

## **Commitment to Excellence Project Results 2010**

### **Informational and discussion item only**

The following information concerning this project was prepared by staff to identify findings and implications of the 2010 Commitment to Ongoing Regulatory Excellence (CORE) Report.

### **Introduction and Purpose**

The purpose of the Commitment to Ongoing Regulatory Excellence (CORE) project is to provide an ongoing performance measurement and benchmarking system for nursing regulators. CORE provides and compares data that can be used for performance measurement and organizational enhancements by boards of nursing (BONs). By providing evidenced-based data nursing regulators are better able to meet their legislative mandate to protect the public.

Through CORE, BONs receive data collected and analyzed by NCSBN. The data may help BONs promote excellence in the provision of regulatory services with the overall goal of public protection.

This is the fourth CORE report on measurement outcomes related to five BON functions: (1) discipline; (2) practice; (3) education program approval; (4) licensure; and (5) administrative. Previous reports were issued for FY02, FY05 and FY07. To compare and identify trends, findings from previous years are reported with results from the FY09 surveys.

NCSBN surveyed BONs and random samples of groups of stakeholders that are directly affected by BON actions. These groups included: (1) employers; (2) education programs; and (3) nurses.

### *Attachments:*

Attachment A is the Texas CORE report; see Executive Summary, pages 13-14 for summary of aggregate sample (all participating states)

Attachment B is the specific comments by Texas respondents.

### **Summary:**

For discussion. No action required.

## Texas Report

The 2010 Survey pertains to FY 09. Data was often difficult to interpret because of small number of respondents or unknown reasons for the answers. In addition, some questions were new or the FY 07 data was not reported in the 2008 report. The most startling response from Texas nurses was to the question "how many days should it take to resolve a complaint?"; respondents answered 9 days with the aggregate response of 19 days. Also of interest were the employers' responses to the question of how well or poorly prepared new graduates were for basic nursing functions; respondents indicated that for such functions as documentation, recognizing abnormal lab values, creating care plans and supervising others, new graduates were an average of 2.5 on a scale of 1 - 4 (see page 67). Employers also felt the Board had too little involvement in nursing supply and demand issues (almost half of respondents) and too little involvement in legislative issues and workplace issues (a quarter of respondents).

### ***Open Ended Comments:***

There were 96 open ended responses from nurses; 9 responses from employers; and 23 responses from Education Programs.

Nurses (96) had a variety of comments with more frequent responses categorized as follows:

- Good job (16)
- Request that the BON furnish hard copy licenses (8)
- Complaint process is too long/does not protect the public (8)
- Request that the BON continue or expand educational offerings and locations (8)
- Request that the BON monitor or regulate nurse/patient ratios (7)
- Increase customer service staff to answer phones (4)

Employer (9) comments were few and no duplicate type of responses made.

Education Programs (23) comments were overall strongly positive:

- Good job (15)
- Improve student application/CBC processing during peak times (3)
- Concern about too many new programs / clinical availability (2)

### ***Survey Responses:***

#### **ABOVE AVERAGE COMPARED TO AGGREGATE DATA:**

##### ***Education***

Education programs perception were strongly positive on BON helpfulness in addressing inquiries regarding educational issues and effectiveness of review processes. Since 2005, the Board's ratings have increased in every reporting period on critical regulatory indicators for nursing education programs. For example, in FY 09 nursing education programs gave the BON very high ratings for effectively promoting public protection (3.96), promoting quality in education (3.83), 3

responsiveness to changes in healthcare (3.80) and responsive to innovation education (3.84): all of these scores have increased since 2005. Eighty four percent of the educational programs surveyed said they had made an inquiry to the board on an educational issue and found the response to be very helpful (3.79).

The educational consultants have assigned caseloads and very interactive relationships with their constituents. Additionally, the Board routinely conducts webinars and workshops for the education programs to ensure promulgation of the Board's rules and regulations.

### ***Practice***

Nurses (3.06) and employers (3.56) believed that the BON was responsive to changes in practice. There are many activities that may contribute to this rating. A few include:

- legislative initiatives such as SB 1857 whereas the Board is conducting a pilot program to evaluate LVN expansion of practice in a community setting
- responses to incoming questions which reflect knowledge of current practice issues
- Board workshops and webinars around the state
- recent activity in developing processes to implement Just Culture in the agency

In FY 09 most nurses said they understand (45%) or somewhat understand (47%) the differences between the BON and professional associations. This is an increase from 2007 when 26% indicated "understand" and 58% indicated "somewhat understand". This may be a reflection of the educational activities conducted by the Practice Consultants.

### ***Discipline***

Although the number of complaints in Texas is high, the number of licensees is among the highest in the nation.

The time (in days) to resolve complaints for RNs/LVNs was better than the aggregate and other independent boards. This is especially significant with the high volume of complaints and the high investigator workloads.

Nurses with open investigations per 1000 licensees was more than twice the number in the aggregate or independent boards. This may be attributable to the criminal background checks on renewal. Most other states do not do these background checks which are revealing much more criminal history than known to the board by asking the question on renewal forms.

In FY 09 the time from receipt of complaint to resolution through settlement and dismissal is much lower than the aggregate and other independent boards. The settlement process appears to be working well.

In FY 09 0.4 of nurses per 1000 licensees violated board orders; almost half of the rate for the aggregate population and half the rate for other independent boards, indicating that compliance is good (perhaps due to vigilant monitoring).

### ***Licensure***

In FY 09 the percentage of initial licenses processed online was 66% with only 24% of the aggregate and independent boards processing this group of applicants online. The BON processed 91% of renewals online with only 75% of the aggregate and 77% of the independent Boards processing renewals online. The BON has encouraged the online application process with good results.

In FY 09 nurses responded that they were above satisfied with the licensure process at a score higher than the aggregate or independent board groups.

In FY 09 employers reported being in their positions for 4 years, compared with 6 years for aggregate or independent boards. There may be slightly less experience among nurse employers in Texas which has implications for board resources designed for this group.

### ***Administrative***

Nurses thought the BON's website was "good" and ratings were higher than nurses in aggregate and other independent boards.

Overall employers thought the BON was "somewhat responsive" to changes in nursing practice. They were also "satisfied" with BON presentations they attended and "satisfied" with assistance provided by the BON about non-practice issues.

Employers found the BON's telephone system, newsletter and website to be "good".

Overall, employers thought the BON did "well" in protecting the public.

### **AVERAGE COMPARED TO AGGREGATE DATA:**

#### ***Practice***

Five percent of nurses surveyed had contacted the BON about practice issues and found the responses to be somewhat helpful (3.29). Seventy six percent indicated that the Board responded in a timely manner.

When developing a response to a nurse's question about the Board's rules and regulations, the nursing consultants develop expertise in evaluating possible underlying issues that may not be specifically addressed in the question. However, some nurses want explicit "yes" or "no" responses to their question and Board staff seldom respond in this manner. At times, this may be frustrating to the nurse. Board staff responses include not only education about pertinent Board rules and regulations, but also methods on how to utilize the Board's website for information that can help the nurse make an informed decision. Board staff response times to communications about practice issues are a priority and this is reflected in the high percentages of nurses who indicated that the Board responded in a timely manner.

#### ***Discipline***

From FY 07 to FY 09, there was an increase in the number of nurses involved in the disciplinary process (3% in FY 07 to 5.2% in FY 09). This is likely attributable to criminal background checks.

In FY 07 3% of nurses responded that the Board's disciplinary process was effective; this response fell slightly in FY 09, from 3.18 (on scale of 1 to 4 with 1 very ineffective and 4 very effective) to 2.76.

#### ***Licensure***

In FY 09, renewals were processed in 3 days which was average performance of the aggregate and independent boards.

87.8% of nurses were employed as a nurse in FY 09; this was comparable to the aggregate (85.1%) and independent boards (85.7%). The average number of years respondents were licensed as a nurse was 21; comparable to aggregate and other independent boards.

### ***Administrative***

Nurses' perceptions of the newsletter were "good" (average when compared to the aggregate and independent boards).

Overall nurses thought the BON's telephone system was "fair" which was comparable to other independent boards.

Overall nurses thought the BON did a "good" job in protecting the health and safety of the public; this was comparable to other independent boards.

Employers indicated that they knew how to report a suspected violation of the NPA or rules; this ranked average compared to aggregate.

### **BELOW AVERAGE COMPARED TO AGGREGATE DATA:**

#### ***Education***

Percentage of education programs that received sanctions or faced closure. Data in FY 09 reflects that 5.49% of nursing education programs that responded to the survey received sanctions, faced closure or had been subject to additional monitoring. This rate is lower than the 13.5% reflected in the national average. Texas also has higher NCLEX scores than the national average.

This rating may reflect the Board's diligence in ensuring new educational programs meet all of the Board's rules and requirements before approval. Additionally, Board staff also work closely with the educational programs on an ongoing basis to help them meet the standards that promote sound nursing education and patient safety.

#### ***Discipline***

The percent of cases still open at end of FY 09 was 37% in Texas while the aggregate group was 16% and the other independent boards was 20%, and the percent of cases still open at 25 or more months was almost twice the aggregate and other independent boards (11% compared with 6%). High case loads are likely reasons for the disparity with criminal history being the largest category.

The time to resolve APRN cases was longer than the aggregate in FY 09. These licensees tend to have complex practice issues, more resources to hire attorneys and delay resolution, and the Board often needs outside experts to review and testify in contested case hearings for this population.

In FY 09, the time to resolution for cases that had to go to hearing was over two times the aggregate group. Lawyers in Texas market to licensees and often encourage no cooperation or agreement to settle. There are various due process procedures that can cause delay as well.

#### ***Licensure***

The time to process licensure applications (115 days) was considerably higher than the aggregate (11) and the other independent boards (12). This may be due to differences in calculating the time: time from application to licensure or time from receipt of all required documents and fees to licensure. Texas does, however, have to verify licensure in every jurisdiction where the nurse has held a license and Texas also has a large number of foreign applicants. These factors can increase time to licensure due to volume and complexity.

### ***Strategies to address areas of concern***

1. Hire new staff to fill enforcement, APRN, and customer service positions which should improve performance after adequate period of training and orientation. Past experience in enforcement shows that positive outcomes are evident after a year of new investigator and new attorney employment.
2. Increase communication with employers through nurse employer organizations with the goal of providing information on licensure and enforcement and discerning needs of the employer community.
3. Complete Criminal Background Check renewal audits by 2013.
4. Reduce time to issue a license via the endorsement process. Solutions: explore retrieval of school information from other Nursys participating states, the school or through a private company called "Degree Verify". This verification process increases the time line to licensure.
5. Improve response time on telephone. With customer service slots filled, re-emphasize that answering the phone is top priority and hire temporary employees to complete other administrative duties such as stuffing certificates, copying microfiche, etc.
6. Consider expansion of BON Conferences and Webinars. For the long range, consider addition of another Nurse Consultant paid through appropriated receipts and have additional seminars in other Texas cities and/or online offerings.
7. Improve time to investigate and resolve cases. Hire additional contract investigators to assist in case reviews. Offer a specific amount of paid overtime and or allow accrual of compensatory time and one-half for enforcement employees.



**NATIONAL COUNCIL OF STATE BOARDS OF NURSING**

**Commitment to Ongoing Regulatory Excellence  
(CORE)**

**Results of FY09 Data**

**Texas Report**

**April 2011**

## Mission Statement

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# INTRODUCTION

The purpose of the Commitment to Ongoing Regulatory Excellence (CORE) project is to provide an ongoing performance measurement and benchmarking system for nursing regulators. CORE provides and compares data that can be used for performance measurement and organizational enhancements by boards of nursing (BONs). By providing evidenced-based data nursing regulators are better able to meet their legislative mandate to protect the public.

Through CORE, BONs receive data collected and analyzed by NCSBN. The data may help BONs promote excellence in the provision of regulatory services with the overall goal of public protection.

This is the fourth CORE report on measurement outcomes related to five BON functions: (1) discipline; (2) practice; (3) education program approval; (4) licensure; and (5) administrative. Previous reports were issued for FY02, FY05 and FY07. To compare and identify trends, findings from previous years are reported with results from the FY09 surveys.

NCSBN surveyed BONs and random samples of groups of stakeholders that are directly affected by BON actions. These groups included: (1) employers; (2) education programs; and (3) nurses.

For comparison purposes, each survey question is represented by a table that easily displays aggregate results, jurisdiction-specific results, and results from independent and umbrella BONs. Data from previous years is included in a separate table, when applicable, for trending purposes. A quick assessment of the BON's results when compared to the aggregate data is included in the title of each table with one of the following designations: Below Average, Average or Above Average.

Questions from all four surveys were classified into one of the aforementioned five BON functions. Selected scatter plots are included to aid in the comparison of data reflected in the tables. A description of how to interpret these scatter plots can be found in the Appendix A.

Appendix B lists all of the jurisdictions that have participated in the CORE survey by year. Responses to open-ended questions from the FY09 CORE surveys are listed in Appendix C. All four surveys are included in Appendices D through G as a reference.

The CORE Committee is pleased to present the data for the 2009 CORE Project to Member Boards and hopes the data will prove helpful as one method of performance measurement. NCSBN staff is available to assist individual states in further analysis and interpretation of their state's data.

## EXECUTIVE SUMMARY

The fiscal year 2009 (FY09) CORE data include confirmation of findings from previous years, updates to items in transition, and discoveries from newly asked questions. In the area of discipline, BONs typically complete about two-thirds of their total investigative caseload in a given year (BON Questions 6, 7, and 8) with only 20 percent of the cases remaining open for longer than a year (BON Question 4). On average, it takes BONs about six months to resolve an advanced practice registered nursing (APRN) case and seven months to resolve a registered nurse (RN) or licensed practical/vocational nurse (LPN/VN) case (BON Question 5). In FY09, BONs averaged opening investigations against nearly 1,400 individual nurses – a noticeable increase over the FY07 figure (BON Question 9). This is reflected in the increased percentage of nurses who indicated that they had been involved in their BON’s discipline process in the past two years (Nurses Question 21).

Despite the increased workload, public expectations of service are high. Employers indicated that they thought four weeks to be a reasonable time to resolve a complaint (Employers Question 28). Not surprisingly, just barely over half of the employers involved with discipline cases thought that their BONs resolved complaints in a timely manner (Employers Question 29). In order to address these concerns, BONs have delegated some activities to staff. Staffs in almost all BONs have the ability to triage complaints and many have the ability to close complaints without any BON action. In half of the BONs, staff has the ability to resolve cases without any BON action (BON Question 14). Overall, employers still rated their BON’s disciplinary process as “effective” in protecting the public (Employers Question 32).

In the area of practice, most nurses surveyed indicated that they somewhat understand the differences between the roles of the BON and professional associations (Nurses Question 8) and that they understand the scope of a nurse’s practice defined by the nurse practice act (Nurses Question 9). Six percent of the nurses surveyed contacted their BON about a practice issue and typically found the response to be helpful and timely (Nurses Questions 10, 10a, 11). A little over two-thirds of the nurses surveyed in FY09 indicated that they knew how to report a suspected violation of the nursing laws, which represents a slight increase over prior years (Nurses Question 24). Overall, nurses thought the BON did a good job in protecting the health and safety of the public (Nurses Question 25). Of the educational programs surveyed, 84 percent indicated that they had made an inquiry to the BON on an educational issue and found the response to be very helpful (Education Programs Questions 11 and 11a).

In the area of education, over half of the RNs and LPN/VNs surveyed indicated that their basic education had prepared them “very well” to provide safe and effective nursing care (Nurses Questions 6a and 6b). Employers also found new graduates well prepared to provide safe and effective nursing care (Employers Question 6). Education programs found their BON’s review process to be effective (Education Programs Question 3) and approval process to be adequate (Education Programs Question 4). Education programs thought the BON’s involvement in approving distance education programs to be increasingly essential (Education Programs Question 5). Nearly 14 percent of the education programs surveyed received sanctions (Education Programs Question 13) and most found the BON’s involvement in the process to be appropriate and timely (Education Programs Questions 15 and 16).

In the area of licensure, 70 percent of BONs surveyed require federal criminal background checks (BON Question 18) while 67 percent indicated that they perform audits of the process (BON Question 20). While many BONs conduct no part of the initial licensure process online, those that do tend to do almost all of the processing online (BON Question 21). It typically takes BONs 11 days to process licenses by initial examination and four days to process renewals. In general, nurses indicated that they were satisfied with the licensure process (Nurses Question 14).

In the administrative area, on average, 11.5 fulltime employees (FTEs) are directly involved with investigations (BON Question 15); two fulltime attorneys are hired for legal services (BON Question 16); 2.2 FTEs are directly involved with education program approval (BON Question 23); eight FTEs are directly involved with licensure (BON Question 24); and 2.1 FTEs are directly involved with practice (BON Question 25). Average BON expenditures total a little less than four million dollars (BON Question 17). A little over 10 percent of the nurses surveyed indicated that they had contacted the BON about a nonpractice issue (Nurses Question 13) and were satisfied with their communication with the BON (Nurses Question 13a). Overall, nurses surveyed thought the BON did a good job in protecting the health and safety of the public (Nurses Question 25).

Employers also thought the BON did well in protecting the health and safety of the public (Employers Question 33). Employers thought the BON provided adequate involvement in the areas of evolving scopes of practice and legislative issues. In the areas of nursing supply and demand and workplace issues, 30 percent of the employers thought the BON provided too little regulation (Employers Question 24). Education programs surveyed thought that the BON was “effective” in promoting public protection, promoting quality in education and responding to health care changes. Education programs thought BONs were “somewhat effective” in responding to innovation in education (Education Programs Question 1).

Please note that data for BON Question 12 (*Of the total complaints resolved in FY2009 what percent of the complaints were resolved through ...*) are not included in this report. The basis on which percentages were calculated by respondents was not consistent across the returned surveys. Some respondents based their percentages on the “Disciplinary Action” and “Non-Disciplinary Action” subgroups of response categories while others based their percentages on all of the possible subcategories. For some responses, it was not clear which method was used. As a result, the data for this question could not be reconciled in a meaningful way and analysis of the question was omitted.

Be sure to check the question sample size ( $n$ ) when drawing any conclusions about the data. The sample sizes for some of the questions are quite small across all jurisdictions. In addition, the number of respondents to the nursing programs survey is low for some jurisdictions, making the sample size for all of the questions in that survey small. Finally, relevant tables and graphs may have been left blank due to an overall lack of data or if responses were not obtained for a particular question on a survey.

