concerned about mental health, burnout, and topics surrounding DEI—all of which impact the delivery of safe nursing care. One way to potentially respond to these needs is to offer continuing education (CE) or partner with organizations to provide program/resources related to DEI, social determinants of health (SDOH), or health care provider resiliency; and
- APRN representation across the agency, including within the BON Board, committees, staff, investigators, and expert witnesses.

**4. To what extent are stakeholders satisfied with the services the Board provides and what progress has been made by the BON toward achieving the Board's objectives and desired outcomes?**

- We are very satisfied with the progress the Texas BON has made especially during the current state of healthcare at this time.
- I am satisfied with the services I have received from the BON. The education consultants are amazing. They are always available to answer my questions or discuss concerns that I may have with issues in my program.
- Very satisfied with the services the board provides. They are easy to contact and very knowledgeable as well as helpful.
- I am overall very satisfied.
- Stakeholders are generally satisfied with the services performed by the Board towards achieving objectives and outcomes.
- Many APRN *entrepreneurs* have created public dishonor through schemes to increase revenue. Hormone therapy, weight loss, and/or IV infusion clinics should have increased regulation. Ultimately, the reputations of many of the APRN's who perform these businesses are tarnishing reputation for those who offer excellent primary care services.
- The website is not as user friendly as it could be.

**Ideas/suggestions offered for consideration:**

- Create an electronic blue card to eliminate the challenges of the mailing system and timeliness of receiving the blue card for new students (4).
- The new platform doesn't allow schools the ability to see what an applicant is missing. This makes it nearly impossible to assist a student who is in the process of completing their application in preparation for the Affidavit of Graduation to be signed. In the past we were able to see the student's application information and identify any problems that may occur including selecting the wrong school code and

name issues. This helped alleviate many issues with the Affidavit of Graduation not being ready to be signed with the graduating cohort (2).

- Is there a platform for us to electronically submit the Verification of Completion Part 2 documents in bulk and verify individually that they have been received? It would be nice to be able to go online and check the status of receipt of the VOE Part 2 for our students.
- We are unable to print the AOG in a legible format.
- Dr. Judith Davidson, the profession's leading expert on nurses and suicides, has some interesting findings that would support eliminating the question about mental health from the re registration process. If doing so seems too challenging, perhaps the wording could be changed to something that includes physical and mental health limitations that prevents one from meeting the legal obligations of the nursing practice act. That way, the mental health issues are not a stigmatized condition.
- When I renewed my license in 2021, I had a very difficult time doing that because the print is so small. I could hardly read it. I believe it could be reformatted with larger print and consolidated rather than going across the wide page.
- Response time can be slow depending on the time of the year.

## Customer Service Measures

### Outcome Measures

<u>FY22 (Focused Feedback Survey)</u>	<u>FY22 (BON/LBB Survey)</u>	
83.3%	73.6%	Percentage of Surveyed Respondents expressing Overall Satisfaction with Services Received
3.28%	n/a*	Percentage of Surveyed Customer Respondents Identifying Ways to Improve Service Delivery

### Output Measures

<u>FY21</u>	<u>FY22</u>	
335 (F22 Survey)	n/a*	Number of Customers Surveyed
520,468	518,093	Number of Customers Served

### Efficiency Measures

<u>FY21</u>	<u>FY22</u>	
0	0	Cost Per Customer Surveyed

### Explanatory Measures

<u>FY21</u>	<u>FY22</u>	
520,468	518,093**	Number of Customers Served
8	8	Number of Customer Groups Inventoried

\* This number is not available as the survey was conducted online with information about the survey provided to all currently licensed nurses residing in Texas receiving the *BON Bulletin*, paid newsletter subscribers, those viewing the BON Facebook page via the agency, and anyone visiting the BON website in the period when the survey was taking place.

\*\*This number does not reflect third and fourth quarter data for FY22.