# SUMMARY OF HOW TEXAS COMPARES TO AGGREGATE DATA

## Above Average in Comparison to Aggregate Data

### *Discipline*

BONs Question 2: Number of Complaints against Nurses – FY09

BONs Question 3: Number of Potential Violations – FY09

BONs Question 5: Estimated Time (in Days) to Resolve a Case by Type of Licensees – FY09 (RN/LPNs)

BONs Question 9: Number of Nurses with Investigations Opened Against Them – FY09

BONs Question 10: Nurses Initially Placed on Active Probation/Restriction/Monitoring – FY09

BONs Question 11: Number of Nurses Who Violated BON Orders – FY09

BONs Question 13: Time from Receipt to Resolution of Complaint – FY09 (Settlement, Referral, Dismissal)

### *Practice*

Nurses Question 8: Differences Between Roles of BONs and Professional Associations

Nurses Question 12: Responsiveness of BON to Changes in Practice

Nurses Question 23: Nurses' Understanding of State Laws About Reporting Misconduct

Nurses Question 24: Nurses' Knowledge of How to Report a Suspected Violation of Nursing Laws or Rules

Education Programs Question 11a: Education Programs' Perceptions on BON Helpfulness in Addressing

Inquiries Regarding Educational Issues

### *Education*

BONs Question 27: Number of Education Programs

Education Programs Question 3: Education Programs' Perceptions Regarding Effectiveness of Review Process

### *Licensure*

BONs Question 21: Percent of Initial Licenses Processed Online

Nurses Question 2a: Number of Years Since Employed as a Nurse if not Currently Employed in Nursing

Nurses Question 14: Nurses' Perceptions Regarding the Licensure Process

Employers Question 1a: Length of Employment (Number of Years in Current Position)

### *Administrative*

BONs Question 15: FTEs Involved with Investigations

BONs Question 16: Attorney FTEs

BONs Question 17: Expenditures by Functional Area – FY09

BONs Question 23: FTEs involved with Education Program Approval

BONs Question 24: FTEs Involved with Licensure

BONs Question 25: FTEs Involved with Practice

Nurses Question 19: Nurses' Perceptions Regarding BON Website

Employers Question 7: Responsiveness of BON to Changes in Practice

Employers Question 8: Employers' Perceptions Regarding BON Presentations

Employers Question 9: Contacted BON About Nonpractice Issues

Employers Question 10: Employers' Perceptions Regarding Telephone System

Employers Question 12: Employers' Perceptions Regarding BON Website

Employers Question 33: Employers' Perceptions Regarding Effectiveness in Protecting the Public

Education Programs Question 1: Education Programs' Perceptions Regarding Effectiveness of Regulation

Education Programs Question 6: Education Programs' Perceptions of BON in Addressing Emerging Issues

Education Programs Question 7: Education Programs' Perceptions of BON Timeliness in Addressing Emerging Issues

Education Programs Question 9: Education Programs' Perceptions Regarding BON Newsletter  
Education Programs Question 10: Education Programs' Perceptions Regarding BON Website  
Education Programs Question 12: Education Programs' Perceptions Regarding Familiarizing Program Directors with Rules, Regulations and Policies  
Education Programs Question 18: Education Programs' Perceptions on Assistance Provided by BON Staff

## **Average in Comparison to Aggregate Data**

### *Discipline*

BONs Questions 6, 7, and 8: Percent of Investigations Completed – FY09

Nurses Question 21: Involvement in Disciplinary Process

Employers Question 18: Nondisciplinary Remediation Activities for Nurses with Practice Issues

### *Practice*

Nurses Question 9: Understand the Scope of Practice as Defined by the Nurse Practice Act

Nurses Question 10: Contacted BON about Practice Issues

Nurses Question 10a: Helpfulness of the BON on Questions About Practice Issues

Nurses Question 11: Timeliness of BON on Questions about Practice Issues

Nurses Question 15: Who to Contact First with a Practice Question

Nurses Question 25: Nurses' Perceptions Regarding Effectiveness in Protecting the Public

Employers Question 15: Understand the Scope of Practice as Defined by the Nurse Practice Act

Employers Question 16: Who to Contact First with a Practice Question

Education Programs Question 11: Inquiry to BON on Educational Issues

### *Education*

Nurses Question 6a: RN Preparation for Practice

Nurses Question 6b: LPN/VN Preparation for Practice

Employers Question 6: Preparedness of New Graduates by Function – FY09

Education Programs Question 4: Education Programs' Perceptions of Approval Process

Education Programs Question 5: Education Programs' Perceptions of Distance Education Approval Process

### *Licensure*

BONs Question 22: Percent of Licensure Renewals Processed Online

BONs Question 26: Time to Process Licensure Applications – Renewals

Nurses Question 2: Percent Employed as a Nurse

Nurses Question 2b: Currently a Nursing Student

Nurses Question 4: Average Number of Years Licensed to Practice as a Nurse

### *Administrative*

Nurses Question 13: Contacted BON About Nonpractice Issues

Nurses Question 13a: Satisfaction with BON on Questions Regarding Nonpractice Issues

Nurses Question 17: Ratings of Existing Statutes and Administrative Rules/Regulations

Nurses Question 18: Nurses' Perceptions Regarding BON Newsletter

Nurses Question 20: Nurses' Perceptions Regarding Telephone System

Nurses Question 25: Nurses' Perceptions Regarding Effectiveness in Protecting the Public

Employers Question 11: Employers' Perceptions Regarding BON Newsletter

Employers Question 13: Employers' Knowledge of How to Report a Suspected Violation of Nursing Statutes and Rules

Employers Question 21: Ratings of Existing Statutes and Administrative Rules/Regulations

Employers Questions 22: Accessibility of BON Statutes/Rules

Employer Questions 23: Clarity of BON Statutes/Rules

Employers Question 24: Employers' Perceptions of BON's Involvement in Areas of Interest

Education Programs Question 2: Education Programs Reviewed by BON

Education Programs Question 8: Education Programs' Perceptions Regarding Telephone System

Education Programs Question 19: Ratings of Existing Statutes and Administrative Rules/Regulations

## **Below Average in Comparison to Aggregate Data**

### *Discipline*

BONs Question 4: Percentage of Cases Still Open at End of FY09

BONs Question 5: Estimated Time (in Days) to Resolve a Case by Type of Licensees – FY09 (APRNs)

BONs Question 13: Time from Receipt to Resolution of Complaint – FY09 (Hearing)

Nurses Question 22: Effectiveness of the Disciplinary Process in Protecting the Public

Employers Question 27: Involvement in Disciplinary Process

### *Practice*

Employers Question 17: Understanding of Obligation to Report a Suspected Violation of Nursing Statutes and Rules

Employers Question 25: Contacted BON about Practice Issues

### *Education*

Education Programs Question 13: Percent of Education Programs that Received Sanctions or Faced Closure in the Past Two Years

### *Licensure*

BONs Question 26: Time to Process Licensure Applications – Initial Licensure

Employers Question 3: Number of FTE Nursing Personnel Employed

Employers Question 5: Number of New Graduates Hired by License Type

### *Administrative*

Nurses Question 7: Attend BON Meeting

# METHOD

## Response Rates

A total of 59 BONs were mailed a CORE survey. Nonresponders were mailed a second follow-up survey. The overall response rate from BONs was 56 percent, which represents a slight decrease from FY07. There were slight decreases in the nurses, employers and education programs response rates, but increases in the overall participation among nurses, employers and education programs due to the increased number of surveys mailed (Table 1).

Table 1: Response Rates

	Number Mailed				Number Returned				Response Rate			
	2002	2005	2007	2009	2002	2005	2007	2009	2002	2005	2007	2009
Boards of Nursing	60	59	59	59	39	34	34	33	65%	58%	58%	56%
Nurses	13,996	28,000	57,521	96,023	2,681	5,061	16,521	24,904	19%	18%	29%	26%
Employers	1,378	2,464	3,056	6,677	443	571	893	1,264	32%	23%	36%	19%
Education Programs	1,060	1,412	2,928	3,563	619	612	1,583	1,757	58%	43%	54%	49%

Table 2: Response Rates of Texas Stakeholder Survey Tools

	Number Mailed				Number Returned				Response Rate			
	2002	2005	2007	2009	2002	2005	2007	2009	2002	2005	2007	2009
Nurses	800	1,000	1,200	1,500	154	14	299	413	19%	14%	25%	28%
Employers	100	100	100	200	28	18	33	20	28%	18%	33%	10%
Education Programs	90	184	199	194	57	76	103	91	44%	41%	52%	47%

A total of 58 BONs (98 percent) participated in the FY09 study. Participation of a jurisdiction was defined as having a survey completed and returned by the BON or one of the three stakeholder groups in that jurisdiction. Appendix A lists all BONs participating in the FY02, FY05, FY07 and FY09 data collection efforts, and the surveys completed by each BON and stakeholder group.

## DISCIPLINE – BONs

The median number of complaints against nurses received by BONs in FY09 was 1,169 (BON Question 2). Of those complaints, a median number of 978 (84 percent) were initially determined to be potential violations within the BON’s jurisdiction (BON Question 3).

Table 3: BONs Question 2: Number of Complaints against Nurses – FY09  
(Texas Compared to Aggregate: ABOVE AVERAGE)

<i>How many complaints against nurses did the board receive in FY2009?</i>	<b>Aggregate (All BONs)</b>	<b>Texas (Independent)</b>	<b>Independent BONs</b>	<b>Umbrella BONs</b>
n	28	1	21	7
Average (mean)	1,855	13,511	1,987	1,460
Standard Deviation	2,759	–	3,124	1,214
Median	1,169	13,511	1,086	1,370
Range	79 to 13,511	13,511 to 13,511	79 to 13,511	215 to 3,921

Table 4: BONs Question 3: Number of Potential Violations – FY09  
(Texas Compared to Aggregate: ABOVE AVERAGE)

<i>Of all captured complaints counted in question 2, how many were initially determined to be potential violations within the jurisdiction of the board?</i>	<b>Aggregate (All BONs)</b>	<b>Texas (Independent)</b>	<b>Independent BONs</b>	<b>Umbrella BONs</b>
n	29	1	22	7
Average (mean)	1,680	13,365	1,911	957
Standard Deviation	2,685	–	3,085	770
Median	978	13,365	1,032	581
Range	79 to 13,365	13,365 to 13,365	79 to 13,365	215 to 2,282

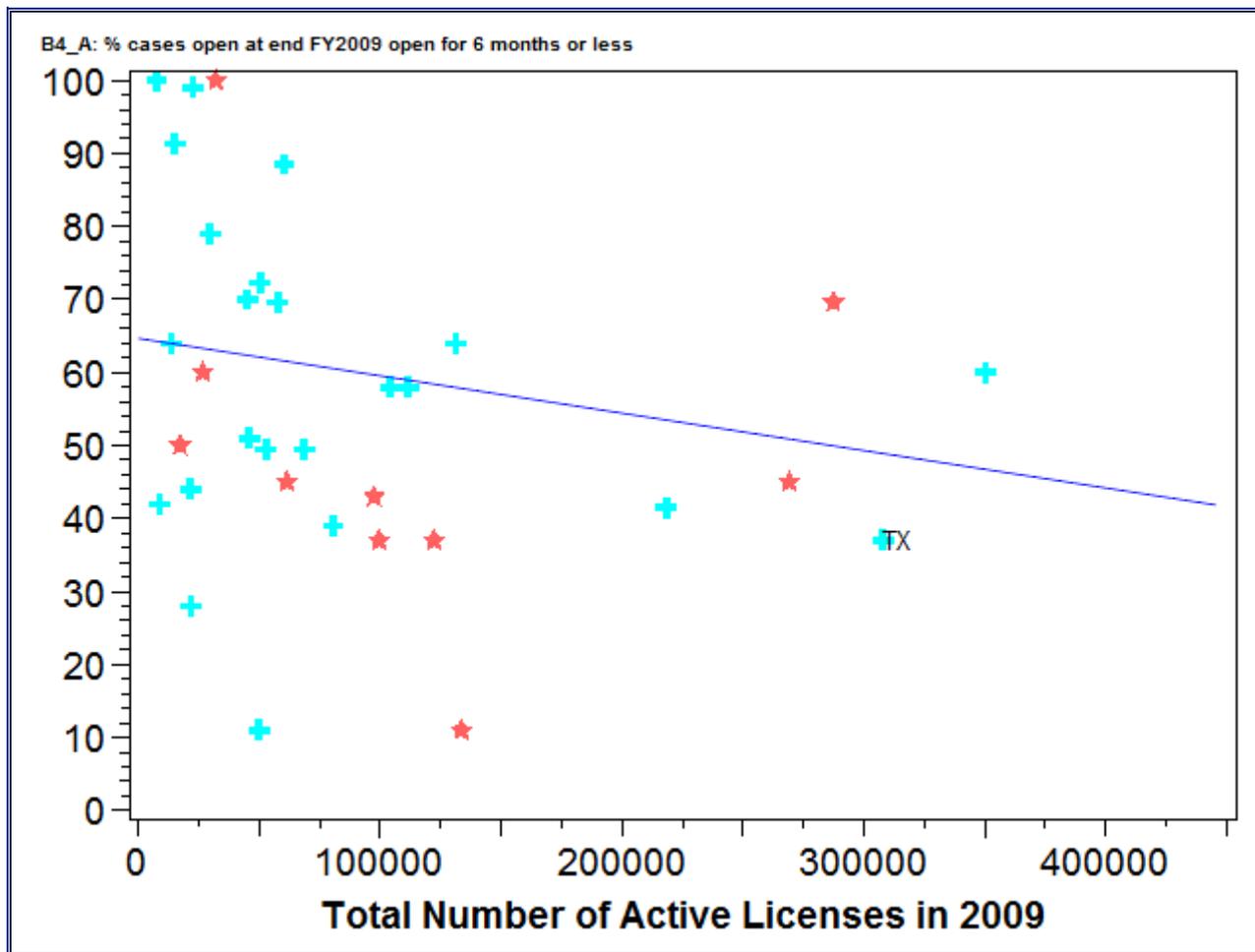
Over half of the cases open at the end of FY09 were open for six months or less; 80 percent of the cases were open for a year or less (BON Question 4).

Table 5: BONs Question 4: Percentage of Cases Still Open at End of FY09  
(Texas Compared to Aggregate: BELOW AVERAGE)

<i>What percentage of the cases still open at the end of FY2009 had been open for ...</i>	<b>Aggregate (All BONs)</b>		<b>Texas (Independent)</b>	<b>Independent BONs</b>		<b>Umbrella BONs</b>	
	<b>n</b>	<b>mean (std)</b>	<b>mean</b>	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>
6 months or less	24	60% (24%)	37%	19	59% (25%)	5	62% (24%)
7 to 12 months	25	24% (19%)	26%	19	21% (13%)	6	33% (31%)
13 to 24 months	24	14% (12%)	26%	19	14% (12%)	5	12% (10%)
25 months or more	26	6% (9%)	11%	20	6% (9%)	6	6% (6%)

FY09 CORE Data – Survey of BONs  
Texas Data

Figure 1: Question 4: Percentage of Year-end Cases Open for Six Months or Less



\*Umbrella BONs  
+Independent BONs

On average, it takes BONs about six months to resolve an APRN case and seven months to resolve an RN or LPN/VN case (BON Question 5).

Table 6: BONs Question 5: Estimated Time (in Days) to Resolve a Case by Type of Licensees – FY07

<i>On average, in FY2007, how many days (please estimate if data not readily available) does it take for a case to be resolved from the date the complaint was received to the date of final resolution?</i>	<b>Aggregate (All BONs)</b>		<b>Texas (Independent)</b>	<b>Independent BONs</b>		<b>Umbrella BONs</b>	
	<b>n</b>	<b>mean</b>	<b>mean</b>	<b>n</b>	<b>mean</b>	<b>n</b>	<b>mean</b>
Number of days for RN/LPNs	18	222	–	14	224	4	217
Number of days for APRNs	13	178	–	9	157	4	223

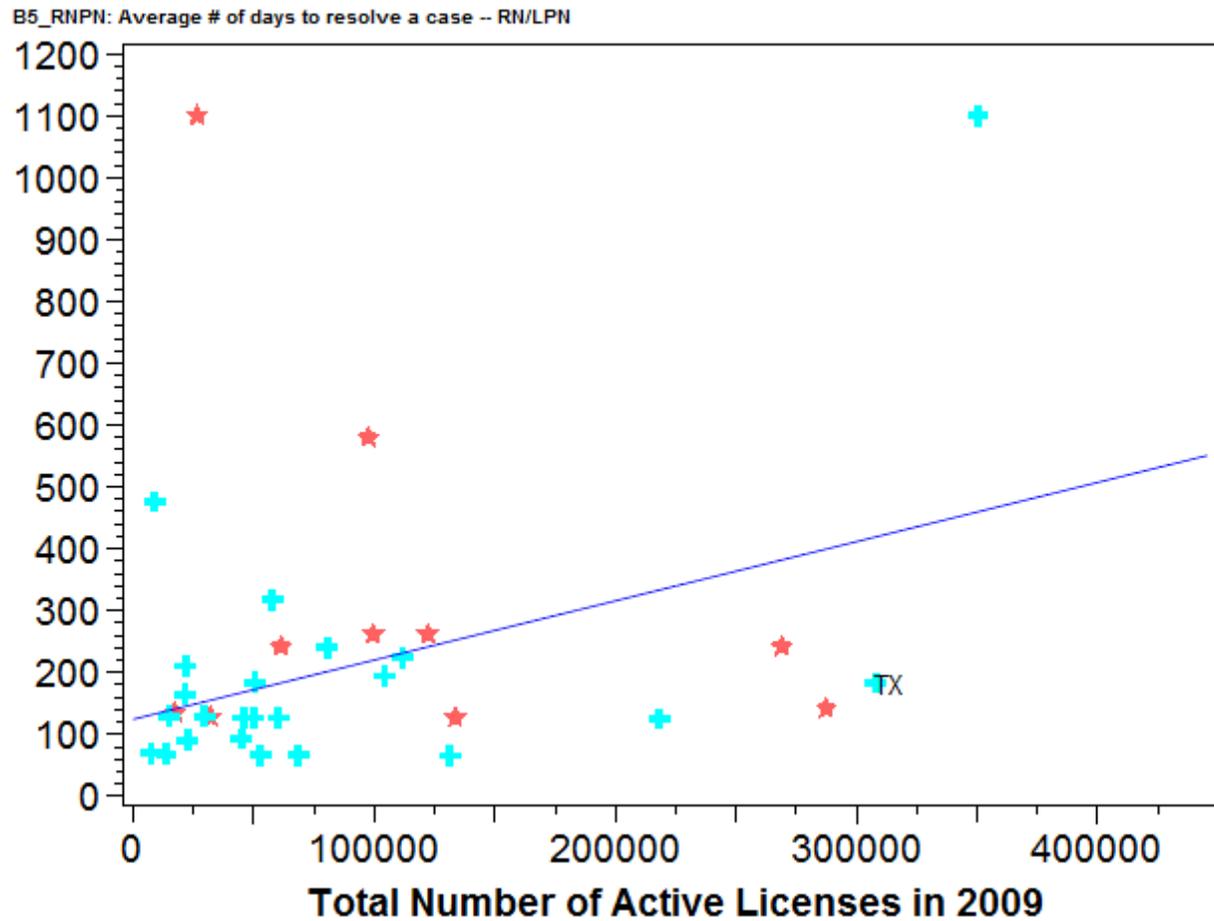
Table 7: BONs Question 5: Estimated Time (in Days) to Resolve a Case by Type of Licensees – FY09

(Texas Compared to Aggregate: RN/LPNs – ABOVE AVERAGE; APRNs – BELOW AVERAGE)

<i>Of all cases resolved in FY2009, what was the average length of time (in days) between the receipt of the complaint to the resolution of the complaint?</i>	<b>Aggregate (All BONs)</b>		<b>Texas (Independent)</b>	<b>Independent BONs</b>		<b>Umbrella BONs</b>	
	<b>n</b>	<b>mean (std)</b>	<b>mean</b>	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>
Number of days for RN/LPNs	28	214 (210)	183	22	205 (221)	6	248 (173)
Number of days for APRNs	19	180 (118)	213	14	155 (62)	5	248 (206)

FY09 CORE Data – Survey of BONs  
Texas Data

Figure 2: Question 5: Average Number of Days to Resolve a Case for RNs and LPNs by Total Number of Licenses



\*Umbrella BONs  
+Independent BONs

On average, BONs complete about two-thirds of their investigative caseload in a given year (BON Questions 6, 7, and 8).

Table 8: BONs Questions 6, 7, and 8: Percent of Investigations Completed – FY07

<i>What was the total number of cases open for <u>investigation</u> on the last day of FY2006?</i>				
<i>What was the total number of new cases assigned to investigators during FY2007?</i>	<b>Aggregate (All BONs)</b>	<b>Texas (Independent)</b>	<b>Independent BONs</b>	<b>Umbrella BONs</b>
<i>What was the total number of <u>investigations</u> open on the last day of FY2007?</i>				
n	31	–	22	9
Average (mean)	66%	–	65%	68%
Range	23% to 92%	–	26% to 87%	35% to 92%

Table 9: BONs Questions 6, 7, and 8: Percent of Investigations Completed – FY09  
(Texas Compared to Aggregate: AVERAGE)

<i>What was the total number of cases open on the last day of FY2008?</i>				
<i>What was the total number of new cases assigned to investigators during FY2009?</i>	<b>Aggregate (All BONs)</b>	<b>Texas (Independent)</b>	<b>Independent BONs</b>	<b>Umbrella BONs</b>
<i>What was the total number of cases open on the last day of FY2009?</i>				
n	30	1	22	8
Average (mean)	62%	61%	64%	56%
Standard Deviation	24%	–	21%	31%
Range	6% to 98%	61% to 61%	14% to 92%	6% to 98%

On average, BONs opened nearly 1,400 investigations against individual nurses in FY09 – a rate of 15 per thousand licenses. Both the total number and the rate represent noticeable increases over the similar figures for FY07 (BON Question 9).

Table 10: BONs Question 9: Number of Nurses with Investigations Opened Against Them – FY07

<i>How many individual nurses had investigations opened against them during fiscal year FY2007?</i>	<b>Aggregate (All BONs)</b>		<b>Texas (Independent)</b>	<b>Independent BONs</b>		<b>Umbrella BONs</b>	
	<b>n</b>	<b>mean</b>	<b>mean</b>	<b>n</b>	<b>mean</b>	<b>n</b>	<b>mean</b>
Number of nurses with open investigations	33	744	–	21	786	11	725
Number of nurses with open investigations per 1,000 licensees	27	11	–	17	14	10	5
Number of RN/LPNs	28	626	–	17	608	10	712
Number of APRNs	26	33	–	15	18	10	59

Table 11: BONs Question 9: Number of Nurses with Investigations Opened Against Them – FY09  
(Texas Compared to Aggregate: ABOVE AVERAGE)

<i>How many individual nurses had investigations opened against them during fiscal year FY2009?</i>	<b>Aggregate (All BONs)</b>		<b>Texas (Independent)</b>	<b>Independent BONs</b>		<b>Umbrella BONs</b>	
	<b>n</b>	<b>mean (std)</b>	<b>mean</b>	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>
Number of nurses with open investigations	29	1,392 (3,085)	16,916	20	1,730 (3,666)	9	639 (685)
Number of nurses with open investigations per 1,000 licensees	19	15 (14)	55	15	17 (14)	4	8 (10)
Number of RN/LPNs	19	1,446 (3,752)	16,793	15	1,715 (4,204)	4	434 (500)
Number of APRNs	15	32 (36)	123	12	30 (36)	3	37 (40)

On average, BONs placed 12 individuals per month on active probation/restriction/monitoring in FY09 (BON Question 10).

Table 12: BONs Question 10: Nurses Initially Placed on Active Probation/Restriction/Monitoring – FY07

<i>How many individuals were initially placed on active probation/restriction/monitoring for even one day during FY2007 (excluding alternative programs)?</i>	<b>Aggregate (All BONs)</b>			<b>Texas (Independent)</b>		<b>Independent BONs</b>			<b>Umbrella BONs</b>		
	<b>n</b>	<b>mean</b>	<b>monthly average</b>	<b>mean</b>	<b>monthly average</b>	<b>n</b>	<b>mean</b>	<b>monthly average</b>	<b>n</b>	<b>mean</b>	<b>monthly average</b>
Number of nurses on active Probation/Restriction/Monitoring	34	143	12	–	–	23	97	8	11	241	20
Number of RN/LPNs	26	130	11	–	–	16	70	6	9	256	21
Number of APRNs	24	4	0.3	–	–	14	1	0.1	9	8	0.7

Table 13: BONs Question 10: Nurses Initially Placed on Active Probation/Restriction/Monitoring – FY09  
 (Texas Compared to Aggregate: ABOVE AVERAGE)

<i>How many individuals were initially placed on active probation/restriction/monitoring for even one day during FY2009 (excluding alternative programs)?</i>	<b>Aggregate (All BONs)</b>			<b>Texas (Independent)</b>		<b>Independent BONs</b>			<b>Umbrella BONs</b>		
	<b>n</b>	<b>mean (std)</b>	<b>monthly average</b>	<b>mean</b>	<b>monthly average</b>	<b>n</b>	<b>mean (std)</b>	<b>monthly average</b>	<b>n</b>	<b>mean (std)</b>	<b>monthly average</b>
Number of nurses on active Probation/Restriction/Monitoring	29	143 (244)	12	1,174	98	22	155 (274)	13	7	108 (114)	9
Number of RN/LPNs	18	122 (266)	11	1,140	95	15	142 (288)	6	3	23 (23)	2
Number of APRNs	13	4 (9)	0.3	34	3	11	4 (10)	0.3	2	4 (6)	0.3

On average, 45 nurses violated BON orders in FY09 – (BON Question 11).

Table 14: BONs Question 11: Number of Nurses Who Violated BON Orders – FY07

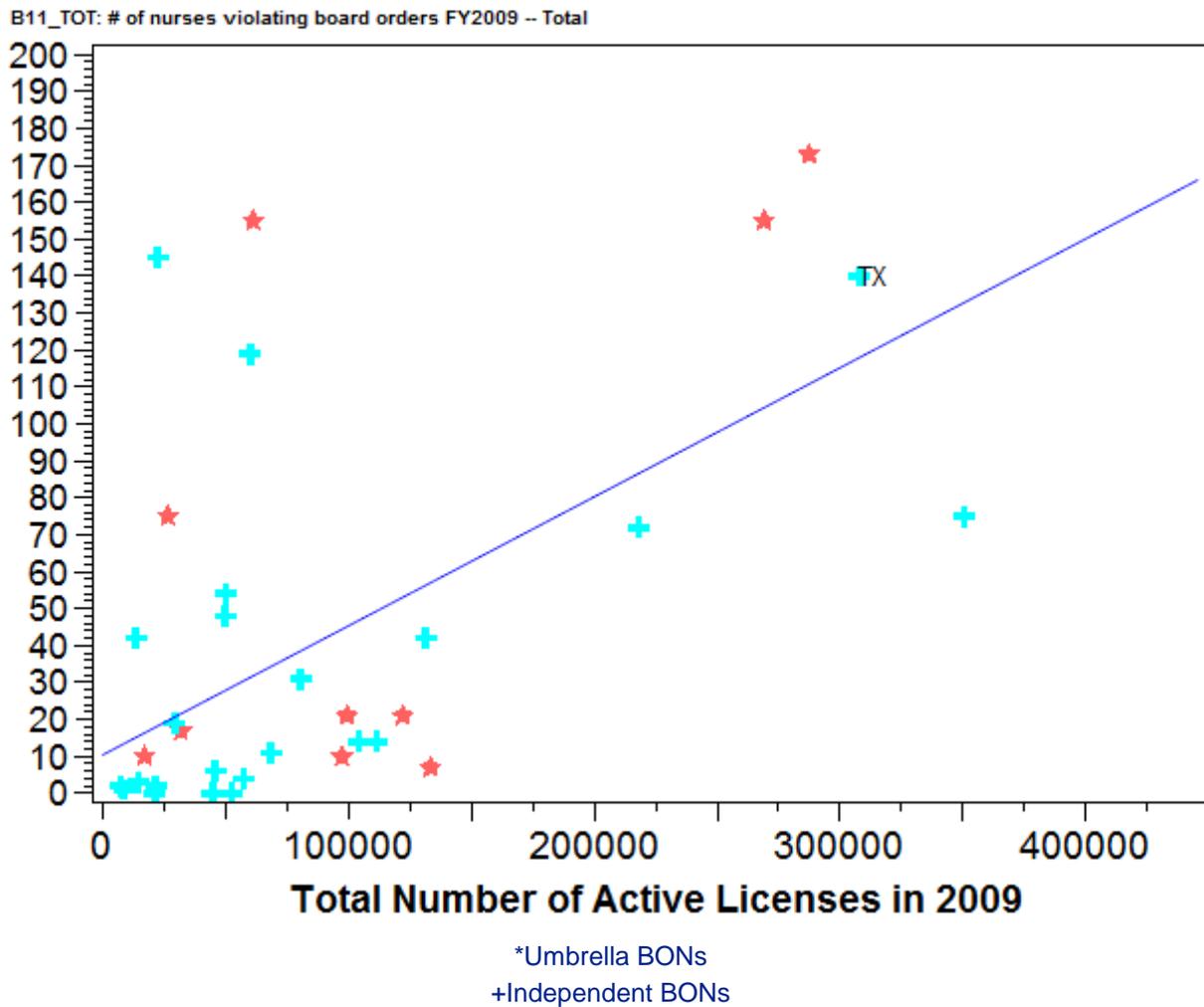
<i>How many nurses violated Board orders in FY2007? (excluding alternative programs)</i>	<b>Aggregate (All BONs)</b>		<b>Texas (Independent)</b>	<b>Independent BONs</b>		<b>Umbrella BONs</b>	
	<b>n</b>	<b>mean</b>	<b>mean</b>	<b>n</b>	<b>mean</b>	<b>n</b>	<b>mean</b>
Number of nurses who violated Board orders	31	38	–	20	31	10	54
Violation rate per 1,000 licenses	25	0.5	–	17	0.6	8	0.4
Number for RN/LPNs	26	32	–	17	28	8	44
Number for APRNs	24	0.7	–	15	0.5	8	1.0

Table 15: BONs Question 11: Number of Nurses Who Violated BON Orders – FY09  
(Texas Compared to Aggregate: ABOVE AVERAGE)

<i>Of the cases with a disciplinary action taken in FY2009, how many were the result of a violation of a board order or consent agreement?</i>	<b>Aggregate (All BONs)</b>		<b>Texas (Independent)</b>	<b>Independent BONs</b>		<b>Umbrella BONs</b>	
	<b>n</b>	<b>mean (std)</b>	<b>mean</b>	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>
Number of nurses who violated Board orders	26	45 (55)	140	19	41 (48)	7	56 (74)
Violation rate per 1,000 licenses	15	0.7 (0.3)	0.4	12	0.8 (0.3)	3	0.2 (0.3)
Number for RN/LPNs	15	31 (47)	134	12	37 (51)	3	10 (10)
Number for APRNs	11	0.8 (1.8)	6	9	0.8 (0.0)	2	1.0 (1.4)

FY09 CORE Data – Survey of BONs  
Texas Data

Figure 3: Question 11: Total Number of Nurses Violating BON Orders in FY09



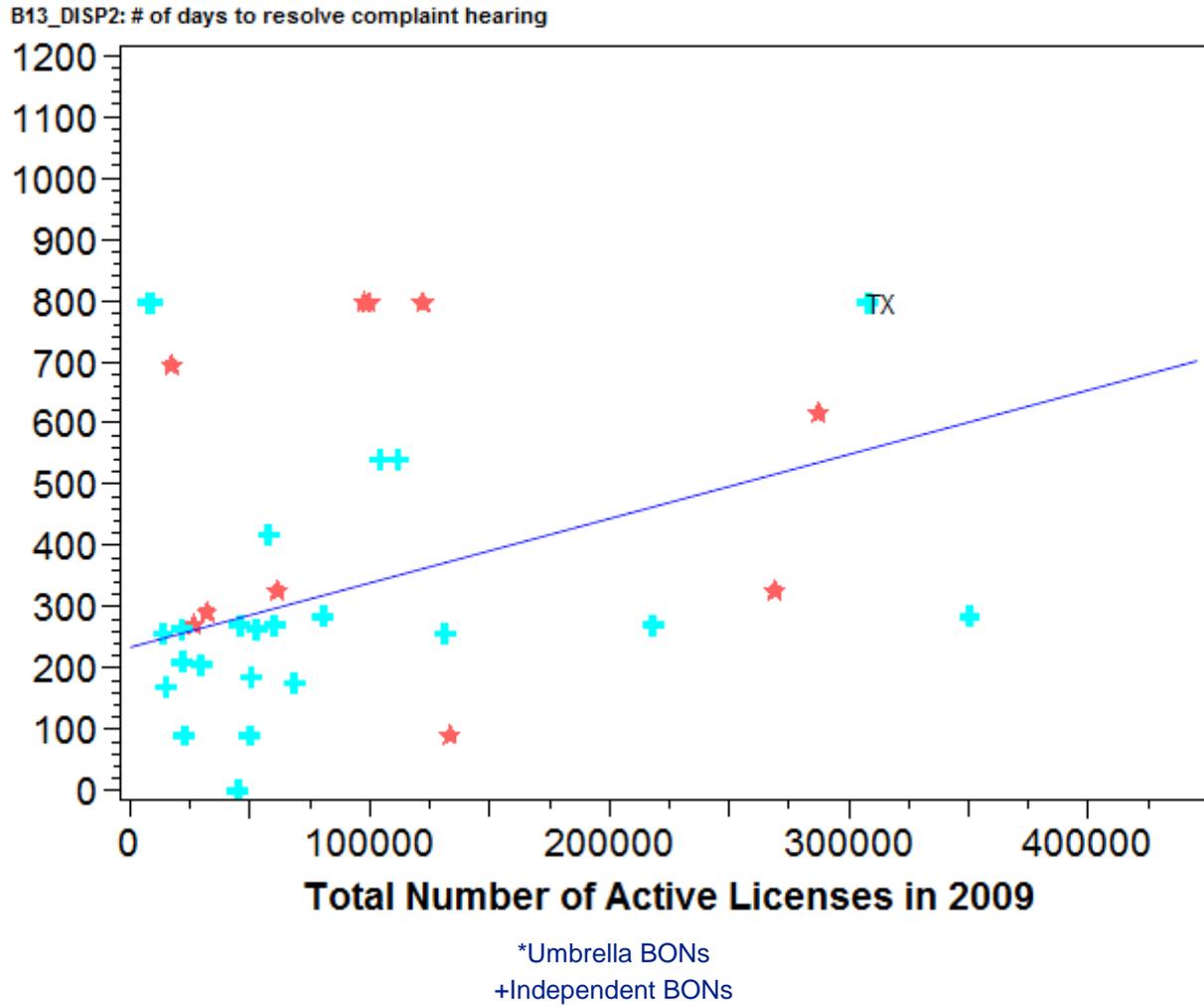
The amount of time it takes from the receipt to the resolution of a complaint varies by the type of resolution. Referrals to alternative-to-discipline programs in cases involving substance use are resolved in three months, while cases reaching a hearing take almost a year to resolve (BON Question 13).

Table 16: BONs Question 13: Time from Receipt to Resolution of Complaint – FY09  
(Texas Compared to Aggregate: Settlement, Referral, and Dismissal – ABOVE AVERAGE; Hearing – BELOW AVERAGE)

<i>Of the cases with disciplinary actions, what is the average amount of time (in days) it takes from the receipt of the complaint to the resolution of the complaint?</i>	<b>Aggregate (All BONs)</b>		<b>Texas (Independent)</b>	<b>Independent BONs</b>		<b>Umbrella BONs</b>	
	<b>n</b>	<b>mean (std)</b>	<b>mean</b>	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>
<b>Disciplinary Action</b>							
Settlement	18	220 (97)	73	13	205 (92)	5	260 (106)
Hearing	18	337 (197)	796	13	297 (189)	5	439 (200)
Other	11	291 (299)	–	7	294 (380)	4	286 (100)
<b>Non-Disciplinary Action</b>							
Referral to alternative-to-discipline (substance use)	15	101 (77)	27	11	96 (74)	4	117 (95)
Referral to alternative-to-discipline (non-substance use)	6	210 (193)	–	3	304 (245)	3	117 (84)
Dismissal	17	177 (243)	122	13	201 (274)	4	103 (78)
Other	13	257 (261)	176	11	260 (286)	2	240 (37)

FY09 CORE Data – Survey of BONs  
Texas Data

Figure 4: Question 13: Number of Days to Resolve a Complaint Through Hearing



Staffs in almost all BONs have the authority to issue licenses and triage complaints without BON action. Most staffs also have the authority to close complaints without BON action. In half of the BONs, staff has authority to resolve discipline cases without BON action (BON Question 14).

Table 17: BONs Question 14: Staff Authority

<i>Does staff have delegated authority by board policy to:</i>	<b>Aggregate (All BONs)</b>		<b>Texas (Independent)</b>	<b>Independent BONs</b>		<b>Umbrella BONs</b>	
	<b>n</b>	<b># “Yes” (% “Yes”)</b>	<b># “Yes”</b>	<b>n</b>	<b># “Yes” (% “Yes”)</b>	<b>n</b>	<b># “Yes” (% “Yes”)</b>
Triage/prioritize complaints without any board action	33	30 (91%)	1	23	23 (100%)	10	8 (80%)
Close complaints without any board action	33	23 (70%)	1	23	17 (74%)	10	6 (60%)
Issue licenses without any board action	33	32 (97%)	1	23	22 (96%)	10	10 (100%)
Resolve discipline cases without any board action	32	17 (53%)	1	23	12 (52%)	9	5 (56%)

## DISCIPLINE – Nurses

About four percent of the nurses surveyed were involved with their BON’s discipline process during the past two years (Nurses Question 21).

Table 18: Nurses Question 21: Involvement in Disciplinary Process  
(Texas Compared to Aggregate: AVERAGE)

<i>During the past 24 months, have you been involved in any aspect of the Board of Nursing's discipline process?</i>	Aggregate (All BONs)		Texas (Independent)		Independent BONs		Umbrella BONs	
	n	% “Yes”	n	% “Yes”	n	% “Yes”	n	% “Yes”
FY02	2,638	3.9%	–	–	2,186	4.0%	452	3.3%
FY05	5,021	2.1%	140	0.7%	3,911	2.5%	1110	1.6%
FY07	16,345	3.2%	297	3.0%	8,711	3.4%	7634	3.2%
FY09	24,802	3.8%	413	5.1%	13,744	4.2%	11,058	3.4%

Nurses involved with their BON’s discipline process during the past two years rated their BON’s disciplinary process as “effective” in protecting the public. Nurses from independent BON states rated their BON’s disciplinary process slightly higher than those from umbrella BON states (Nurses Question 22).

Table 19: Nurses Question 22: Effectiveness of the Disciplinary Process in Protecting the Public  
(Texas Compared to Aggregate: BELOW AVERAGE)

<i>Overall, how effective or ineffective was the Board's disciplinary (complaint/investigation/resolution) process in protecting the public? (Scale: 4 = very effective; 3= effective; 2= ineffective; 1= very ineffective)</i>	Aggregate (All BONs)		Texas (Independent)		Independent BONs		Umbrella BONs	
	n	mean (std)	n	mean (std)	n	mean (std)	n	mean (std)
FY07	7756	3.09 (0.45)	176	3.18 (0.45)	4333	3.09 (0.44)	3423	3.07 (0.45)
FY09	793	2.95 (0.83)	21	2.76 (0.62)	491	2.98 (0.82)	300	2.91 (0.83)

## DISCIPLINE – Employers

Most employers surveyed indicated that their state’s BON has nondisciplinary remediation activities (Employers Question 18).

Table 20: Employers Question 18: Nondisciplinary Remediation Activities for Nurses with Practice Issues  
(Texas Compared to Aggregate: AVERAGE)

<i>Does your state Board have non-disciplinary remediation activities for nurses who have practice issues? (Exclude programs that address alcohol, drug or mental health problems)</i>	<b>Aggregate (All BONs)</b>		<b>Texas (Independent)</b>		<b>Independent BONs</b>		<b>Umbrella BONs</b>	
	<b>n</b>	<b>% “Yes”</b>	<b>n</b>	<b>% “Yes”</b>	<b>n</b>	<b>% “Yes”</b>	<b>n</b>	<b>% “Yes”</b>
FY07	467	91.0%	16	87.5%	326	91.7%	141	86.5 %
FY09	602	92.5%	13	92.3%	349	93.7%	253	90.9%

About 40 percent of the employers surveyed indicated that they had been involved in their state BON’s discipline process during the last two years (Employers Question 18).

Table 21: Employers Question 27: Involvement in Disciplinary Process  
(Texas Compared to Aggregate: BELOW AVERAGE)

<i>Have you been involved in any aspect of this state’s Board of Nursing complaint handling/discipline process over the past 24 months?</i>	<b>Aggregate (All BONs)</b>		<b>Texas (Independent)</b>		<b>Independent BONs</b>		<b>Umbrella BONs</b>	
	<b>n</b>	<b>% “Yes”</b>	<b>n</b>	<b>% “Yes”</b>	<b>n</b>	<b>% “Yes”</b>	<b>n</b>	<b>% “Yes”</b>
FY02	476	36.1%	–	–	408	36.5%	68	33.8%
FY05	567	39.9%	18	55.5%	455	40.2%	112	38.4%
FY07	892	47.6%	33	45.4%	628	47.6%	264	47.3%
FY09	1,255	38.1%	20	15.0%	740	38.7%	515	37.3%

Employers indicated that they thought 19 business days (about four weeks) was reasonable time to resolve a complaint (Employers Question 28).

Table 22: Employers Question 28: Reasonable Number of Business Days to Resolve a Complaint – FY09  
(Texas Compared to Aggregate: Not Enough Data)

<i>What do you think is a reasonable number of business days to take to resolve (take action, dismiss) any complaint?</i>	<b>Aggregate (All BONs)</b>		<b>Texas (Independent)</b>		<b>Independent BONs</b>		<b>Umbrella BONs</b>	
	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>
Number of Business Days	440	19 (19)	3	9 (10)	260	19 (19)	180	20 (18)

Overall, a little over half of the employers indicated that they thought their BON resolved complaints in a timely manner. However, while two-thirds of the employers from independent BON states thought their BON was timely, only one-third of the employers from umbrella BON states thought so of their BON (Employers Question 29).

Table 23: Employers Question 29: Employers’ Perceptions of Timeliness of the Complaint Resolution  
(Texas Compared to Aggregate: Not Enough Data)

<i>Overall, did the Board process resolve the complaint(s) in a timely manner?</i>	<b>Aggregate (All BONs)</b>		<b>Texas (Independent)</b>		<b>Independent BONs</b>		<b>Umbrella BONs</b>	
	<b>n</b>	<b>% “Yes”</b>	<b>n</b>	<b>% “Yes”</b>	<b>n</b>	<b>% “Yes”</b>	<b>n</b>	<b>% “Yes”</b>
FY09	344	54.9%	2	50.0%	203	68.5%	141	35.5%

Overall, employers thought their BON’s disciplinary process was “well” communicated and BON staff did “well” in providing assistance during the process. On both aspects of the disciplinary process, employers from independent BON states rated their BON higher than those from umbrella BON states (Employers Question 30 and 31).

Table 24: Employers Questions 30 and 31: Aspects of the Disciplinary Process  
(Texas Compared to Aggregate: Not Enough Data)

<i>Overall, how well or poorly was the Board of Nursing’s disciplinary process communicated to you?</i>	<b>Aggregate (All BONs)</b>		<b>Texas (Independent)</b>		<b>Independent BONs</b>		<b>Umbrella BONs</b>	
	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>
<i>How well or poorly did the Board staff provide you with assistance you needed during the disciplinary process?</i> (Scale: 4 = very well; 3 = well; 2 = poorly; 1 = very poorly)								
FY02								
Communication of disciplinary process	156	2.93 (0.83)	–	–	137	2.95 (0.83)	19	2.79 (0.79)
Provided needed assistance during the process	145	3.33 (0.64)	–	–	127	3.36 (0.64)	18	3.11 (0.58)
FY05								
Communication of disciplinary process	211	2.90 (0.82)	7	3.00 (0.58)	168	2.95 (0.84)	43	2.72 (0.70)
Provided needed assistance during the process	202	3.14 (0.66)	7	3.14 (0.69)	161	3.20 (0.64)	41	2.93 (0.69)
FY07								
Communication of disciplinary process	413	2.70 (0.88)	15	2.73 (0.70)	292	2.75 (0.88)	121	2.60 (0.86)
Provided needed assistance during the process	387	2.87 (0.78)	15	2.73 (0.59)	280	2.89 (0.77)	107	2.81 (0.78)
FY09								
Communication of disciplinary process	462	2.65 (0.90)	2	2.50 (0.71)	275	2.79 (0.85)	187	2.45 (0.93)
Provided needed assistance during the process	456	2.78 (0.82)	2	2.50 (0.71)	273	2.93 (0.78)	183	2.55 (0.82)

Employers involved with their BON’s discipline process during the past two years rated their BON’s disciplinary process as “effective” in protecting the public. Employers from independent BON states rated their BON’s disciplinary process higher than those from umbrella BON states (Employers Question 32).