**BOARD OF NURSING FOR THE STATE OF TEXAS  
CUSTOMER-RELATED PERFORMANCE MEASURES**

**Outcome Measures**

**1) *Percentage of Surveyed Customer Respondents Expressing Overall Satisfaction with Services Rendered***

<b>Short Definition:</b>	<b>Total number of surveyed customer respondents who expressed an overall satisfaction with BON services, divided by the total number of surveyed customer respondents (during a specific reporting period).</b>
<b>Purpose/Importance:</b>	<b>This measure is one mechanism to determine the percentage of BON customers that are satisfied with the agency’s customer service.</b>
<b>Source/Collection of Data:</b>	<b>BON develops a survey to agency Customers. BON tabulates survey data from those who responded to the survey.</b>
<b>Method of Calculation:</b>	<b>For FY22, BON Stakeholder weighted average responses from survey results on website (Questions 12, 13, 14, and 15), agency newsletter (questions 8, and 9), and interactions with Customer Service Department (questions 4, 5, 6, and 7) averaged to produce aggregate stakeholder score of 73.64 for FY22. For calculation of the FY 22 Focused Feedback Survey score of 83.33, the score was calculated by the number of responses expressing satisfaction (5) on Question 4 divided by the number of responses expressing satisfaction or dissatisfaction (6). Neutral or non-responses were not considered in the calculations. A Likert Scale was utilized using five levels of response ranging from extremely satisfied to not satisfied.</b>
<b>Data Limitation:</b>	<b>The agency has no control over how many BON customers will respond to the survey.</b>  <b>It is the agency’s intention to gather survey data either through external or internal surveys.</b>
<b>Calculation Type:</b>	<b>Non-cumulative</b>
<b>New Measure:</b>	<b>No</b>

**Desired Performance:** Actual performance that is higher than targeted performance is desirable.

**2) *Percentage of Surveyed Customer Respondents Identifying Ways to Improve Service Delivery***

**Short Definition:** Total number of surveyed customer respondents who identified ways to improve service delivery, divided by the total number of surveyed respondents (during the specific reporting period).

**Purpose/Importance:** This measure is one mechanism to identify possible improvements to the agency's service delivery.

**Sources of Data:** The BON posts a survey online from April 1 to May 20, 2022. BON tabulates survey data from those who respond to the surveys. The Focused Feedback Survey was conducted by email with surveys sent to 335 stakeholders on April 1, 2022. Stakeholders were to respond to the survey no later than April 21, 2022.

**Method of Calculation:** **NUMERATOR** - For the 2022 BON online survey, the number of people who completed the focused feedback survey and offered written comments to survey questions.

**DENOMINATOR** - Total number of survey announcements that were emailed to BON customers. For the 2022 BON online survey, the number of April *Bulletins* mailed (419,497) is used. This performance measure is calculated by dividing the numerator by the denominator and multiplying by 100 to achieve a percentage.

**Data Limitation:** The agency has no control over how many BON customers will complete the online surveys. It is the agency's intention to conduct two surveys of customer service in each biennium if no other survey data is available. This performance measure does not lend itself to a quarterly or annual report.

**Calculation Type:** Non-cumulative

**New Measure:** No

**Desired Performance:** Based upon the assumption that more suggestions indicate poorer customer service, actual performance that is lower than targeted



performance is desirable. However, since this assumption may or may not be true, it is unclear as to whether achieving a smaller percentage is better.

#### Output Measures

##### (1) *Number of Customers Surveyed*

Short Definition:	Total number of BON customers surveyed in a reporting period.
Purpose/Importance:	This measure is an indication of the agency's efforts to collect information from stakeholders about the agency's customer service.
Source of Data:	The Board of Nursing develops an online survey which is posted on Survey Monkey website. Notification sent to BON licensees, and paid subscribers by agency newsletter, website, and in replies to webmaster inquiries.
Method of Calculation:	Quantity of April 2022 <i>Bulletins</i> mailed from United States Postal Service Form 3602-R used to determine quantity of nurses and paid subscribers receiving newsletters in April 2022.
Data Limitation:	Not every BON customer is surveyed (e.g., BON has no control over nurses who change addresses and forget to notify the Board of the address change in a timely manner). BON also has no control over the number of customers who will want BON services (e.g., number of people who want to obtain a nursing license, or who want to obtain information).  This performance measure does not lend itself to a quarterly or annual report.
Calculation Type:	Non-cumulative
New Measure:	No
Desired Performance:	Actual performance that is higher than targeted performance is desirable.