Table 25: Employers Question 32: Effectiveness of the Disciplinary Process in Protecting the Public  
(Texas Compared to Aggregate: Not Enough Data)

<i>Overall, how effective or ineffective is the Board’s disciplinary (complaint/investigation/resolution) process in protecting the public? (Scale: 4 = very effective; 3= effective; 2= ineffective; 1= very ineffective)</i>	<b>Aggregate (All BONs)</b>		<b>Texas (Independent)</b>		<b>Independent BONs</b>		<b>Umbrella BONs</b>	
	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>
FY02	138	3.04 (0.72)	–	–	121	3.07 (0.73)	17	2.82 (0.64)
FY05	207	2.97 (0.74)	7	3.14 (0.38)	165	3.06 (0.70)	42	2.62 (0.76)
FY07	412	2.74 (0.77)	15	2.60 (0.74)	294	2.80 (0.78)	118	2.58 (0.72)
FY09	459	2.76 (0.80)	2	3.50 (0.71)	274	2.91 (0.79)	185	2.53 (0.77)

## PRACTICE – Nurses

Of the nurses surveyed 85 percent indicated that they “understand” or “somewhat understand” the differences between the roles of the BON and professional associations (Nurses Question 8).

Table 26: Nurses Question 8: Differences Between Roles of BONs and Professional Associations – FY07

<i>To what extent do you believe that you understand the differences between the roles of the Board of Nursing and professional associations?</i>	<b>Aggregate (All BONs)</b>	<b>Texas (Independent)</b>	<b>Independent BONs</b>	<b>Umbrella BONs</b>
n	14,021	271	7,671	6,350
Understand	25.7%	25.8%	26.1%	25.2%
Somewhat Understand	60.5%	58.3%	61.0%	60.1%
Somewhat Misunderstand	10.6%	12.5%	10.5%	10.9%
Misunderstand	3.0%	3.3%	2.5%	3.8%

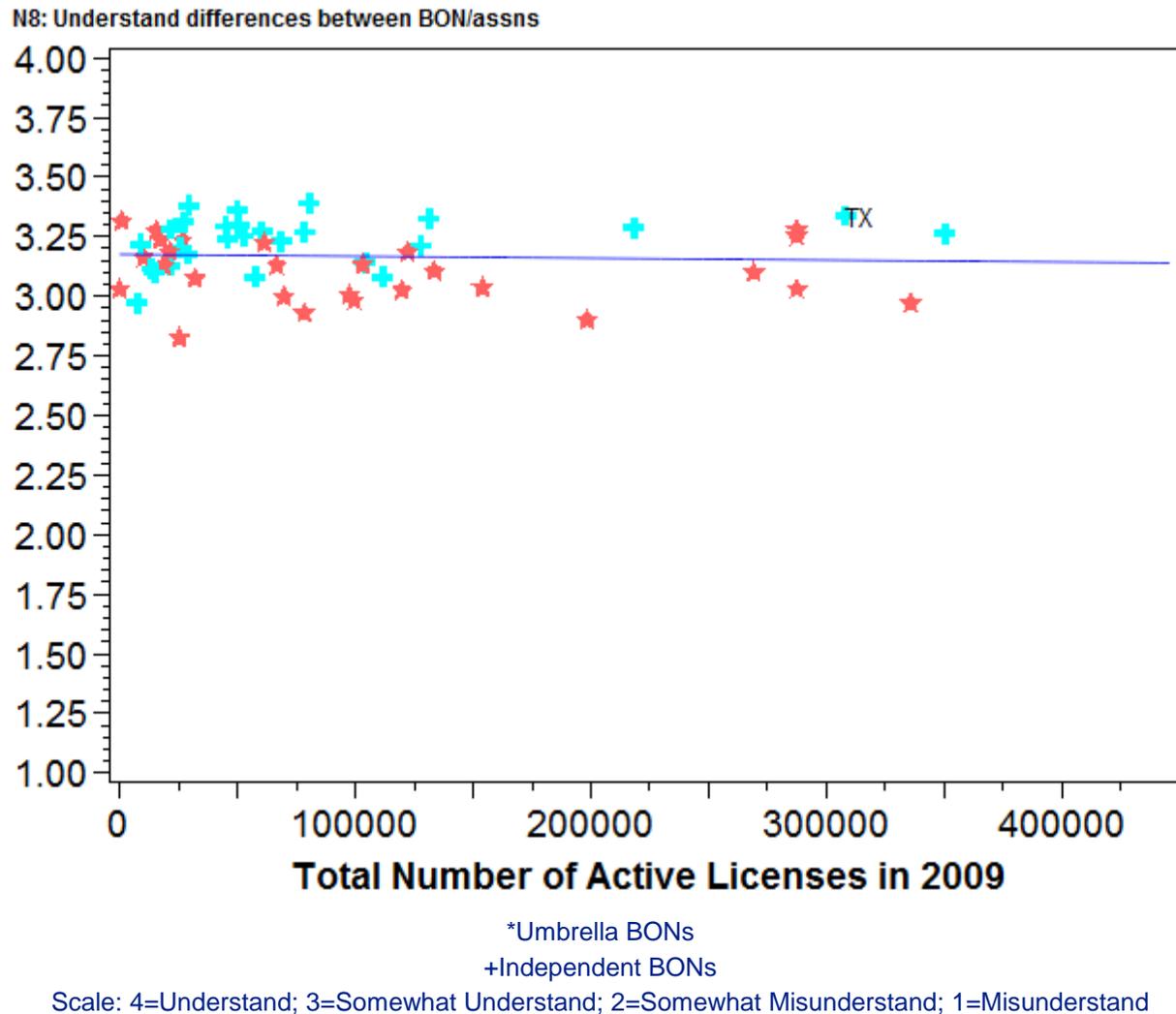
Table 27: Nurses Question 8: Differences Between Roles of BONs and Professional Associations – FY09

(Texas Compared to Aggregate: ABOVE AVERAGE)

<i>To what extent do you understand or misunderstand the differences between the roles of the Board of Nursing and professional associations?</i>	<b>Aggregate (All BONs)</b>	<b>Texas (Independent)</b>	<b>Independent BONs</b>	<b>Umbrella BONs</b>
n	24,733	409	13,700	11,033
Understand	36.3%	45.0%	38.8%	33.2%
Somewhat Understand	49.3%	47.2%	48.9%	49.7%
Somewhat Misunderstand	9.3%	4.4%	8.1%	10.8%
Misunderstand	5.1%	3.4%	4.1%	6.3%

FY09 CORE Data – Survey of Nurses  
Texas Data

Figure 5: Question 8: Understand Differences Between BON and Professional Associations



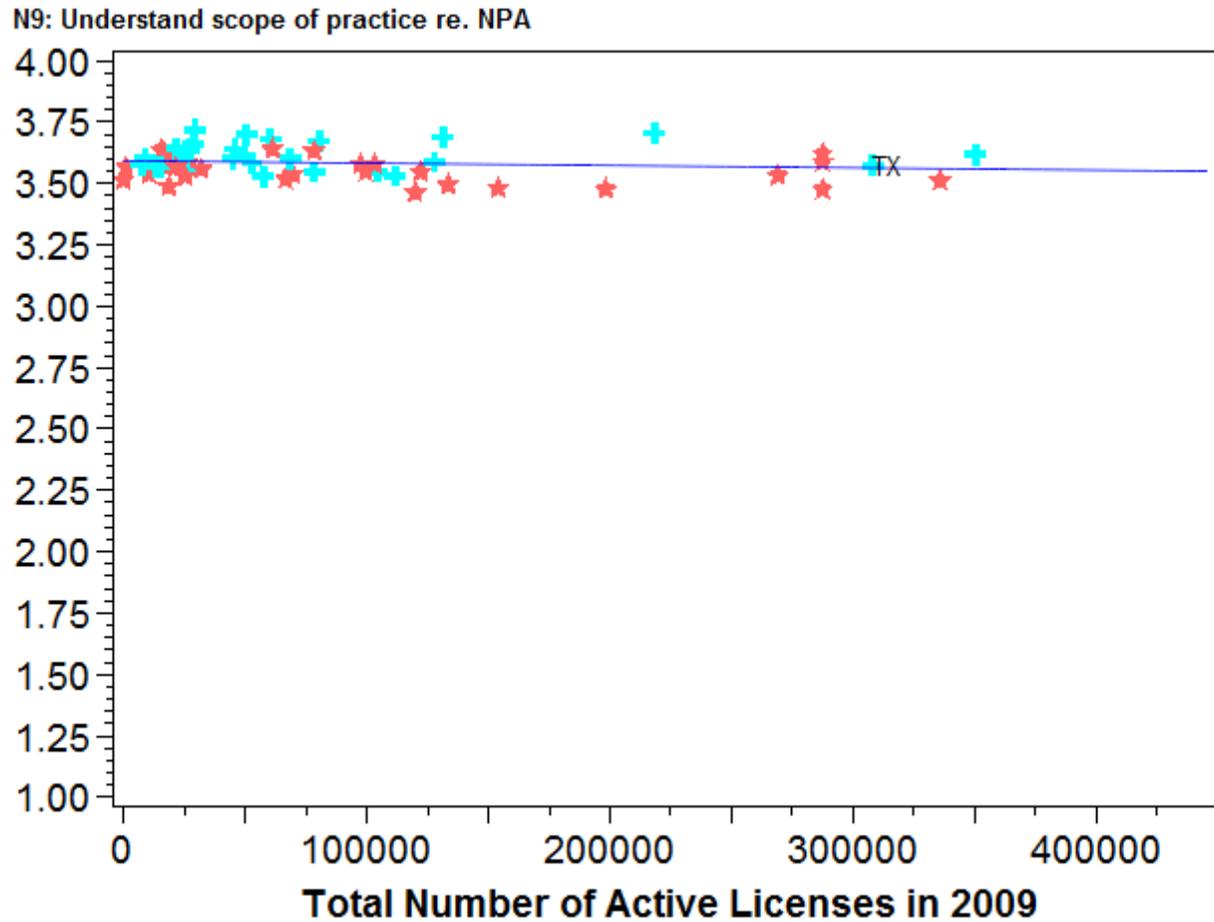
Nurses surveyed indicated that they “understand” the scope of a nurse’s practice as defined by the nurse practice act (Nurses Question 9).

Table 28: Nurses Question 9: Understand the Scope of Practice as Defined by the Nurse Practice Act  
(Texas Compared to Aggregate: AVERAGE)

<i>How well do you understand the scope/legal limits of a nurse’s practice, as defined by the Nurse Practice Act and related state statutes and rules? (Scale: 4 = understand; 3 = somewhat understand; 2 = misunderstand; 1 = misunderstand)</i>	<b>Aggregate (All BONs)</b>		<b>Texas (Independent)</b>		<b>Independent BONs</b>		<b>Umbrella BONs</b>	
	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>
FY02	2,622	3.42 (0.58)	–	–	2,174	3.43 (0.58)	448	3.38 (0.59)
FY05	4,909	3.32 (0.58)	139	3.27 (0.58)	3,832	3.33 (0.57)	1,077	3.28 (0.62)
FY07	16,370	3.50 (0.64)	295	3.54 (0.54)	8,724	3.53 (0.65)	7,643	3.47 (0.64)
FY09	24,799	3.58 (0.59)	411	3.57 (0.56)	13,735	3.61 (0.57)	11,064	3.55 (0.61)

FY09 CORE Data – Survey of Nurses  
Texas Data

Figure 6: Question 9: Understand Scope of Practice



\*Umbrella BONs  
+Independent BONs

Scale: 4=Understand; 3=Somewhat Understand; 2=Somewhat Misunderstand; 1=Misunderstand

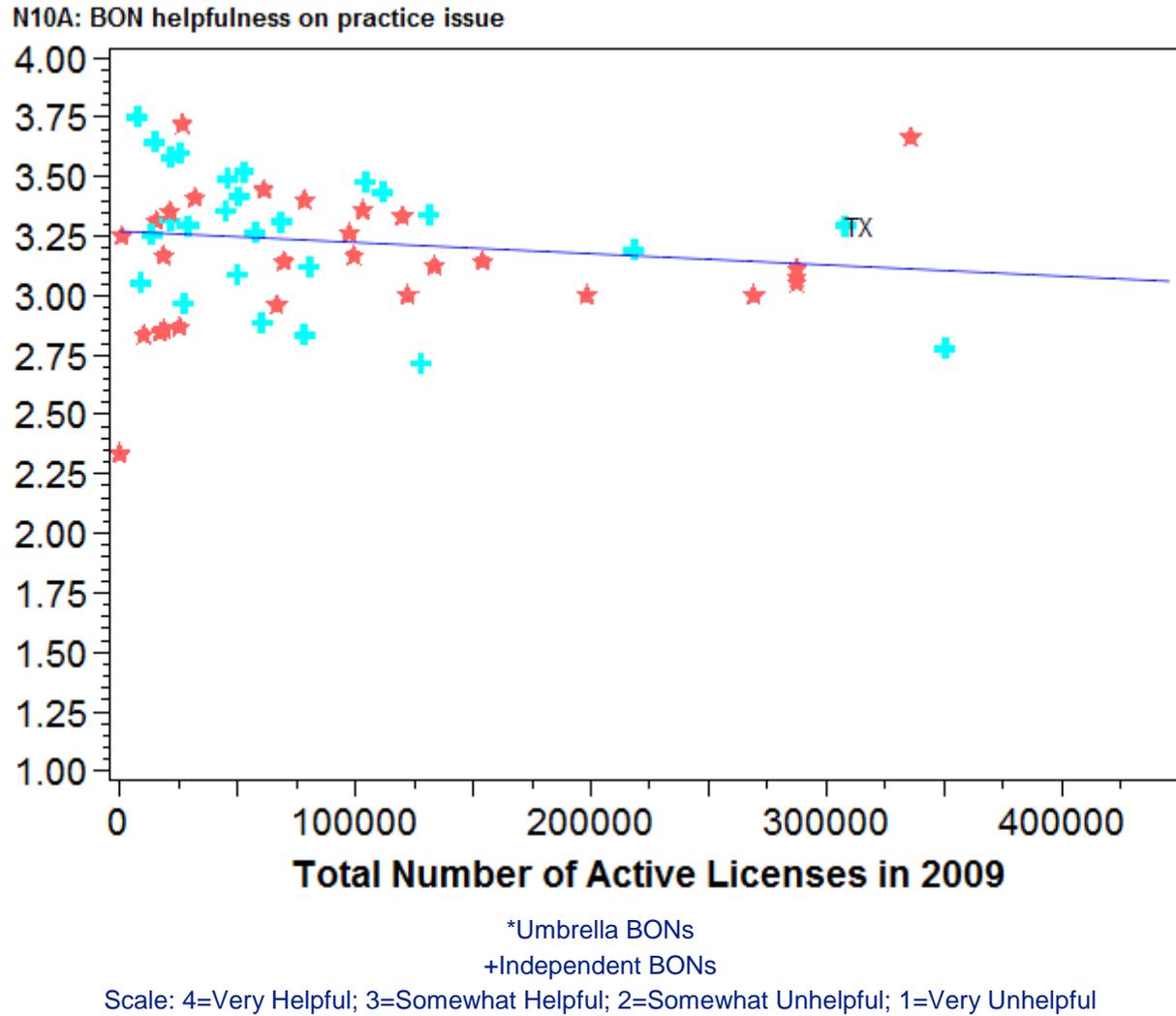
Overall, about six percent of the nurses surveyed indicated that they contacted the BON about practice issues (Nurses Question 10).

Table 29: Nurses Question 10: Contacted the BON About Practice Issues  
(Texas Compared to Aggregate: AVERAGE)

<i>During the past 12 months, did you ask the Board of Nursing in this state about practice issues?</i>	<b>Aggregate (All BONs)</b>		<b>Texas (Independent)</b>		<b>Independent BONs</b>		<b>Umbrella BONs</b>	
	<b>n</b>	<b>% “Yes”</b>	<b>n</b>	<b>% “Yes”</b>	<b>n</b>	<b>% “Yes”</b>	<b>n</b>	<b>% “Yes”</b>
FY07	16,388	4.9%	294	4.4%	8,724	5.3%	7,664	4.4%
FY09	24,837	6.1%	411	4.6%	13,753	7.1%	11,084	4.8%

FY09 CORE Data – Survey of Nurses  
Texas Data

Figure 7: Question 10: Helpfulness of BON on Practice Issues



Overall, nurses surveyed indicated that they found their BON “somewhat helpful” on questions about practice issues. Nurses from independent BON states found their BON slightly more helpful than those from umbrella BON states (Nurses Question 10a).

Table 30: Nurses Question 10a: Helpfulness of the BON on Questions About Practice Issues

(Texas Compared to Aggregate: AVERAGE)

<i>Overall, how helpful or unhelpful was the response you received from the Board of Nursing in this state? (Scale: 4 = very helpful; 3 = somewhat helpful; 2 = somewhat unhelpful; 1 = very unhelpful)</i>	<b>Aggregate (All BONs)</b>		<b>Texas (Independent)</b>		<b>Independent BONs</b>		<b>Umbrella BONs</b>	
	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>
FY02	279	3.37 (0.89)	–	–	240	3.35 (0.90)	39	3.51 (0.79)
FY05	298	3.32 (0.91)	7	3.00 (1.41)	250	3.41 (0.83)	48	2.88 (1.14)
FY07	757	3.26 (0.92)	11	3.55 (0.52)	438	3.29 (0.93)	319	3.23 (0.91)
FY09	1366	3.25 (0.95)	17	3.29 (0.77)	886	3.29 (0.92)	480	3.19 (0.98)

About 84 percent of the nurses surveyed thought that their BON was timely on questions about practice issues (Nurses Question 11).

Table 31: Nurses Question 11: Timeliness of BON on Questions About Practice Issues

(Texas Compared to Aggregate: AVERAGE)

<i>Overall, did the Board respond to practice questions in a timely manner?</i>	<b>Aggregate (All BONs)</b>		<b>Texas (Independent)</b>		<b>Independent BONs</b>		<b>Umbrella BONs</b>	
	<b>n</b>	<b>% “Yes”</b>	<b>n</b>	<b>% “Yes”</b>	<b>n</b>	<b>% “Yes”</b>	<b>n</b>	<b>% “Yes”</b>
FY05	290	85.2%	7	71.4%	245	87.8%	45	71.1%
FY07	643	83.7%	8	75.0%	372	84.7%	271	82.3%
FY09	1324	83.8%	17	76.5%	858	84.1%	466	83.0%

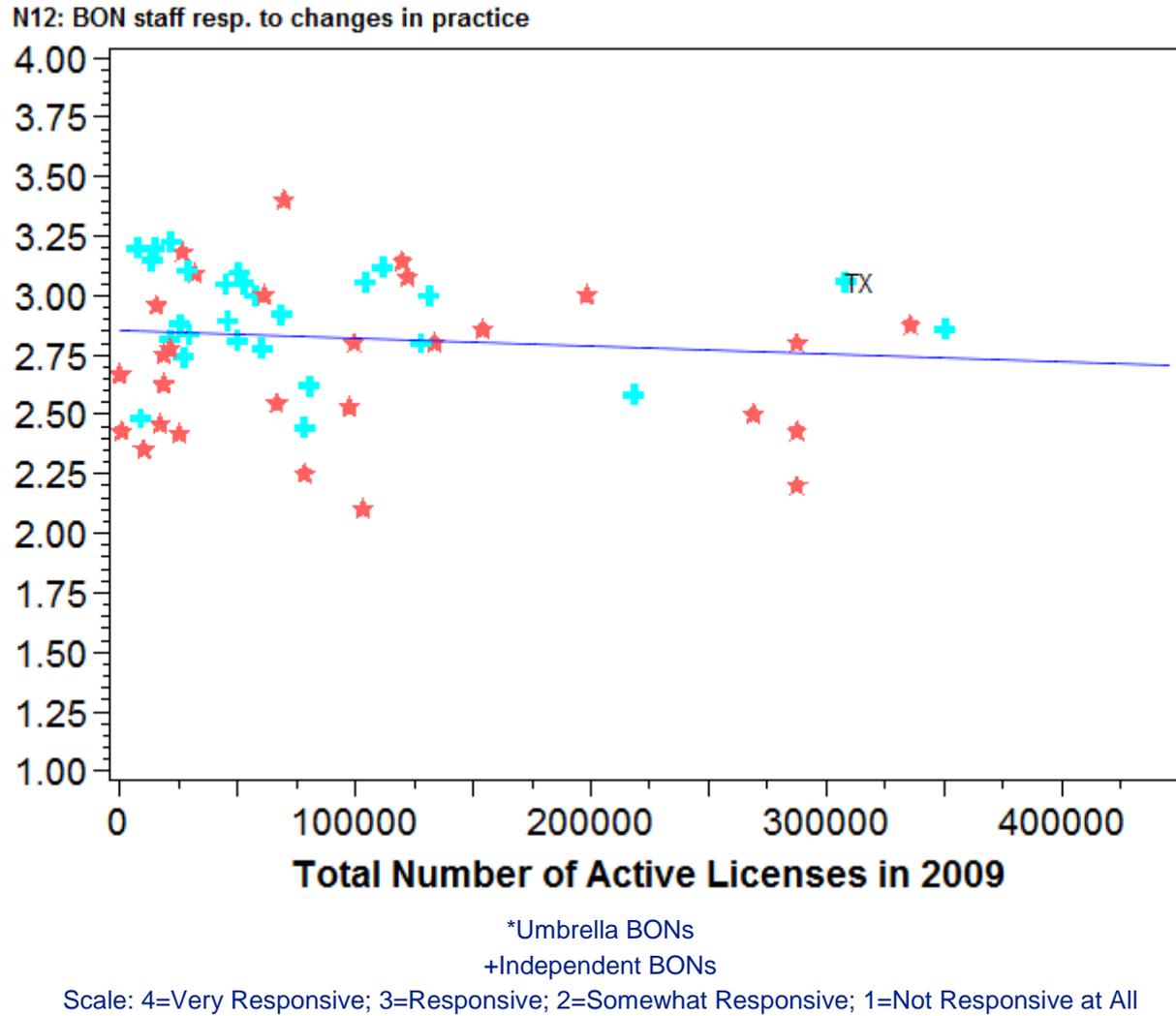
Overall, nurses surveyed indicated that they found their BON “responsive” to changes in practice. Nurses from independent BON states found their BON slightly more responsive than those from umbrella BON states (Nurses Question 12).

Table 32: Nurses Question 12: Responsiveness of BON to Changes in Practice  
 (Texas Compared to Aggregate: ABOVE AVERAGE)

<i>How responsive is the Board of Nursing to changes in practice? (Scale: 4 = very responsive; 3 = responsive; 2 = somewhat responsive; 1 = not responsive at all)</i>	<b>Aggregate (All BON)</b>		<b>Texas (Independent)</b>		<b>Independent BONs</b>		<b>Umbrella BONs</b>	
	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>
FY05	206	2.94 (0.83)	5	2.60 (1.14)	176	2.97 (0.82)	30	2.73 (0.91)
FY07	441	2.85 (0.87)	7	3.29 (0.49)	256	2.95 (0.84)	185	2.72 (0.89)
FY09	1084	2.83 (0.89)	17	3.06 (0.75)	699	2.89 (0.86)	385	2.73 (0.93)

FY09 CORE Data – Survey of Nurses  
Texas Data

Figure 8: Question 12: Responsiveness of BON to Changes in Practice



Overall, 52 percent of the nurses surveyed indicated that they would first contact their BON with assistance on a statute, rule and other legal requirements question. Of nurses from independent BON states, 58 percent would first contact their BON while 44 percent of nurses from umbrella BON states would do so (Nurses Question 15).

Table 33: Nurses Question 15: Who to Contact First with a Practice Question – FY02

<i>If you had a statute, rule, and other legal requirements question, which one of the following would you be most likely to contact first for assistance?</i>	<b>Aggregate (All BONs)</b>	<b>Texas (Independent)</b>
Board of Nursing	55%	–
Board of Health	0%	–
Professional Nursing Association	5%	–
Facility Attorney	2%	–
Risk Management Department	15%	–
School of Nursing	2%	–
Nursing practice law and rules	16%	–
Other	6%	–

Table 34: Nurses Question 15: Who to Contact First with a Practice Question – FY05

<i>If you had a statute, rule, and other legal requirements question, which one of the following would you be most likely to contact first for assistance?</i>	<b>Aggregate (All BONs)</b>	<b>Texas (Independent)</b>
n	4971	139
Board of Nursing	49%	45%
Board of Health	1%	–
Professional Nursing Association	3%	3%
Facility Attorney	4%	1%
Risk Management Department	19%	17%
School of Nursing	2%	3%
Nursing practice law and rules	18%	25%
Other	6%	6%

Table 35: Nurses Question 15: Who to Contact First with a Practice Question – FY07

<i>If you had a statute, rule, and other legal requirements question, which one of the following resources would you be most likely to contact first for assistance?</i>	<b>Aggregate (All BONs)</b>	<b>Texas (Independent)</b>	<b>Independent BONs</b>	<b>Umbrella BONs</b>
n	16161	292	8619	7542
Board of Nursing	43%	49%	46%	39%
Board of Health	1%	0.3%	0%	1%
Professional Nursing Association	4%	1%	3%	5%
Facility Attorney	4%	2%	3%	5%
Risk Management Department	11%	7%	10%	13%
School of Nursing	2%	3%	2%	2%
Nursing practice law and rules	32%	38%	33%	31%
Other	4%	0.7%	4%	4%

Table 36: Nurses Question 15: Who to Contact First with a Practice Question – FY09

(Texas Compared to Aggregate: AVERAGE)

<i>If you had a practice question, which one of the following would you be most likely to contact first for assistance?</i>	<b>Aggregate (All BONs)</b>	<b>Texas (Independent)</b>	<b>Independent BONs</b>	<b>Umbrella BONs</b>
n	24,366	403	13,490	10,876
Board of Nursing	52%	57%	58%	44%
Board of Health	1%	0.5%	1%	2%
Professional Nursing Association	8%	6%	6%	11%
Facility Attorney	2%	1%	2%	3%
Risk Management Department	14%	13%	12%	16%
School of Nursing	2%	2%	2%	2%
Nursing practice law and rules	15%	16%	14%	16%
Other	6%	5%	6%	7%

Overall, nurses surveyed indicated that they “somewhat understand” the laws in their state about reporting misconduct by a nurse. Nurses from independent BON states rated their understanding of the laws slightly higher than those from umbrella BON states (Nurses Question 23).

Table 37: Nurses Question 23: Nurses’ Understanding of State Laws about Reporting Misconduct  
(Texas Compared to Aggregate: ABOVE AVERAGE)

<i>How well do you understand the laws in your state about reporting misconduct by a nurse? (Scale: 4=Understand; 3 =somewhat understand; 2=somewhat misunderstand; 1=misunderstand)</i>	<b>Aggregate (All BONs)</b>		<b>Texas (Independent)</b>		<b>Independent BONs</b>		<b>Umbrella BONs</b>	
	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>
FY02	2,632	3.47 (0.62)	–	–	2,182	3.48 (0.61)	450	3.40 (0.63)
FY05	5,013	3.49 (0.62)	139	3.60 (0.51)	3,910	3.51 (0.61)	1,103	3.45 (0.66)
FY07	16,197	3.28 (0.70)	297	3.39 (0.64)	8,657	3.30 (0.68)	7,540	3.25 (0.72)
FY09	24,479	3.33 (0.71)	407	3.45 (0.64)	13,581	3.37 (0.69)	10,898	3.28 (0.73)

A little over two-thirds of the nurses surveyed indicated that they knew how to report a suspected violation of nursing laws (Nurses Question 24).

Table 38: Nurses Question 24: Nurses’ Knowledge of How to Report a Suspected Violation of Nursing Laws or Rules  
(Texas Compared to Aggregate: ABOVE AVERAGE)

<i>Do you know how to report a suspected violation of the nursing laws or rules?</i>	<b>Aggregate (All BONs)</b>		<b>Texas (Independent)</b>		<b>Independent BONs</b>		<b>Umbrella BONs</b>	
	<b>n</b>	<b>% “Yes”</b>	<b>n</b>	<b>% “Yes”</b>	<b>n</b>	<b>% “Yes”</b>	<b>n</b>	<b>% “Yes”</b>
FY02	2,616	66.5%	–	–	2,168	67.0%	448	64.1%
FY05	5,012	62.9%	139	63.3%	3,909	64.7%	1,103	56.6%
FY07	16,302	64.5%	298	74.5%	8,699	66.3%	7,603	62.5%
FY09	24,468	68.6%	411	77.6%	13,567	71.1%	10,901	65.5%

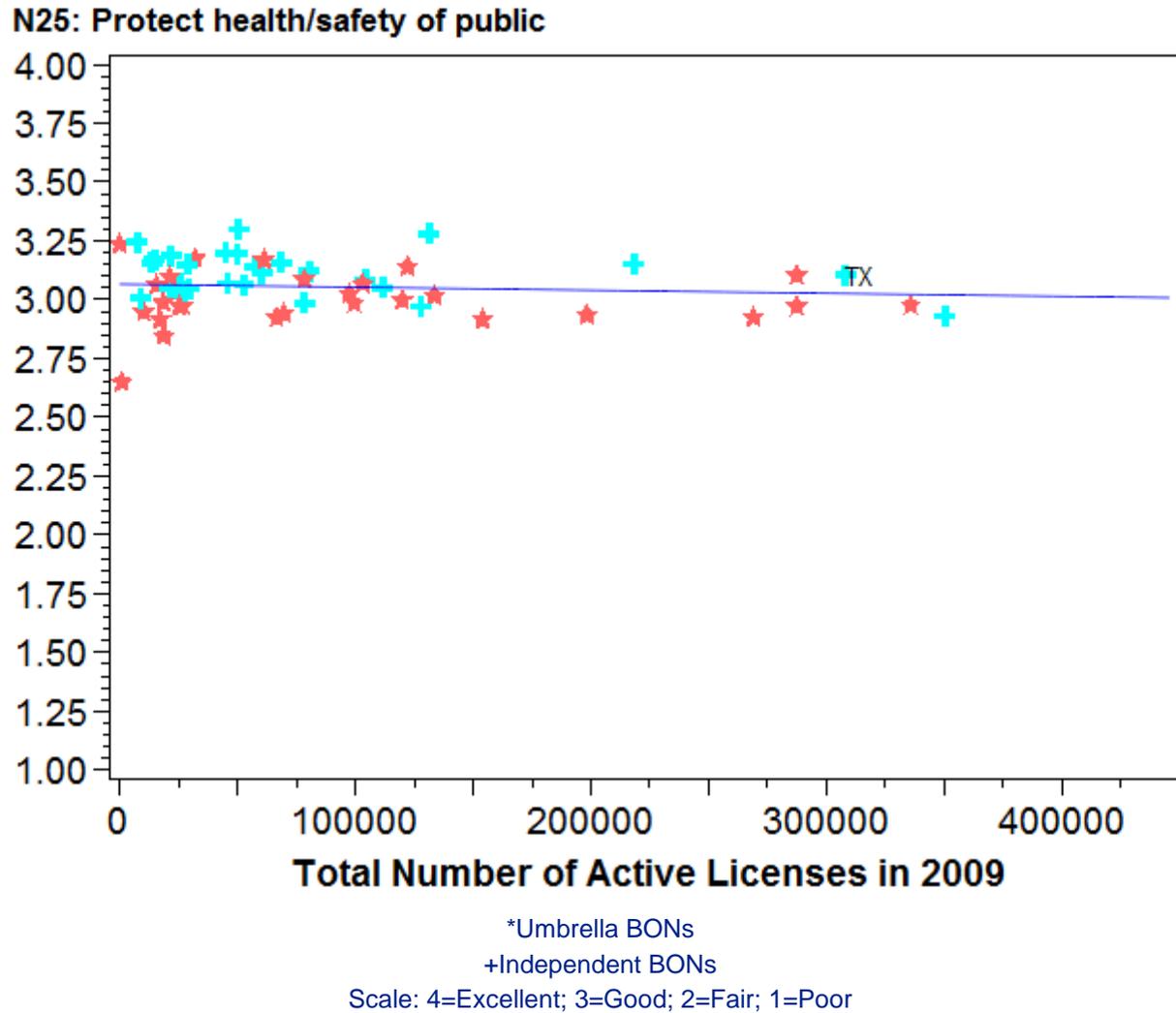
Overall, nurses surveyed indicated that they thought their BON was “good” in protecting the health and safety of the public. Nurses from independent BON states found their BONs to be slightly more effective than those from umbrella BON states (Nurses Question 25).

Table 39: Nurses Question 25: Nurses’ Perceptions Regarding Effectiveness in Protecting the Public  
(Texas Compared to Aggregate: AVERAGE)

<i>Overall, how effective is the state’s Board of Nursing in protecting the health and safety of the public? (Scale: 4 = excellent; 3= good; 2= fair; 1= poor)</i>	<b>Aggregate (All BONs)</b>		<b>Texas (Independent)</b>		<b>Independent BONs</b>		<b>Umbrella BONs</b>	
	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>
FY02	2,450	3.10 (0.63)	–	–	2,040	3.11 (0.62)	410	3.01 (0.65)
FY05	4,855	3.21 (0.61)	134	3.28 (0.59)	3,794	3.24 (0.61)	1,061	3.10 (0.62)
FY07	15,694	3.11 (0.59)	295	3.27 (0.56)	8,490	3.14 (0.57)	7,204	3.07 (0.60)
FY09	23,764	3.06 (0.61)	408	3.11 (0.62)	13,337	3.11 (0.61)	10,427	3.01 (0.61)

FY09 CORE Data – Survey of Nurses  
Texas Data

Figure 9: Question 25: Protecting Health and Safety of Public



## PRACTICE – Employers

Employers surveyed indicated that they “understand” the scope of a nurse’s practice as defined by the nurse practice act (Employers Question 15).

Table 40: Employers Question 15: Understand the Scope of Practice as Defined by the Nurse Practice Act  
(Texas Compared to Aggregate: AVERAGE)

<i>How well do you understand the scope/legal limits of a nurse’s practice, as defined by the Nurse Practice Act and related state statutes and rules? (Scale: 4 = understand; 3 = somewhat understand; 2 = somewhat do not understand; 1 = do not understand)</i>	<b>Aggregate (All BONs)</b>		<b>Texas (Independent)</b>		<b>Independent BONs</b>		<b>Umbrella BONs</b>	
	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>
FY02	472	3.64 (0.51)	–	–	406	3.64 (0.52)	66	3.67 (0.48)
FY05	564	3.39 (0.56)	17	3.59 (0.51)	452	3.39 (0.57)	112	3.40 (0.53)
FY07	887	3.71 (0.49)	33	3.76 (0.44)	624	3.73 (0.48)	263	3.68 (0.51)
FY09	1,260	3.66 (0.52)	20	3.70 (0.47)	742	3.68 (0.51)	518	3.63 (0.54)

Overall, 65 percent of the employers surveyed indicated that they would first contact their BON with assistance on a statute, rule and other legal requirements question. Of the employers surveyed from independent BON states, 72 percent would first contact their BON while 53 percent of employers from umbrella BON states would do so (Employers Question 16).

Table 41: Employers Question 16: Who to Contact First with a Practice Question – FY02

<i>If you had a statute, rule, and other legal requirements question, which one of the following would you be most likely to contact first for assistance?</i>	<b>Aggregate (All BONs)</b>	<b>Texas (Independent)</b>
Board of Nursing	73%	–
Board of Health	1%	–
Professional Nursing Association	4%	–
Facility Attorney	2%	–
Risk Management Department	5%	–
School of Nursing	1%	–
Nursing practice law and rules	11%	–
Other	2%	–

Table 42: Employers Question 16: Who to Contact First a Practice Question – FY05

<i>If you had a statute, rule, and other legal requirements question, which one of the following would you be most likely to contact first for assistance?</i>	<b>Aggregate (All BONs)</b>	<b>Texas (Independent)</b>
n	556	18
Board of Nursing	60%	44%
Board of Health	1%	–
Professional Nursing Association	3%	–
Facility Attorney	2%	–
Risk Management Department	8%	6%
School of Nursing	0%	-
Nursing practice law and rules	22%	44%
Other	4%	6%

Table 43: Employers Question 16: Who to Contact First with a Practice Question – FY07

<i>If you had a statute, rule, and other legal requirements question, which one of the following resources would you be most likely to contact first for assistance?</i>	<b>Aggregate (All BONs)</b>	<b>Texas (Independent)</b>	<b>Independent BONs</b>	<b>Umbrella BONs</b>
n	885	32	623	262
Board of Nursing	63%	66%	67%	54%
Board of Health	2%	–	1%	1%
Professional Nursing Association	5%	3%	4%	8%
Facility Attorney	3%	–	2%	4%
Risk Management Department	6%	3%	6%	6%
School of Nursing	3%	–	1%	2%
Nursing practice law and rules	19%	3%	18%	20%
Other	3%	–	2%	5%

Table 44: Employers Question 16: Who to Contact First with a Practice Question – FY09

(Texas Compared to Aggregate: AVERAGE)

<i>If you had a practice question, which one of the following would you be most likely to contact first for assistance?</i>	<b>Aggregate (All BONs)</b>	<b>Texas (Independent)</b>	<b>Independent BONs</b>	<b>Umbrella BONs</b>
n	1172	18	697	475
Board of Nursing	65%	61%	72%	53%
Board of Health	2%	–	1%	4%
Professional Nursing Association	5%	–	2%	8%
Facility Attorney	3%	–	2%	4%
Risk Management Department	6%	11%	5%	8%
School of Nursing	1%	–	1%	1%
Nursing practice law and rules	17%	17%	15%	20%
Other	4%	11%	3%	6%

Employers surveyed indicated that they “understand” their obligation to report violations of nursing statutes and rules (Employers Question 17).

Table 45: Employers Question 17: Understanding of Obligation to Report a Suspected Violation of Nursing Statutes and Rules

(Texas Compared to Aggregate: BELOW AVERAGE)

<i>How well do you understand your obligation to report conduct that you think may violate the nursing statutes and rules of the Board of Nursing? (Scale: 4 = understand; 3 = somewhat understand; 2 = somewhat do not understand; 1 = do not understand)</i>	<b>Aggregate (All BONs)</b>		<b>Texas (Independent)</b>		<b>Independent BONs</b>		<b>Umbrella BONs</b>	
	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>
FY02	470	3.83 (0.40)	–	–	405	3.84 (0.39)	65	3.75 (0.43)
FY05	565	3.72 (0.50)	18	3.94 (0.24)	454	3.72 (0.51)	111	3.72 (0.47)
FY07	891	3.83 (0.43)	33	3.91 (0.29)	627	3.83 (0.43)	264	3.82 (0.45)
FY09	1,255	3.82 (0.43)	20	3.70 (0.47)	738	3.81 (0.43)	517	3.83 (0.42)

Overall, 31 percent of employers surveyed indicated that they contacted the BON about practice issues in the past year. Of the employers surveyed from independent BON states, 37 percent had contacted their BON while 22 percent of employers from umbrella BON states had done so (Employers Question 25).

Table 46: Employers Question 25: Contacted BON about Practice Issues  
 (Texas Compared to Aggregate: BELOW AVERAGE)

<i>During the past 12 months, did you make any inquiries of the Board staff in this state about practice issues?</i>	<b>Aggregate (All BONs)</b>		<b>Texas (Independent)</b>		<b>Independent BONs</b>		<b>Umbrella BONs</b>	
	<b>n</b>	<b>% “Yes”</b>	<b>n</b>	<b>% “Yes”</b>	<b>n</b>	<b>% “Yes”</b>	<b>n</b>	<b>% “Yes”</b>
FY07	892	43.6%	33	33.3%	628	47.1%	264	35.2%
FY09	1254	31.0%	20	20.0%	738	37.1%	516	22.3%

## PRACTICE – Education Programs

Overall, 84 percent of the education programs surveyed indicated that they made an inquiry to the BON about educational issues during the past two years (Education Programs Question 11).

Table 47: Education Programs Question 11: Inquiry to BON on Educational Issues – FY09  
(Texas Compared to Aggregate: AVERAGE)

<i>During the past 2 years, did you or any faculty members make any inquiries of the Board of Nursing regarding educational issues?</i>	Aggregate (All BONs)		Texas (Independent)		Independent BONs		Umbrella BONs	
	n	% “Yes”	n	% “Yes”	n	% “Yes”	n	% “Yes”
Inquiry to BON on Educational Issue	1750	84.1%	91	83.5%	926	86.9%	824	80.9%

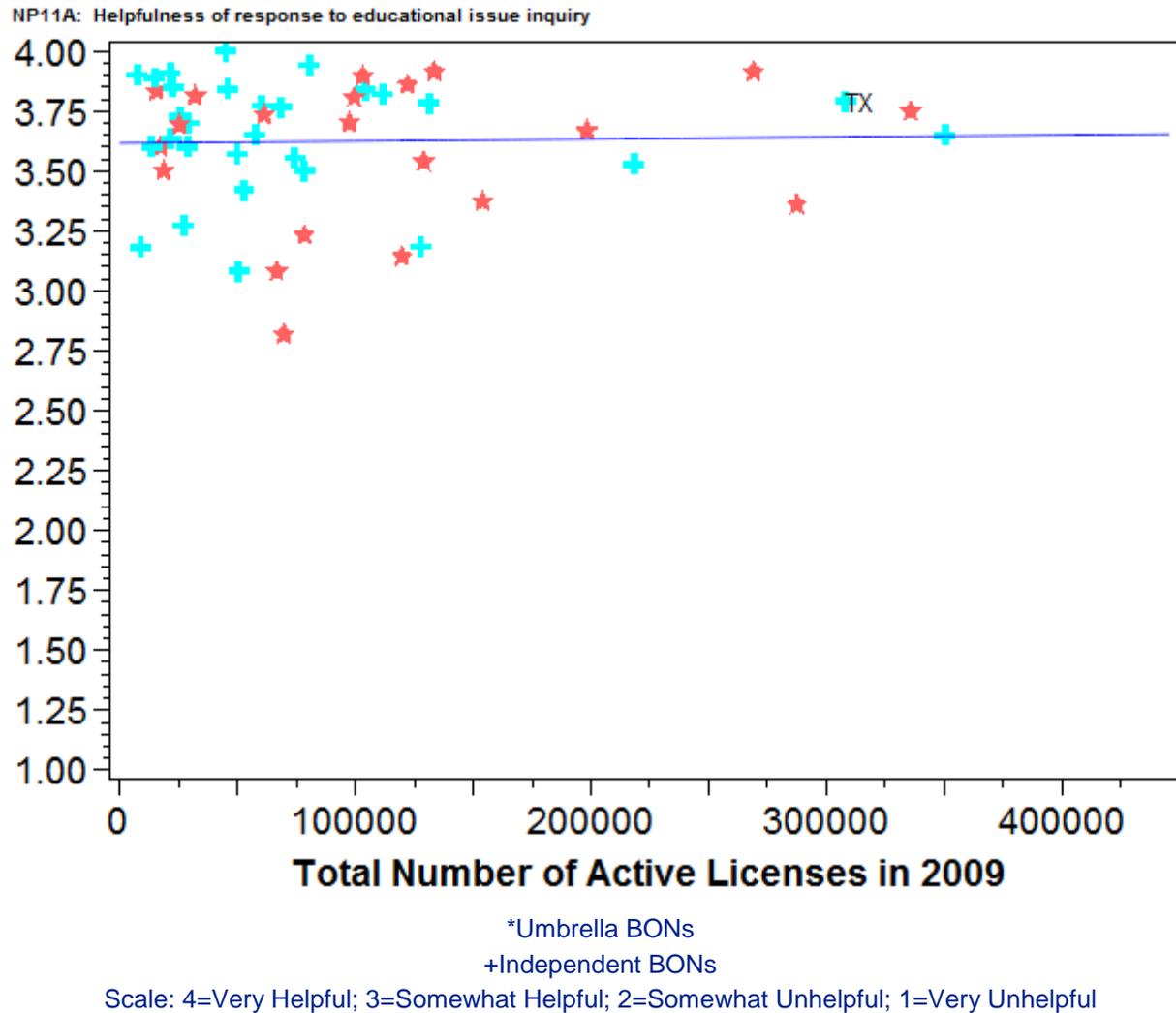
Education programs making inquiries to the BON about educational issues during the past two years found the responses to be “very helpful” (Education Programs Question 11a).