##### (2) *Number of Customers Served*

<b>Short Definition:</b>	<b>Total number of BON customers identified in a reporting period.</b>
<b>Purpose/Importance:</b>	<b>This measure is an indication of the agency's workload (i.e., the greater number of customers, the greater the agency's workload).</b>
<b>Source/Collection of Data:</b>	<b>The number of customers served is the actual number of board customers in each identified major group. These groups include but are not limited to: number of registered nurses, advanced practice registered nurses, licensed vocational nurses, schools of nursing, and nursing associations, legislators, and complainants.</b>
<b>Method of Calculation:</b>	<b>BON manually calculates the approximate number of customers served during a reporting period.</b>
<b>Data Limitation:</b>	<b>BON has no control over the number of customers who will want BON services (e.g., number of people who want to obtain a nursing license, who want to obtain information, or who want to file a complaint). The types of groups of customers are somewhat specific (targeted) as a result of the agency's enabling legislation.</b>  <b>It is the agency's intention to conduct two surveys on customer service in each biennium. This performance measure does not lend itself to a quarterly or annual report.</b>
<b>Calculation Type:</b>	<b>Non-cumulative.</b>
<b>New Measure:</b>	<b>No.</b>
<b>Desired Performance:</b>	<b>Actual performance that is higher than targeted performance is desirable, provided the agency has sufficient staff to handle the increased workload that results from having additional customers to serve.</b>

**Efficiency Measures**

**1) *Cost Per Customer Surveyed***

<b>Short Definition:</b>	<b>Total funds expended (including those encumbered) for the cost to survey the agency's customers.</b>
--------------------------	---

This total cost is divided by the number of customers surveyed. Denominator is the same number as the result of the performance measure entitled *Number of Customers Surveyed*.

<b>Purpose/Importance:</b>	This measure reflects the cost to the agency to conduct a customer service survey.
<b>Source/Collection of Data:</b>	Funds expended would include all direct costs attributable to the survey. These direct costs are identified in the agency's operating budget and where applicable, include percent of exempt and classified salaries according to estimated time spent in this function, consumable supplies, computer expenses, training, education, capitalized equipment, and other operating expenses.
<b>Method of Calculation:</b>	BON Accountant will keep manual record of costs.
<b>Data Limitation:</b>	BON has no control over the number of customers who will want BON services (e.g., number of people who want to obtain a nursing license, who want to obtain information, or who want to file a complaint). In addition, the types and groups of customers are somewhat specific (targeted) as a result of the agency's enabling legislation.  It is the agency's intention to conduct a survey of customer service in each even-numbered year of the biennium. This performance measure does not lend itself to a quarterly or annual report.
<b>Calculation Type:</b>	Non-cumulative
<b>New Measure:</b>	No
<b>Desired Performance:</b>	Actual performance that is lower than targeted performance is desirable.

#### **Explanatory Measures**

<b>(1) <i>Number of Customers Identified</i></b>	This explanatory measure is the same as the Output entitled <i>Number of Customers Served</i> .
--	---

**(2) *Number of Customer Groups Inventoried***

<b>Short Definition:</b>	<b>Total number of customer groups identified in a reporting period.</b>
<b>Purpose/Importance:</b>	<b>This measure reflects the diversity of agency customers and gives an indication of the agency's workload.</b>
<b>Source/Collection of Data:</b>	<b>The number of customer groups is determined by reviewing the external customer groups that might exist within each budget strategy listed in the agency Strategic Plan.</b>
<b>Method of Calculation:</b>	<b>BON keeps a manual inventory (manual list) of its customer groups.</b>
<b>Data Limitation:</b>	<b>The types and groups of customers are somewhat specific (targeted) as a result of the agency's enabling legislation.</b>  <b>It is the agency's intention to conduct two surveys on customer service in each biennium. This performance measure does not lend itself to a quarterly or annual report.</b>
<b>Calculation Type:</b>	<b>Non-cumulative</b>
<b>New Measure:</b>	<b>No</b>
<b>Desired Performance:</b>	<b>Actual performance that is higher than targeted performance is desirable, provided that the agency has sufficient staff to handle the increased workload that results from having additional groups of customers to serve.</b>