Table 48: Education Programs Question 11a: Education Programs’ Perceptions on BON Helpfulness in Addressing Inquiries Regarding Educational Issues  
(Texas Compared to Aggregate: ABOVE AVERAGE)

<i>During the past 2 years, did you or any faculty members make any inquiries of the Board of Nursing in this state regarding educational issues? If you responded “yes”, then how helpful was the response you received? (Scale: 4 = very helpful; 3 = somewhat helpful; 2 = somewhat unhelpful; 1 = very unhelpful)</i>	Aggregate (All BONs)		Texas (Independent)		Independent BONs		Umbrella BONs	
	n	mean (std)	n	mean (std)	n	mean (std)	n	mean (std)
FY02	153	3.78 (0.55)	–	–	97	3.88 (0.33)	56	3.61 (0.78)
FY05	472	3.72 (0.57)	61	3.74 (0.44)	302	3.73 (0.56)	170	3.69 (0.59)
FY07	1,385	3.68 (0.59)	98	3.81 (0.49)	832	3.70 (0.57)	553	3.66 (0.62)
FY09	1,465	3.65 (0.63)	76	3.79 (0.52)	802	3.68 (0.61)	663	3.62 (0.66)

FY09 CORE Data – Survey of Education Programs  
Texas Data

Figure 10: Question 11A: Helpfulness of BON with Inquiries Regarding Educational Issues



## EDUCATION – BONs

On average, states have 68 education programs; the majority of which have full approval (BON Question 27).

Table 49: BONs Question 27: Number of Education Programs – FY07

<i>Please indicate the number of education programs in your state and how many at the end of FY2007 had received initial approval, full approval, conditional approval, denied initial approval, or had lost approval.</i>	Aggregate (All BONs)		Texas (Independent)	Independent BONs		Umbrella BONs	
	n	mean	mean	n	mean	n	mean (std)
Number of Education Programs	34	61	–	23	50	11	85
Number of Programs with Initial Approval	31	6	–	21	56	10	8
Number of Programs with Full Approval	31	55	–	21	44	10	78
Number of Programs with Conditional Approval	31	3	–	21	2	10	4
Number of Programs Denied Initial Approval	31	0	–	21	0	10	1
Number of Programs That Lost Approval	31	0	–	21	0	10	0

Table 50: BONs Question 27: Number of Education Programs – FY09

(Texas Compared to Aggregate: ABOVE AVERAGE)

<i>Please indicate the number of education programs in your state and how many at the end of FY2009 had received initial approval, full approval, conditional approval, denied initial approval, or had lost approval.</i>	Aggregate (All BONs)		Texas (Independent)	Independent BONs		Umbrella BONs	
	n	mean (std)	mean	n	mean (std)	n	mean (std)
Number of Education Programs	33	68 (56)	193	23	63 (50)	10	79 (67)
Number of Programs with Initial Approval	33	5 (8)	13	23	5 (8)	10	4 (9)
Number of Programs with Full Approval	33	61 (51)	173	23	57 (46)	10	72 (64)
Number of Programs with Conditional Approval	33	2 (3)	7	23	2 (3)	10	3 (4)
Number of Programs Denied Initial Approval	33	0.4 (1.2)	0	23	0.2 (0.7)	10	0.9 (1.9)
Number of Programs That Lost Approval	33	0.2 (0.5)	0	23	0.2 (0.4)	10	0.2 (0.6)

## EDUCATION – Nurses

Of the nurses surveyed, 63 percent received their basic nursing education in the state where they currently practice (Nurses Question 5).

Table 51: Nurses Question 5: Where Basic Nursing Education was Received – FY09

<i>Where did you receive your basic nursing education for your LPN/VN or RN license?</i>	<b>Aggregate (All BONs)</b>	<b>Texas (Independent)</b>	<b>Independent BONs</b>	<b>Umbrella BONs</b>
n	24854	412	13767	11087
This State	63.0%	72.3%	65.0%	60.6%
Another State	34.1%	23.3%	32.4%	36.4%
Outside the United States	2.8%	4.4%	2.6%	3.1%

Overall, 97 percent of RNs surveyed indicated that their basic nursing education prepared them “very well” or “well” to provide safe and effective nursing care (Nurses Question 6a).

Table 52: Nurses Question 6a: RN Preparation for Practice – FY02

<i>How well did your basic education prepare you to provide safe and effective nursing care?</i>	<b>Aggregate (All BONs)</b>	<b>Texas (Independent)</b>
n	1,925	–
Very well	50.3%	–
Well	46.2%	–
Poorly	3.4%	–
Very poorly	0.1%	–

Table 53: Nurses Question 6a: RN Preparation for Practice – FY05

<i>How well did your basic education prepare you to provide safe and effective nursing care?</i>	<b>Aggregate (All BONs)</b>	<b>Texas (Independent)</b>
n	3,472	90
Very well	46.9%	42.2%
Well	49.0%	53.3%
Poorly	4.0%	3.3%
Very poorly	0.1%	1.1%

Table 54: Nurses Question 6a: RN Preparation for Practice – FY07

<i>How well did your basic education prepare you to provide safe and effective nursing care?</i>	<b>Aggregate (All BONs)</b>	<b>Texas (Independent)</b>	<b>Independent BONs</b>	<b>Umbrella BONs</b>
n	12,634	220	6,957	5,677
Very well	41.8%	37.7%	39.3%	44.8%
Well	54.0%	60.0%	56.5%	51.0%
Poorly	4.0%	1.8%	4.0%	4.0%
Very poorly	0.2%	0.5%	0.2%	0.2%

Table 55: Nurses Question 6a: RN Preparation for Practice – FY09

(Texas Compared to Aggregate: **BELOW AVERAGE**)

<i>How well or poorly did your basic education prepare you to provide safe and effective nursing care?</i>	<b>Aggregate (All BONs)</b>	<b>Texas (Independent)</b>	<b>Independent BONs</b>	<b>Umbrella BONs</b>
n	20,509	309	11,158	9,351
Very well	51.3%	48.5%	50.6%	52.2%
Well	45.4%	48.9%	46.2%	44.4%
Poorly	3.1%	2.6%	3.0%	3.2%
Very poorly	0.1%	–	0.2%	0.1%

Of the LPN/VNs surveyed, 98 percent indicated that their basic nursing education prepared them “very well” or “well” to provide safe and effective nursing care (Nurses Question 6b).

Table 56: Nurses Question 6b: LPN/VN Preparation for Practice – FY02

<i>How well did your basic education prepare you to provide safe and effective nursing care?</i>	<b>Aggregate (All BONs)</b>	<b>Texas (Independent)</b>
n	628	–
Very well	58.8%	–
Well	40.8%	–
Poorly	1.3%	–
Very poorly	–	–

Table 57: Nurses Question 6b: LPN/VN Preparation for Practice – FY05

<i>How well did your basic education prepare you to provide safe and effective nursing care?</i>	<b>Aggregate (All BONs)</b>	<b>Texas (Independent)</b>
n	1,359	47
Very well	45.0%	31.9%
Well	52.4%	66.0%
Poorly	2.5%	2.1%
Very poorly	0.1%	–

Table 58: Nurses Question 6b: LPN/VN Preparation for Practice – FY07

<i>How well did your basic education prepare you to provide safe and effective nursing care?</i>	<b>Aggregate (All BONs)</b>	<b>Texas (Independent)</b>	<b>Independent BONs</b>	<b>Umbrella BONs</b>
n	3,567	68	1,686	1881
Very well	48.0%	51.5%	46.4%	49.5%
Well	48.7%	41.2%	50.1%	47.5%
Poorly	3.1%	7.4%	3.3%	2.9%
Very poorly	0.2%	–	0.2%	0.1%

Table 59: Nurses Question 6b: LPN/VN Preparation for Practice – FY09

(Texas Compared to Aggregate: AVERAGE)

<i>How well or poorly did your basic education prepare you to provide safe and effective nursing care?</i>	<b>Aggregate (All BONs)</b>	<b>Texas (Independent)</b>	<b>Independent BONs</b>	<b>Umbrella BONs</b>
n	4,142	100	2,501	1,641
Very well	50.7%	52.0%	49.9%	51.9%
Well	47.2%	46.0%	48.1%	45.8%
Poorly	1.9%	1%	1.8%	2.1%
Very poorly	0.2%	1%	0.2%	0.2%

## EDUCATION – Employers

Overall, the employers surveyed indicated that new graduates were best prepared to administer medication by common routes and least prepared to supervise care provided by others. In every functional area, employers from independent BON states rated new graduates higher than those from umbrella BON states (Employers Question 6).

Table 60: Employers Question 6: Preparedness of New Graduates by Function – FY05

<i>In your opinion, how well or poorly prepared are new graduates (licensed less than 12 months)? Please circle the appropriate number. (Scale: 4 = very well prepared; 3 = well prepared; 2 = poorly prepared; 1 = very poorly prepared)</i>	<b>Aggregate (All BONs)</b>		<b>Texas (Independent)</b>	
	<b>n</b>	<b>mean</b>	<b>n</b>	<b>mean</b>
Administer medication by common routes	495	3.04	16	2.94
Work with machinery used for patient care	481	2.64	15	2.40
Work effectively within a health care team	484	2.80	16	2.63
Perform psychomotor skills	485	2.49	15	2.33
Communicate relevant information	–	–	–	–
Document a legally defensible account of care	490	2.53	16	2.38
Recognize abnormal physical findings	487	2.64	15	2.60
Teach patients	487	2.70	15	2.67
Assess the effectiveness of treatments	489	2.63	16	2.63
Recognize abnormal diagnostic lab findings	483	2.55	16	2.63
Do math necessary for medication administration	483	2.76	15	2.87
Respond to emergency situations	489	2.40	16	2.25
Create a plan of care for patients	484	2.80	16	3.06
Supervise care provided by others	480	2.24	16	2.13
Experienced nurses (licensed for more than 12 months) adequately prepared to provide safe and effective nursing care	–	–	–	–

Table 61: Employers Question 6: Preparedness of New Graduates by Function – FY07

<i>In your opinion, how well or poorly prepared are new graduates (licensed less than 12 months)? Please circle the appropriate number. (Scale: 4 = very well prepared; 3 = well prepared; 2 = poorly prepared; 1 = very poorly prepared)</i>	Aggregate (All BONs)		Texas (Independent)		Independent BONs		Umbrella BONs	
	n	mean	n	mean	n	mean	n	mean
Administer medication by common routes	786	2.97	27	3.00	548	3.00	238	2.89
Work with machinery used for patient care	780	2.56	28	2.43	545	2.59	235	2.50
Work effectively within a health care team	783	2.69	27	2.70	546	2.73	237	2.62
Perform psychomotor skills	778	2.43	28	2.46	542	2.47	236	2.33
Communicate relevant information	783	2.58	29	2.52	548	2.61	235	2.53
Document a legally defensible account of care	779	2.39	29	2.41	541	2.42	238	2.33
Recognize abnormal physical findings	781	2.56	29	2.55	543	2.58	238	2.51
Teach patients	781	2.61	27	2.56	545	2.62	236	2.58
Assess the effectiveness of treatments	779	2.54	28	2.46	542	2.57	237	2.48
Recognize abnormal diagnostic lab findings	775	2.47	28	2.39	537	2.49	238	2.44
Do math necessary for medication administration	770	2.65	27	2.74	535	2.64	235	2.67
Respond to emergency situations	774	2.32	28	2.36	539	2.35	235	2.24
Create a plan of care for patients	780	2.64	28	2.46	544	2.66	236	2.59
Supervise care provided by others	766	2.15	27	2.19	530	2.17	236	2.11
Experienced nurses (licensed for more than 12 months) adequately prepared to provide safe and effective nursing care	762	2.97	27	2.96	534	2.97	228	2.99

Table 62: Employers Question 6: Preparedness of New Graduates by Function – FY09  
 (Texas Compared to Aggregate: AVERAGE)

<i>In your opinion, how well or poorly prepared are new graduates (licensed less than 12 months)? Please circle the appropriate number. (Scale: 4 = very well prepared; 3 = well prepared; 2 = poorly prepared; 1 = very poorly prepared)</i>	Aggregate (All BONs)		Texas (Independent)		Independent BONs		Umbrella BONs	
	n	mean (std)	n	mean (std)	n	mean (std)	n	mean (std)
Administer medication by common routes	1,121	3.12 (0.54)	16	3.19 (0.66)	649	3.15 (0.54)	472	3.08 (0.54)
Work with machinery used for patient care	1,095	2.68 (0.62)	17	2.47 (0.72)	633	2.75 (0.60)	462	2.58 (0.62)
Work effectively within a health care team	1,117	2.91 (0.52)	17	2.94 (0.43)	646	2.95 (0.54)	471	2.84 (0.47)
Perform psychomotor skills	1,100	2.90 (0.50)	17	2.94 (0.56)	636	2.96 (0.50)	464	2.81 (0.49)
Communicate relevant information	1,121	2.73 (0.62)	17	2.76 (0.66)	648	2.77 (0.63)	473	2.68 (0.60)
Document a legally defensible account of care	1,117	2.50 (0.66)	17	2.53 (0.62)	646	2.54 (0.68)	471	2.43 (0.63)
Recognize abnormal physical findings	1,120	2.70 (0.61)	17	2.71 (0.59)	649	2.74 (0.61)	471	2.64 (0.62)
Teach patients	1,120	2.68 (0.61)	17	2.76 (0.66)	647	2.73 (0.61)	473	2.62 (0.60)
Assess the effectiveness of treatments	1,119	2.64 (0.57)	17	2.82 (0.53)	646	2.69 (0.57)	473	2.58 (0.57)
Recognize abnormal diagnostic lab findings	1,119	2.59 (0.63)	17	2.41 (0.62)	647	2.64 (0.62)	472	2.51 (0.63)
Do math necessary for medication administration	1,092	2.75 (0.60)	17	2.94 (0.66)	637	2.81 (0.59)	455	2.65 (0.58)
Respond to emergency situations	1,115	2.60 (0.63)	17	2.88 (0.60)	647	2.65 (0.63)	468	2.54 (0.64)
Create a plan of care for patients	1,114	2.59 (0.63)	16	2.50 (0.63)	646	2.64 (0.64)	468	2.53 (0.61)
Supervise care provided by others	1,110	2.38 (0.66)	16	2.63 (0.62)	642	2.43 (0.64)	468	2.31 (0.67)
Experienced nurses (licensed for more than 12 months) adequately prepared to provide safe and effective nursing care	1,122	3.08 (0.59)	18	3.22 (0.65)	655	3.09 (0.61)	462	3.05 (0.56)

## EDUCATION – Education Programs

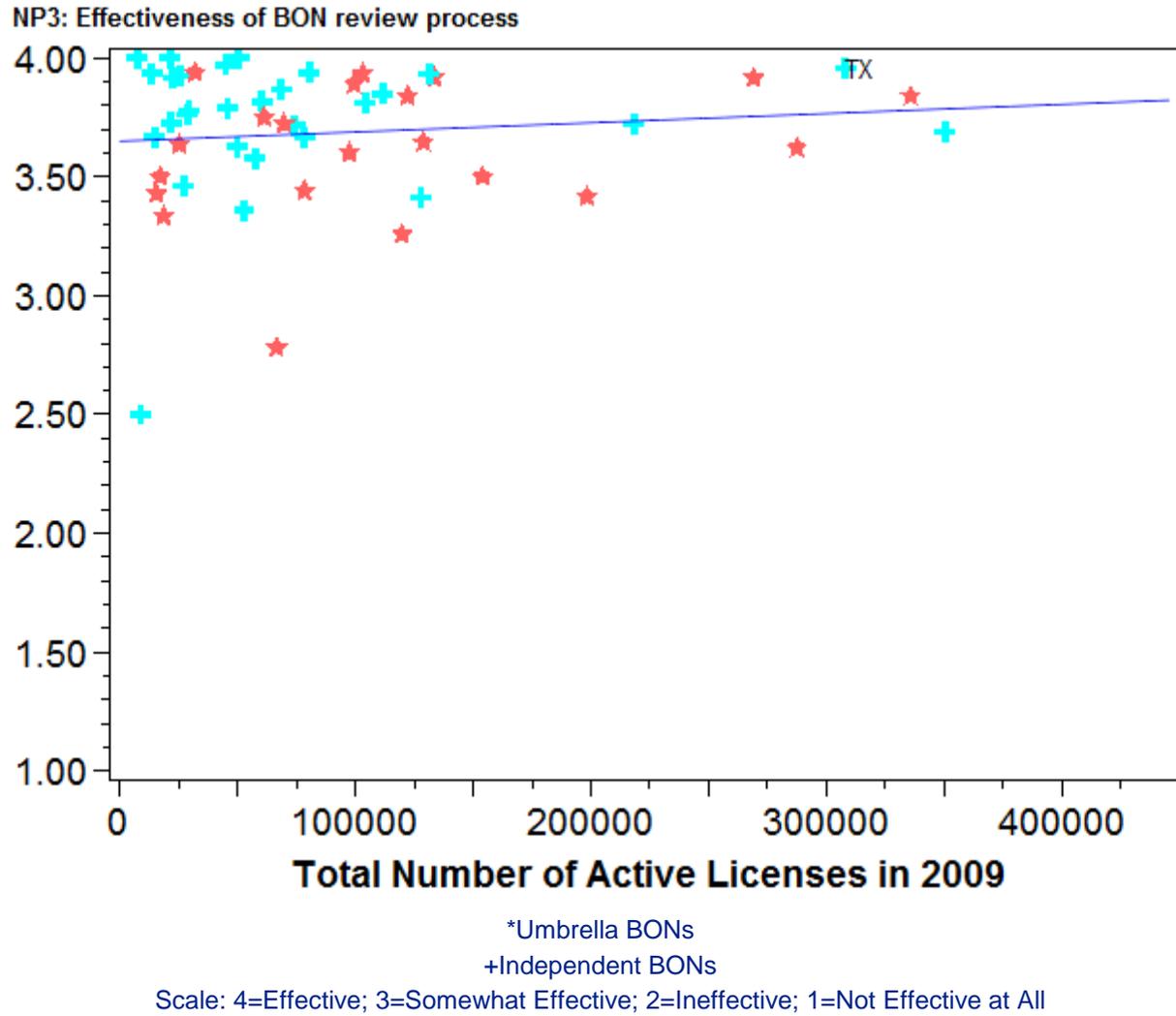
Overall, education programs surveyed rated their BON’s review process as effective. Employers from independent BON states rated their BON’s review process higher than those from umbrella BON states (Education Programs Question 3).

Table 63: Education Programs Question 3: Education Programs’ Perceptions Regarding Effectiveness of Review Process – FY09  
(Texas Compared to Aggregate: ABOVE AVERAGE)

<i>Please rate how effective or ineffective your Board of Nursing is in the review process. (Scale: 4 = effective; 3 = somewhat effective; 2 = somewhat ineffective; 1 = not effective at all)</i>	Aggregate (All BONs)		Texas (Independent)		Independent BONs		Umbrella BONs	
	n	mean (std)	n	mean (std)	n	mean (std)	n	mean (std)
Effectiveness of Review Process	1,481	3.71 (0.58)	70	3.96 (0.20)	841	3.76 (0.54)	640	3.66 (0.62)

FY09 CORE Data – Survey of Education Programs  
Texas Data

Figure 11: Question 3: Rate Effectiveness of BON Review Process



Overall, education programs surveyed rated each area of the approval process as “adequate.” In every area, employers from independent BON states rated new graduates higher than those from umbrella BON states (Education Programs Question 4).