## Appendix A. Agency Information Technology Resource Planning

A technology initiative is defined as a current or planned activity that will improve, expand, or significantly change the way information technology (hardware, software, and services) is used to support one or more agency objectives. In the Technology Initiative Assessment and Alignment section, the BON has identified the initiatives that will be addressed over the next five years.

<b>1. Initiative Name: Technology Refresh - Continued replacement and upgrading of computer hardware/software in alignment with Technology Refresh plan.</b>	
<b>Initiative Description:</b> The BON replaces hardware and software in compliance with the Boards Technology Refresh Plan of 4 years. The refresh schedule staggers the replacement and yearly purchases of these systems to assist the BON in maintaining a consistent budget and workload. Analysis of services, software, costs and purchase versus lease is performed prior to each purchase. The Board is actively moving to Cloud Services to better support staff and the public.	
<b>Associated Project(s):</b> Name and status of current or planned project(s), if any, that support the technology initiative and that will be included in the agency’s Information Technology Detail.	
<b>Name</b>	<b>Status</b>
Desktop PC, Laptops, and Printer Lifecycle Replacement	In Progress
Server and Major Network component Upgrades and Lifecycle Replacement, including migrating to Cloud based server infrastructure.	In Progress
SANS Devices Upgrades and Lifecycle Replacement, including migrating to cloud-based services	In Progress
Office 365	In Progress
Cloud Services	In Progress
<b>Agency Objective(s):</b> All agency objectives.	
<b>Statewide Technology Priorities:</b> Identify the statewide technology priority or priorities the technology initiative aligns with, if any.	
<ul style="list-style-type: none"> <li>• Security and Privacy</li> <li>• Legacy Applications</li> <li>• Business Continuity</li> <li>• Enterprise Planning and Collaboration</li> </ul>	<ul style="list-style-type: none"> <li>• Virtualization</li> <li>• Data Management</li> <li>• Infrastructure</li> </ul>
<b>Anticipated Benefit(s):</b> The BON anticipates benefits in the following areas:	
<ul style="list-style-type: none"> <li>• Operational efficiencies (time, cost, productivity)</li> <li>• Citizen/customer satisfaction (service delivery quality, cycle time)</li> <li>• Security improvements</li> <li>• Foundation for future operational improvements</li> <li>• Compliance (required by State/Federal laws or regulations)</li> </ul>	

**Capabilities or Barriers:** The barriers in implementation of this project are cost, lack of IT staffing.

**2. Initiative Name: Security - Strengthen, maintain and enforce policies and infrastructure for data privacy and system security.**

**Initiative Description:** The BON has recognized that the landscape of IT security is changing rapidly and has been updating the 5 year plan every two years to respond to new security threats and new technologies. The BON is committed to staying on the front end of systems security through, investments, training, and application of best practice principles.

**Associated Project(s):** Name and status of current or planned project(s), if any, that support the technology initiative and that will be included in the agency's Information Technology Detail.

**Agency Objective(s):** All Agency Objectives.

**Statewide Technology Priorities:** Identify the statewide technology priority or priorities the technology initiative aligns with, if any.

- Security and Privacy
- Cyber Security
- Data Management

**Anticipated Benefit(s):** The BON anticipates benefits in the following areas:

- Operational efficiencies (time, cost, productivity)
- Citizen/customer satisfaction (service delivery quality, cycle time)
- Security improvements
- Foundation for future operational improvements
- Compliance (required by State/Federal laws or regulations)

**Capabilities or Barriers:** The barriers in implementation of this project are lack of funding, lack of IT staffing, training and overall costs associated with an ever-changing IT specialty.