Table 64: Education Programs Question 4: Education Programs’ Perceptions of Approval Process – FY02

<i>Please rate each of the following areas related to the approval process. (Scale: 4 = adequate; 3 = somewhat adequate; 2 = somewhat inadequate; 1 = inadequate)</i>	<b>Aggregate (All BONs)</b>		<b>Texas (Independent)</b>	
	<b>n</b>	<b>mean</b>	<b>n</b>	<b>mean</b>
Interval between Board visits	183	3.62	–	–
Preparation time for Board visits	182	3.68	–	–
Communication with Board staff	187	3.66	–	–
Time spent on site during visit	181	3.75	–	–
Feedback/evaluation provided by Board	184	3.66	–	–
Timeliness of providing feedback	184	3.68	–	–
Comprehensiveness of feedback provided	183	3.64	–	–
Fairness/objectivity of Board findings	184	3.64	–	–
Time given to correct deficiencies	156	3.69	–	–
Fairness in monitoring compliance	166	3.70	–	–
Overall benefit of approval process	180	3.66	–	–
Due process for disagreements re. findings	123	3.63	–	–

Table 65: Education Programs Question 4: Education Programs' Perceptions of Approval Process – FY05

<i>Please rate each of the following areas related to the approval process. (Scale: 4 = adequate; 3 = somewhat adequate; 2 = somewhat inadequate; 1 = inadequate)</i>	<b>Aggregate (All BONs)</b>		<b>Texas (Independent)</b>	
	<b>n</b>	<b>mean</b>	<b>n</b>	<b>mean</b>
Interval between Board visits	495	3.84	67	3.85
Preparation time for Board visits	480	3.81	63	3.76
Communication with Board staff	530	3.77	68	3.81
Time spent on site during visit	446	3.88	60	3.88
Feedback/evaluation provided by Board	518	3.76	68	3.78
Timeliness of providing feedback	514	3.74	68	3.87
Comprehensiveness of feedback provided	510	3.73	68	3.71
Fairness/objectivity of Board findings	516	3.76	68	3.66
Time given to correct deficiencies	433	3.82	55	3.82
Fairness in monitoring compliance	479	3.79	65	3.75
Overall benefit of approval process	515	3.70	68	3.75
Due process for disagreements re. findings	354	3.76	50	3.58

Table 66: Education Programs Question 4: Education Programs' Perceptions of Approval Process – FY07

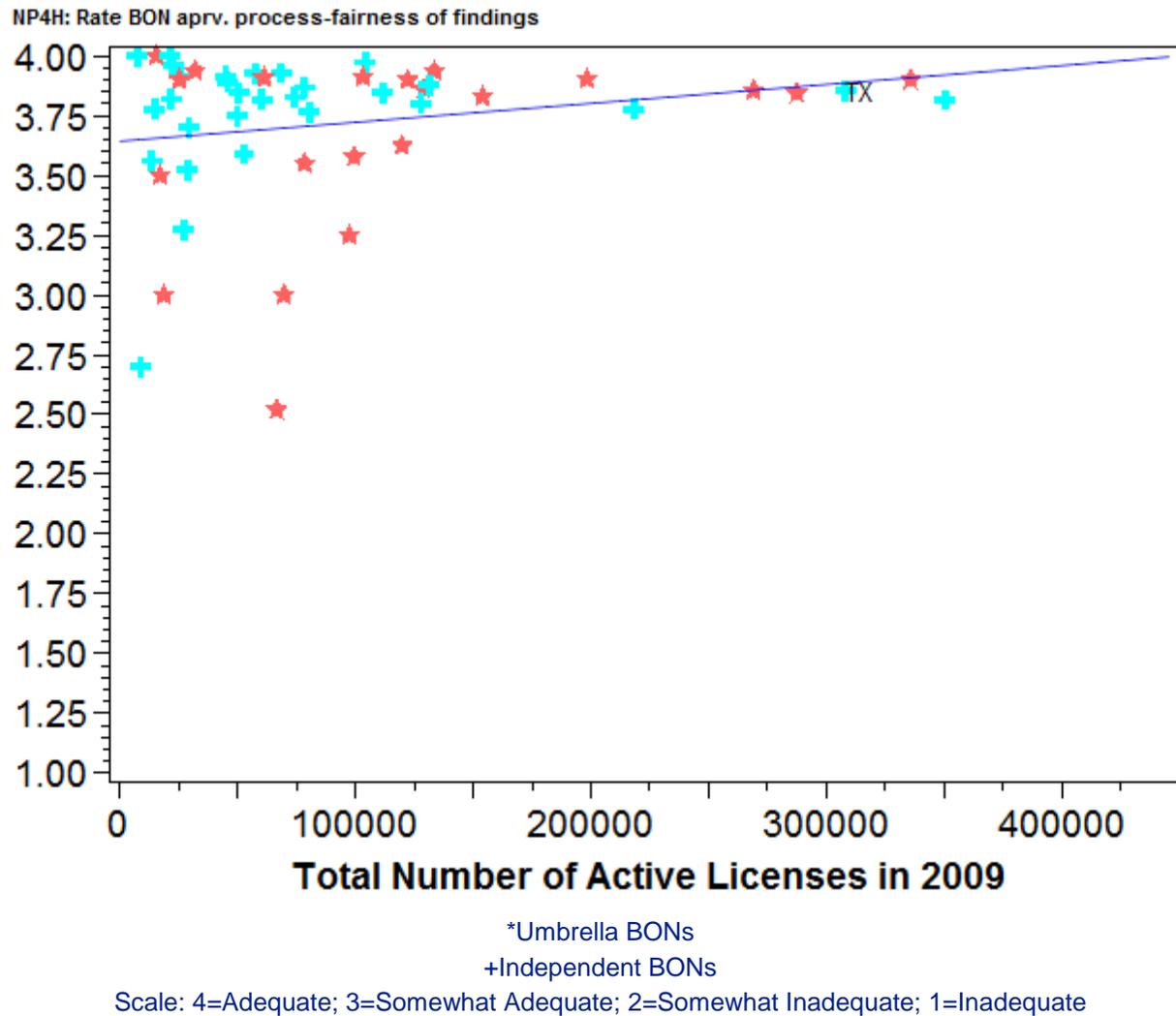
<i>Please rate each of the following areas related to the approval process. (Scale: 4 = adequate; 3 = somewhat adequate; 2 = somewhat inadequate; 1 = inadequate)</i>	<b>Aggregate (All BONs)</b>		<b>Texas (Independent)</b>		<b>Independent BONs</b>		<b>Umbrella BONs</b>	
	<b>n</b>	<b>mean</b>	<b>n</b>	<b>mean</b>	<b>n</b>	<b>mean</b>	<b>n</b>	<b>mean</b>
Interval between Board visits	1146	3.82	77	3.87	762	3.86	384	3.74
Preparation time for Board visits	1132	3.87	75	3.87	761	3.89	371	3.81
Communication with Board staff	1204	3.78	77	3.92	777	3.79	427	3.75
Time spent on site during visit	1080	3.90	73	3.99	740	3.91	340	3.89
Feedback/evaluation provided by Board	1178	3.78	78	3.95	763	3.83	415	3.69
Timeliness of providing feedback	1177	3.77	78	3.92	763	3.80	414	3.71
Comprehensiveness of feedback provided	1174	3.77	78	3.94	759	3.81	415	3.70
Fairness/objectivity of Board findings	1172	3.78	78	3.82	759	3.79	413	3.77
Time given to correct deficiencies	1040	3.86	72	3.89	684	3.88	356	3.84
Fairness in monitoring compliance	1117	3.84	76	3.92	733	3.86	384	3.80
Overall benefit of approval process	1168	3.79	78	3.86	759	3.81	409	3.75
Due process for disagreements re. findings	898	3.84	65	3.92	596	3.84	302	3.83

Table 67: Education Programs Question 4: Education Programs' Perceptions of Approval Process – FY09  
 (Texas Compared to Aggregate: AVERAGE)

<i>Please rate each of the following areas related to the approval process. (Scale: 4 = adequate; 3 = somewhat adequate; 2 = somewhat inadequate; 1 = inadequate)</i>	<b>Aggregate (All BONs)</b>		<b>Texas (Independent)</b>		<b>Independent BONs</b>		<b>Umbrella BONs</b>	
	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>
Interval between Board visits	1,393	3.81 (0.61)	63	3.89 (0.36)	824	3.91 (0.37)	569	3.67 (0.83)
Preparation time for Board visits	1,369	3.85 (0.51)	63	3.89 (0.32)	823	3.88 (0.43)	546	3.80 (0.61)
Communication with Board staff	1,472	3.69 (0.74)	70	3.83 (0.38)	844	3.75 (0.64)	628	3.60 (0.84)
Time spent on site during visit	1,313	3.89 (0.41)	60	3.88 (0.32)	802	3.91 (0.38)	511	3.87 (0.45)
Feedback/evaluation provided by Board	1,438	3.77 (0.63)	68	3.90 (0.31)	838	3.84 (0.53)	600	3.68 (0.75)
Timeliness of providing feedback	1,450	3.71 (0.73)	69	3.88 (0.32)	841	3.79 (0.60)	609	3.58 (0.88)
Comprehensiveness of feedback provided	1,439	3.75 (0.66)	69	3.90 (0.30)	835	3.81 (0.56)	604	3.66 (0.76)
Fairness/objectivity of Board findings	1,435	3.77 (0.62)	69	3.86 (0.35)	833	3.80 (0.56)	602	3.73 (0.69)
Time given to correct deficiencies	1,248	3.87 (0.47)	60	3.93 (0.25)	742	3.89 (0.40)	506	3.82 (0.56)
Fairness in monitoring compliance	1,370	3.83 (0.55)	63	3.94 (0.25)	792	3.86 (0.48)	578	3.79 (0.63)
Overall benefit of approval process	1,445	3.77 (0.64)	69	3.88 (0.32)	842	3.81 (0.57)	603	3.71 (0.73)
Due process for disagreements re. findings	1,068	3.79 (0.59)	44	3.89 (0.32)	628	3.82 (0.52)	440	3.75 (0.68)

FY09 CORE Data – Survey of Education Programs  
Texas Data

Figure 12: Question 4h: Rate the Fairness/Objectivity of BON Findings from the Approval Process



Overall, education programs surveyed assessed the BON’s involvement in approving distance education programs as “somewhat essential” (Education Programs Question 5).

Table 68: Education Programs Question 5: Education Programs’ Perceptions of Distance Education Approval Process  
(Texas Compared to Aggregate: AVERAGE)

<i>How essential or inessential is the Board of Nursing’s involvement in approving distance education programs? (Scale: 4 = very essential; 3 = somewhat essential; 2 = somewhat inessential; 1 = not essential)</i>	<b>Aggregate (All BONs)</b>		<b>Texas (Independent)</b>		<b>Independent BONs</b>		<b>Umbrella BONs</b>	
	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>
FY02	153	3.01 (0.98)	–	–	99	3.06 (0.90)	54	2.93 (1.11)
FY05	398	3.02 (0.98)	50	2.80 (1.01)	273	3.06 (0.96)	125	2.93 (1.03)
FY07	983	2.91 (1.01)	75	2.79 (0.98)	625	2.92 (1.01)	358	2.91 (1.03)
FY09	1,068	3.27 (0.98)	52	3.27 (1.03)	619	3.28 (0.97)	449	3.25 (1.00)

Nearly 14 percent of the education programs surveyed received sanctions or faced closure in the past two years (Education Programs Question 13).

Table 69: Education Programs Question 13: Percent of Education Programs that Received Sanctions or Faced Closure in the Past Two Years  
(Texas Compared to Aggregate: BELOW AVERAGE)

<i>During the past 2 years, has your nursing program received sanctions, faced closure, or been the subject of additional monitoring by the Board of Nursing?</i>	<b>Aggregate (All BONs)</b>		<b>Texas (Independent)</b>		<b>Independent BONs</b>		<b>Umbrella BONs</b>	
	<b>n</b>	<b>% “Yes”</b>	<b>n</b>	<b>% “Yes”</b>	<b>n</b>	<b>% “Yes”</b>	<b>n</b>	<b>% “Yes”</b>
FY02	188	5.85%	–	–	119	7.56%	69	2.90%
FY05	601	4.83%	76	5.26%	378	6.61%	223	1.79%
FY07	1541	11.2%	102	6.86%	914	11.5%	627	10.8%
FY09	1748	13.5%	91	5.49%	925	14.8%	823	12.0%

Education programs receiving sanctions in the past two years rated the BON's approval process as "fair" (Education Programs Question 14).

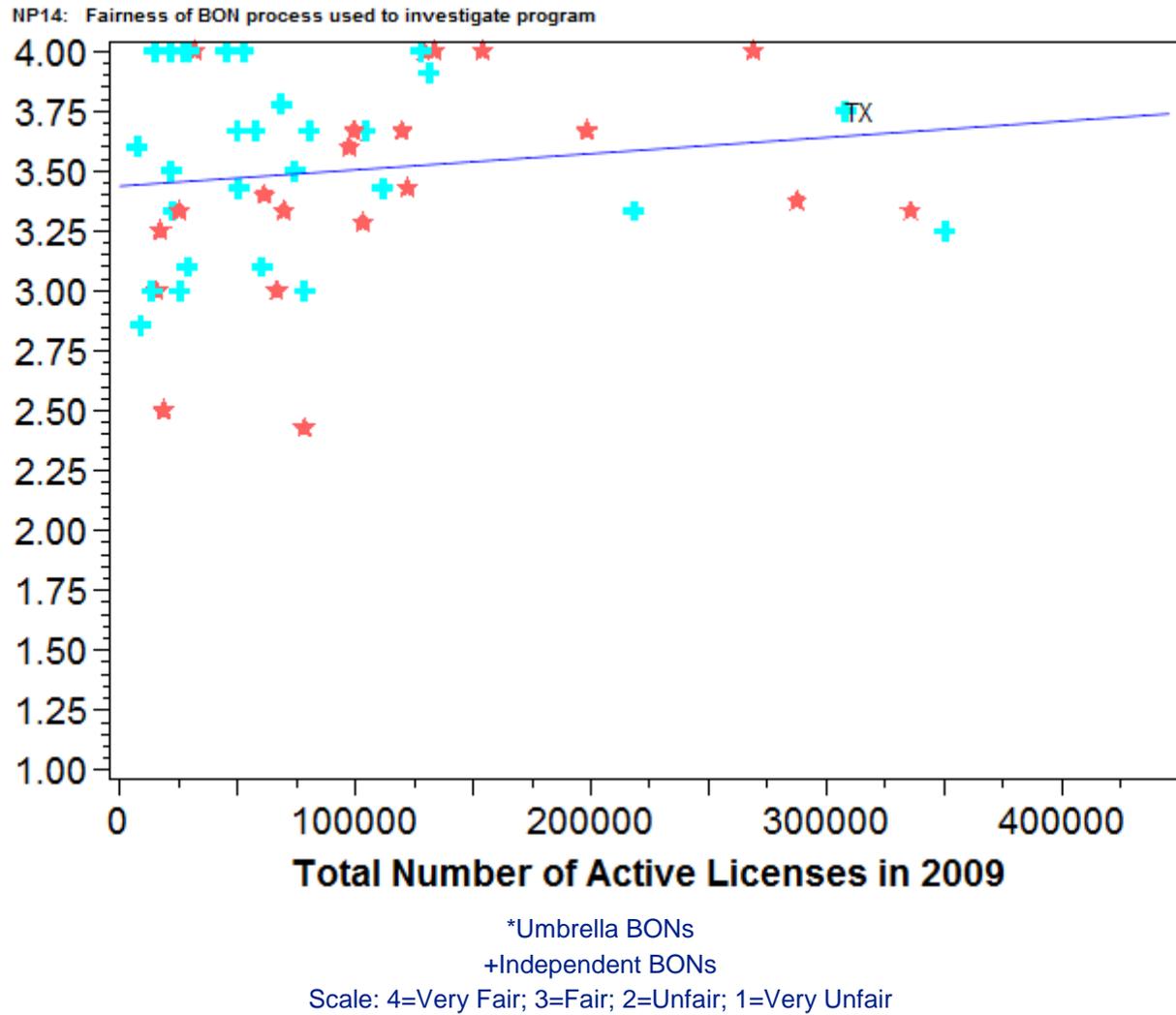
Table 70: Education Programs Question 14: Programs Receiving Sanctions' Perceptions Regarding the Process Used by BON to Investigate Problems

(Texas Compared to Aggregate: Not Enough Data)

<i>Overall, how fair or unfair to all parties was the process used by the Board to investigate and resolve problems? (Scale: 4 = very fair; 3 = fair; 2 = unfair; 1 = very unfair)</i>	<b>Aggregate (All BONs)</b>		<b>Texas (Independent)</b>		<b>Independent BONs</b>		<b>Umbrella BONs</b>	
	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>
FY02	11	3.36 (0.81)	–	–	9	3.33 (0.87)	2	3.50 (0.71)
FY05	74	3.54 (0.55)	12	3.50 (0.80)	56	3.57 (0.57)	18	3.44 (0.51)
FY07	151	3.62 (0.62)	7	3.86 (0.38)	89	3.65 (0.60)	62	3.58 (0.64)
FY09	223	3.43 (0.70)	4	3.75 (0.50)	130	3.47 (0.71)	93	3.39 (0.69)

FY09 CORE Data – Survey of Education Programs  
Texas Data

Figure 13: Question 14: Fairness of BON Investigation Process



Overall, 95 percent of the education programs receiving sanctions in the past two years rated the BON’s involvement as “appropriate” and 92 percent rated the BON’s actions as “timely” (Education Programs Question 15 and 16).

Table 71: Education Programs Questions 15 and 16: Programs Receiving Sanctions’ Perceptions Regarding Outcome Appropriateness and BON Timeliness – FY02

<i>Overall, were the outcomes of the Board of Nursing’s involvement appropriate or inappropriate?</i>	Aggregate (All BONs)		Texas (Independent)	
	n	% “Yes”	n	% “Yes”
<i>Overall, did the Board of Nursing act in a timely or timely manner?</i>				
Appropriateness of involvement of Board of Nursing	7	100%	–	–
Timeliness of Board of Nursing	9	100%	–	–

Table 72: Education Programs Questions 15 and 16: Programs Receiving Sanctions’ Perceptions Regarding Outcome Appropriateness and BON Timeliness – FY05

<i>Overall, were the outcomes of the Board of Nursing’s involvement appropriate or inappropriate?</i>	Aggregate (All BONs)		Texas (Independent)	
	n	% “Yes”	n	% “Yes”
<i>Overall, did the Board of Nursing act in a timely or timely manner?</i>				
Appropriateness of involvement of Board of Nursing	65	95.4%	11	81.8%
Timeliness of Board of Nursing	64	93.8%	13	76.9%

Table 73: Education Programs Questions 15 and 16: Programs Receiving Sanctions’ Perceptions Regarding Outcome Appropriateness and BON Timeliness- FY07

<i>Overall, were the outcomes of the Board of Nursing’s involvement appropriate or inappropriate?</i>	Aggregate (All BONs)		Texas (Independent)		Independent BONs		Umbrella BONs	
	n	% “Yes”	n	% “Yes”	n	% “Yes”	n	% “Yes”
<i>Overall, did the Board of Nursing act in a timely or timely manner?</i>								
Appropriateness of involvement of Board of Nursing	130	94.6%	7	100.0%	81	93.8%	49	95.9%
Timeliness of Board of Nursing	142	92.3%	7	100.0%	86	94.2%	56	89.3%