**3. Initiative Name: Development of new capabilities for real time data sharing, updating and processing with other individual, State, and Federal entities.**

**Initiative Description:** The BON is investigating and reviewing every data sharing path within the agency and has created a position for Integration of new systems and new processes to import and export meaningful with are partners a real-time, weekly, monthly, and yearly basics, or as requested. New initiatives in this area include the effort to post de-identified raw data used for statistical reporting for public use and research and the ability to allow constitutes real time access to their own data and the ability to update their non-licensing base information.

**Associated Project(s):** Name and status of current or planned project(s), if any, that support the technology initiative and that will be included in the agency's Information Technology Detail.

**Agency Objective(s):** Licensing, Nursing Education, Data Sharing, APRN Compact, Transparency in Regulation, Security.

**Statewide Technology Priority(ies):** Identify the statewide technology priority or priorities the technology initiative aligns with, if any.

- Security and Privacy
- Cloud Services
- IT Workforce
- Data Management

<ul style="list-style-type: none"> <li>• Legacy Applications</li> <li>• Business Continuity</li> <li>• Enterprise Planning and Collaboration</li> </ul>	<ul style="list-style-type: none"> <li>• Mobility</li> <li>• Network</li> </ul>
<p><b>Anticipated Benefit(s):</b> Identify the benefits that are expected to be gained through the technology initiative. Types of benefits include:</p> <ul style="list-style-type: none"> <li>• Operational efficiencies (time, cost, productivity)</li> <li>• Citizen/customer satisfaction (service delivery quality, cycle time)</li> <li>• Security improvements</li> <li>• Foundation for future operational improvements</li> </ul>	
<p><b>Capabilities or Barriers:</b> The barriers in implementation of this project are lack of IT staffing.</p>	

<p><b>4. Initiative Name: Continuing Upgrade Licensing System - Expansion of existing and new licensee data, electronic file systems and shared data services.</b></p>	
<p><b>Initiative Description:</b> The BON has partnered with National Council of State Boards of Nursing to develop a new licensure application that is cloud based, called the Optimal Regulatory Board System (ORBS). This was implemented in June of 2020. Further development and integration work is ongoing to maximize the full potential of the application. This new system allows information to be gathered and updated among the other compact boards of Nursing in the USA in real time, as well as servicing licensee needs directly through the Texas Nurse Portal.</p>	
<p><b>Associated Project(s):</b> Name and status of current or planned project(s), if any, that support the technology initiative and that will be included in the agency's Information Technology Detail.</p>	
<b>Name</b>	<b>Status</b>
Optimal Regulatory Board System (ORBS), Back Office, Texas Nurse Portal	In Progress
<p><b>Agency Objective(s):</b> All agency objectives</p>	
<p><b>Statewide Technology Priorities:</b> Identify the statewide technology priority or priorities the technology initiative aligns with, if any.</p> <ul style="list-style-type: none"> <li>• Security and Privacy</li> <li>• Cloud Services</li> <li>• Legacy Applications</li> <li>• Business Continuity</li> <li>• Enterprise Planning and Collaboration</li> <li>• Data Management</li> <li>• Mobility</li> </ul>	
<p><b>Anticipated Benefits:</b> Identify the benefits that are expected to be gained through the technology initiative. Types of benefits include:</p> <ul style="list-style-type: none"> <li>• Operational efficiencies (time, cost, productivity)</li> <li>• Citizen/customer satisfaction (service delivery quality, cycle time)</li> <li>• Security improvements</li> <li>• Foundation for future operational improvements</li> </ul>	
<p><b>Capabilities or Barriers:</b> The barriers in implementation of this project are lack of IT staffing and the</p>	

complexity of business processes needed for integration.

**5. Initiative Name: Rapid information dissemination to constituents – expanding and updating services.**

**Initiative Description:** The BON plans to build upon its publicly available systems with a new website and information sources for the public and licensees.

**Associated Project(s):** Name and status of current or planned project(s), if any, that support the technology initiative and that will be included in the agency’s Information Technology Detail.

Name	Status
Website Re-write/Redesign	Planning

**Agency Objective(s):** All agency objectives.

**Statewide Technology Priorities:** Identify the statewide technology priority or priorities the technology initiative aligns with, if any.

- Cloud Services
- Business Continuity
- Network

**Anticipated Benefits:** Identify the benefits that are expected to be gained through the technology initiative. Types of benefits include:

- Operational efficiencies (time, cost, productivity)
- Citizen/customer satisfaction (service delivery quality, cycle time)
- Foundation for future operational improvements

**Capabilities or Barriers:** The barriers in implementation of this project are lack of IT staffing and overall costs.

**6. Initiative Name: Disaster Recovery and BON distributed service infrastructure.**

**Initiative Description:** The BON plans to continue building on its distributed computing infrastructure to be prepared for catastrophic failures at its Cloud Infrastructure and offsite datacenter. By continuing to upgrade and expand the functionalities of Cloud Services, ensuring that in the event of a disaster the BON can continue serving the public.

**Associated Project(s):** Name and status of current or planned project(s), if any, that support the technology initiative and that will be included in the agency’s Information Technology Detail.

Name	Status
Remote Accessibility infrastructures	In Production
Cloud based servers	In Progress



<b>Agency Objective(s):</b> All agency objectives.
<b>Statewide Technology Priorities:</b> Identify the statewide technology priority or priorities the technology initiative aligns with, if any.
<ul style="list-style-type: none"> <li>• Security and Privacy</li> <li>• Cloud Services</li> <li>• Legacy Applications</li> <li>• Business Continuity</li> <li>• Enterprise Planning and Collaboration</li> <li>• Virtualization</li> <li>• Data Management</li> <li>• Mobility</li> <li>• Network</li> </ul>
<b>Anticipated Benefit(s):</b> Identify the benefits that are expected to be gained through the technology initiative. Types of benefits include: <ul style="list-style-type: none"> <li>• Operational efficiencies (time, cost, productivity)</li> <li>• Security improvements</li> <li>• Foundation for future operational improvements</li> </ul>
<b>Capabilities or Barriers:</b> The barriers in implementation of this project are lack of IT staffing and additional infrastructural costs.

<b>7. Initiative Name: BON to be Paperless operations</b>	
<b>Initiative Description:</b> As industries have moved more towards paperless operations, there have been many benefits. The BON in conjunction with the adoption of ORBS has made the decision to make the agency paperless. The goal is to be able to complete the entire business process of initial licensure, renewal, and enforcement in a virtual paperless workflow system.	
<b>Associated Project(s):</b> Name and status of current or planned project(s), if any, that support the technology initiative and that will be included in the agency’s Information Technology Detail.	
<b>Name</b>	<b>Status</b>
Document Management System	In Progress
Document Management System Infrastructure	In Progress
<b>Agency Objective(s):</b> All agency objectives.	
<b>Statewide Technology Priorities:</b> Identify the statewide technology priority or priorities the technology initiative aligns with, if any.	
<ul style="list-style-type: none"> <li>• Security and Privacy</li> <li>• Cloud Services</li> <li>• Legacy Applications</li> <li>• Business Continuity</li> <li>• Enterprise Planning and Collaboration</li> <li>• IT Workforce</li> <li>• Virtualization</li> <li>• Data Management</li> <li>• Network</li> </ul>	
<b>Anticipated Benefit(s):</b> Identify the benefits that are expected to be gained through the technology initiative.	

Types of benefits include:

- Operational efficiencies (time, cost, productivity)
- Security improvements
- Cost Savings and space savings with little to no printing of paper documents
- Efficiently replicated to Disaster Recovery site to ensure no information lost in event of disaster
- Foundation for future operational improvements
- Integration into Licensing management system ORBS.

**Capabilities or Barriers:** The barriers in implementation of this project policy creation, workflow mapping, and overall infrastructural costs.