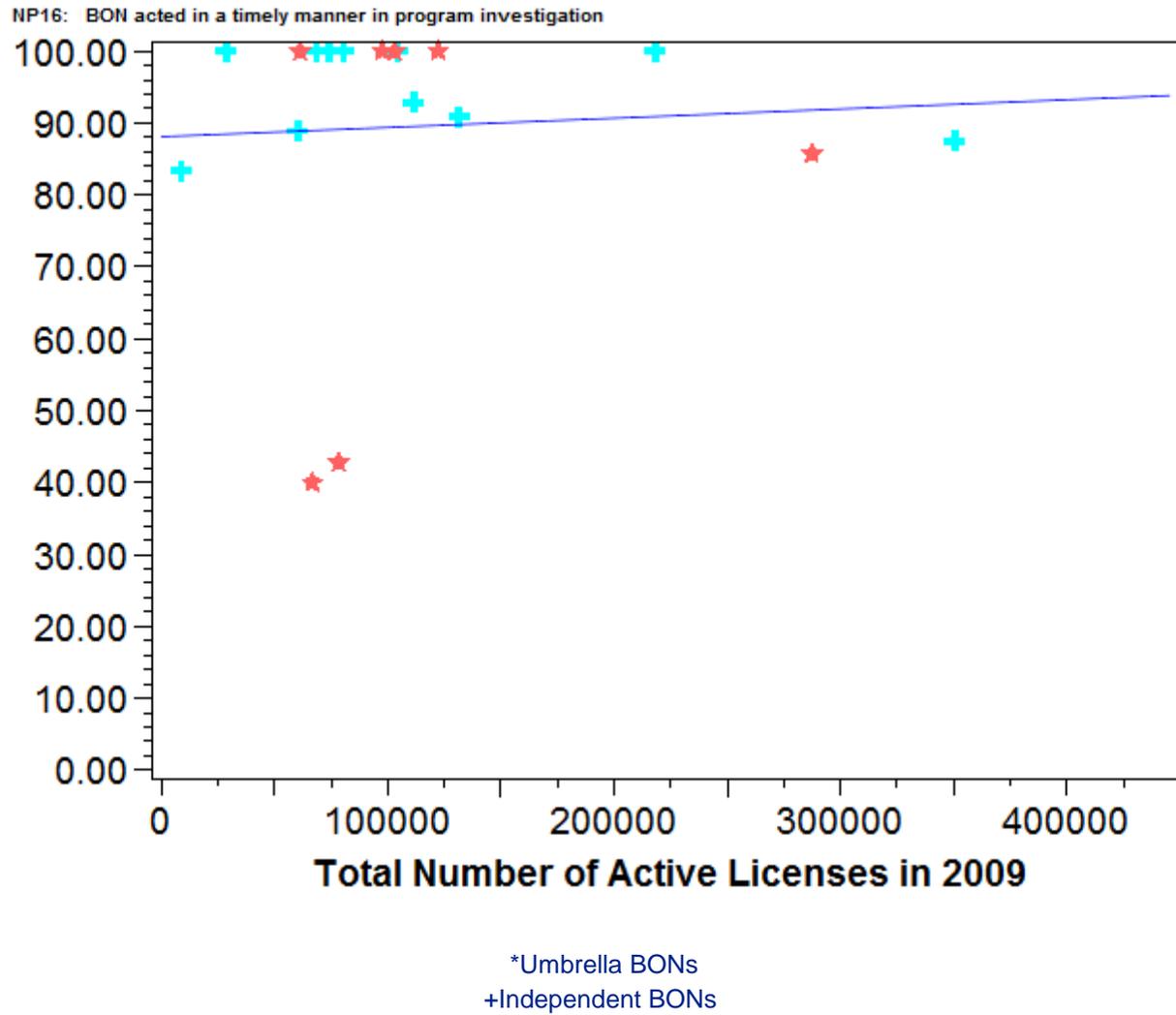
Table 74: Education Programs Question 15 and 16: Programs Receiving Sanctions' Perceptions Regarding Outcome Appropriateness and BON Timeliness – FY09

(Texas Compared to Aggregate: Not Enough Data)

<i>Overall, were the outcomes of the Board of Nursing's involvement appropriate or inappropriate?</i>	<b>Aggregate (All BONs)</b>		<b>Texas (Independent)</b>		<b>Independent BONs</b>		<b>Umbrella BONs</b>	
	<b>n</b>	<b>% "Yes"</b>	<b>n</b>	<b>% "Yes"</b>	<b>n</b>	<b>% "Yes"</b>	<b>n</b>	<b>% "Yes"</b>
<i>Overall, did the Board of Nursing act in a timely or timely manner?</i>								
Appropriateness of involvement of Board of Nursing	201	95.0%	4	100.0%	112	97.3%	89	92.1%
Timeliness of Board of Nursing	207	92.3%	4	100.0%	119	95.0%	88	88.6%

FY09 CORE Data – Survey of Education Programs  
Texas Data

Figure 14: Question 16: Percent of Programs Saying BON was Timely in the Investigation Process



Overall, those education programs receiving sanctions thought the BON kept them “well informed” during the investigate process. Education programs from independent BON states rated their BON’s involvement higher than those from umbrella BON states (Education Programs Question 17).

Table 75: Education Programs Question 17: Programs Receiving Sanctions’ Perceptions Regarding How Well the BON Kept Them Informed  
(Texas Compared to Aggregate: Not Enough Data)

<i>Overall, how informed or ununiformed did the Board of Nursing keep you? (Scale: 4 = very well informed; 3 = well informed; 2 = minimally informed; 1 = not informed at all)</i>	<b>Aggregate (All BONs)</b>		<b>Texas (Independent)</b>		<b>Independent BONs</b>		<b>Umbrella BONs</b>	
	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>
FY02	13	3.77 (0.60)	–	–	9	3.67 (0.71)	4	4.00 (0.00)
FY05	83	3.41 (0.75)	14	3.64 (0.50)	60	3.50 (0.62)	23	3.17 (0.98)
FY07	154	3.47 (0.71)	7	3.86 (0.38)	90	3.57 (0.62)	64	3.34 (0.80)
FY09	224	3.30 (0.77)	4	3.50 (0.58)	129	3.45 (0.72)	95	3.11 (0.81)

## LICENSURE – BONs

Of the BONs surveyed, 70 percent require federal criminal background checks; 87 percent of the responding independent BONs indicated that federal checks are required while only 30 percent of the umbrella BONs indicated that to be the case (BON Question 18).

Table 76: BONs Question 18: Federal Criminal Background Checks

<i>Does your board require <u>federal</u> criminal background checks?</i>	Aggregate (All BONs)		Texas (Independent)	Independent BONs		Umbrella BONs	
	n	# “Yes” (% “Yes”)	# “Yes”	n	# “Yes” (% “Yes”)	n	# “Yes” (% “Yes”)
Requires criminal background checks	33	23 (70%)	1	23	20 (87%)	10	3 (30%)

All of BONs surveyed use Nursys® when licensing a nurse. A majority also use the Falsified Identity Tracking System (FITS) and other state BON websites (BON Question 19).

Table 77: BONs Question 19: Database Usage

<i>Which of the following databases does your board use when licensing a nurse?</i>	<b>Aggregate (All BONs)</b>		<b>Texas (Independent)</b>	<b>Independent BONs</b>		<b>Umbrella BONs</b>	
	<b>n</b>	<b># “Yes” (% “Yes”)</b>	<b># “Yes”</b>	<b>n</b>	<b># “Yes” (% “Yes”)</b>	<b>n</b>	<b># “Yes” (% “Yes”)</b>
Sex Offender	33	8 (24%)	1	23	7 (30%)	10	1 (10%)
Parole database	33	1 (3%)	0	23	0 (0%)	10	1 (10%)
Nursys	33	33 (100%)	1	23	100%	10	10 (100%)
FITS	33	20 (61%)	1	23	15 (65%)	10	5 (50%)
Accreditation database	33	6 (18%)	0	23	4 (17%)	10	2 (20%)
Other state boards of nursing websites	33	22 (67%)	1	23	16 (70%)	10	6 (60%)
State only criminal background checks	33	11 (33%)	0	23	8 (35%)	10	3 (30%)
Other licensing boards	33	15 (46%)	0	23	11 (48%)	10	4 (40%)
Other	33	12 (36%)	1	23	10 (44%)	10	2 (20%)

A majority of the BONs surveyed perform audits of the license process (BON Question 20).

Table 78: BONs Question 20: License Process Audits

<i>Does your board perform audits of the license process?</i>	<b>Aggregate (All BONs)</b>		<b>Texas (Independent)</b>	<b>Independent BONs</b>		<b>Umbrella BONs</b>	
	<b>n</b>	<b># “Yes” (% “Yes”)</b>	<b># “Yes”</b>	<b>n</b>	<b># “Yes” (% “Yes”)</b>	<b>n</b>	<b># “Yes” (% “Yes”)</b>
Performs audits of license process	33	22 (67%)	1	23	15 (65%)	10	7 (70%)

BONs process either most or none of their initial licensures online (BON Question 21).

Table 79: BONs Question 21: Percent of Initial Licenses Processed Online  
(Texas Compared to Aggregate: ABOVE AVERAGE)

<i>What percentage of initial licenses are processed online?</i>	<b>Aggregate (All BONs)</b>		<b>Texas (Independent)</b>	<b>Independent BONs</b>		<b>Umbrella BONs</b>	
	<b>n</b>	<b>mean (std)</b>	<b>mean</b>	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>
Percentage of initial licenses processed online	32	24% (38%)	66%	23	24% (39%)	9	22% (35%)

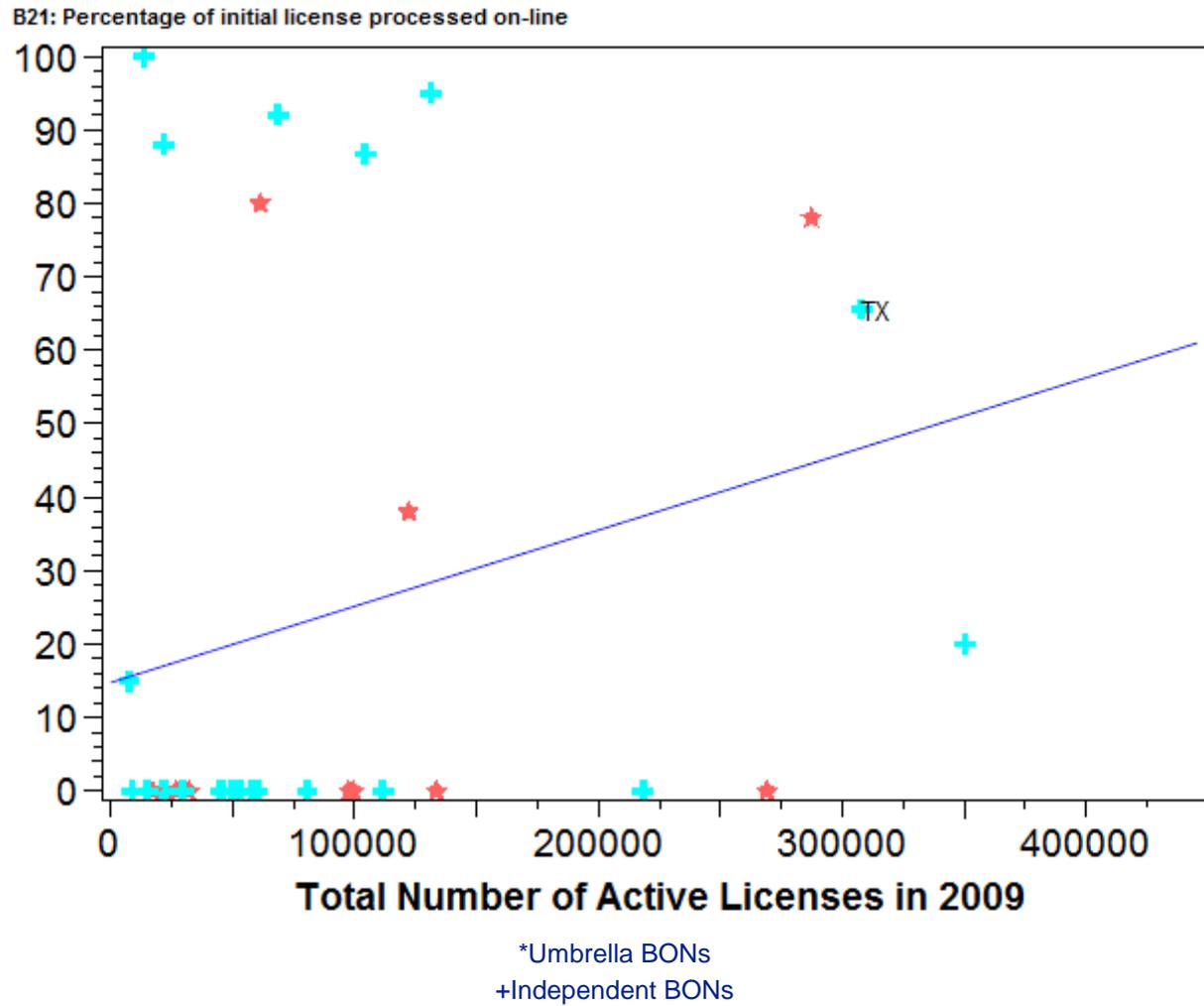
BONs process most renewals online (BON Question 22).

Table 80: BONs Question 22: Percent of Licensure Renewals Processed Online  
(Texas Compared to Aggregate: AVERAGE)

<i>What percentage of licensure renewals are processed online?</i>	<b>Aggregate (All BONs)</b>		<b>Texas (Independent)</b>	<b>Independent BONs</b>		<b>Umbrella BONs</b>	
	<b>n</b>	<b>mean (std)</b>	<b>mean</b>	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>
Percentage of renewals processed online	33	75% (28%)	91%	23	77% (24%)	10	72% (38%)

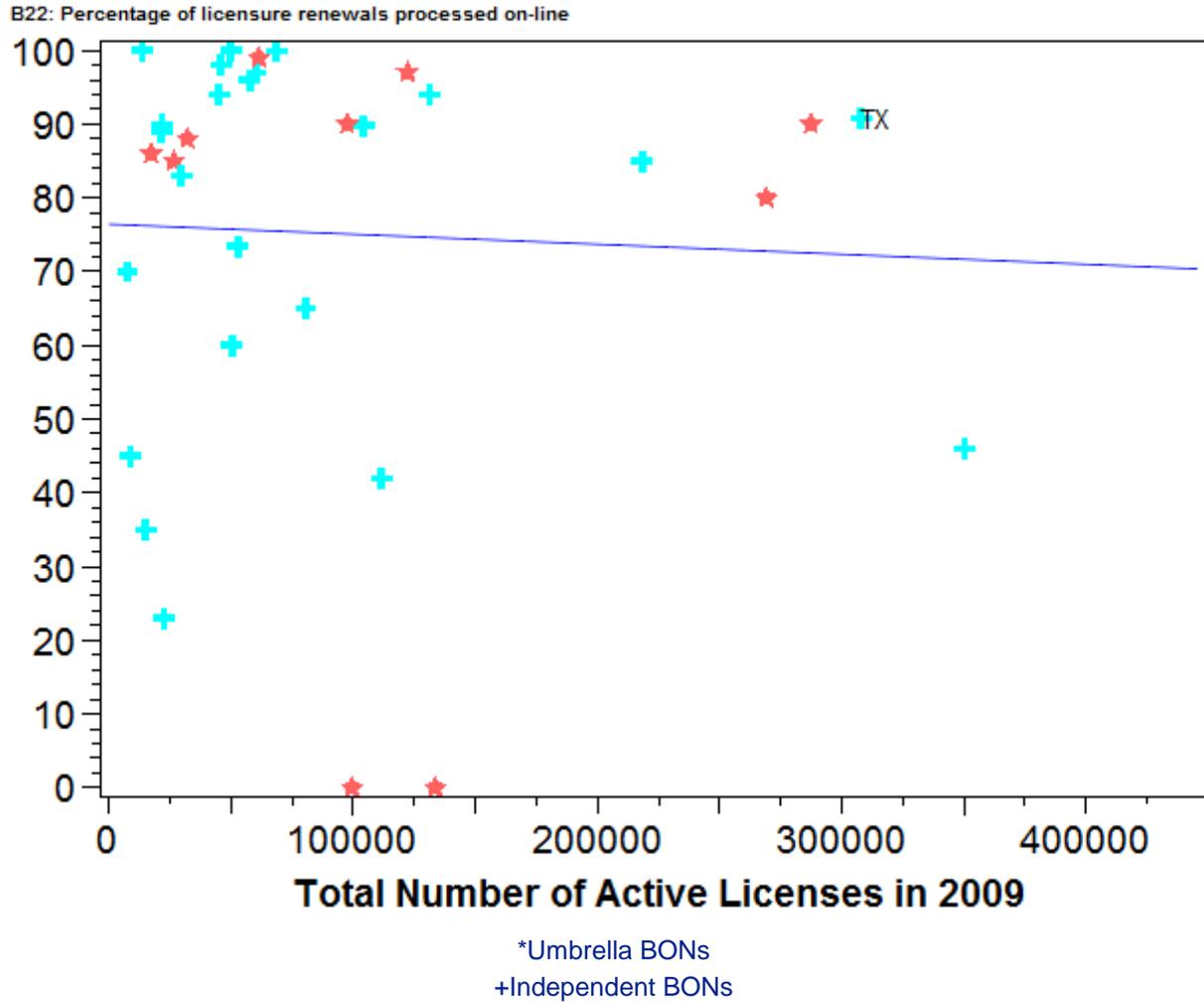
FY09 CORE Data – Survey of BON  
Texas Data

Figure 15: Question 21: Percentage of Initial Licenses Processed Online



FY09 CORE Data – Survey of BONs  
Texas Data

Figure 16: Question 22: Percentage of Licensure Renewals Processed Online



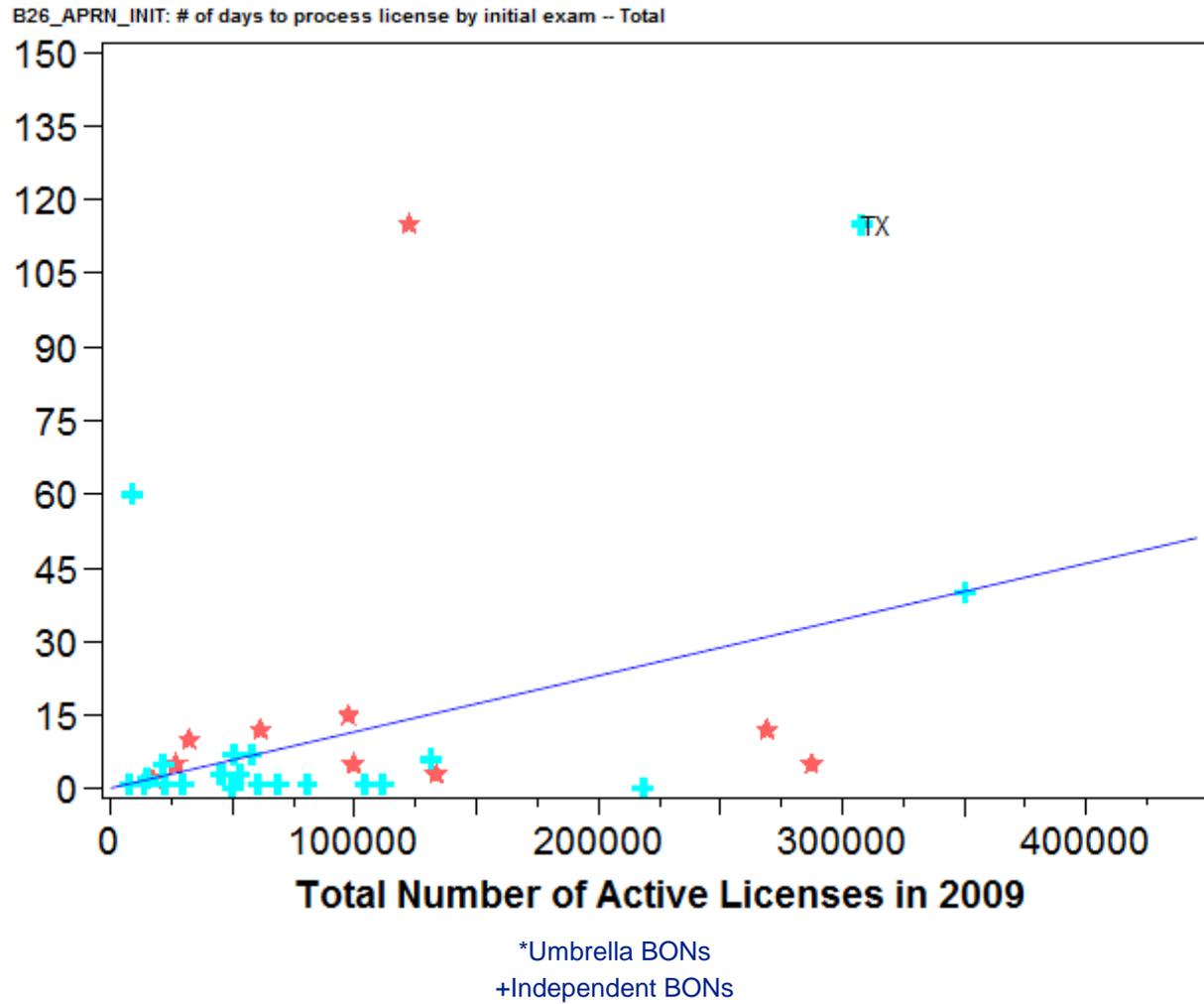
On average, it takes BONs 11 days to process licenses by initial examination and four days to process renewals. It typically takes independent BONs 12 days to process licenses by initial examination while it takes umbrella BONs seven days (BON Question 26).

Table 81: BONs Question 26: Time to Process Licensure Applications  
(Texas Compared to Aggregate: Initial exam – BELOW AVERAGE; Renewals -- AVERAGE)

<i>During FY2009, for each type of nurse, what was the length of time in days it took to process applications for licensure from receipt of all required information to authorization to practice?</i>	<b>Aggregate (All BONs)</b>		<b>Texas (Independent)</b>	<b>Independent BONs</b>		<b>Umbrella BONs</b>	
	<b>n</b>	<b>mean (std)</b>	<b>mean</b>	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>
<b>Licensure by initial examination</b>							
LPN/VN	18	13 (31)	121	15	14 (33)	3	4 (2)
RN	17	12 (28)	109	14	14 (31)	3	3 (2)
APRN	16	6 (12)	49	14	6 (13)	4	4 (2)
Total	30	11 (23)	115	22	12 (27)	8	7 (5)
<b>Renewals</b>							
LPN/VN	16	2 (1)	–	13	2 (1)	3	1 (1)
RN	15	2 (1)	–	12	2 (1)	3	1 (1)
APRN	15	3 (5)	–	12	3 (5)	3	1 (1)
Total	28	4 (4)	3	21	3 (4)	7	4 (3)

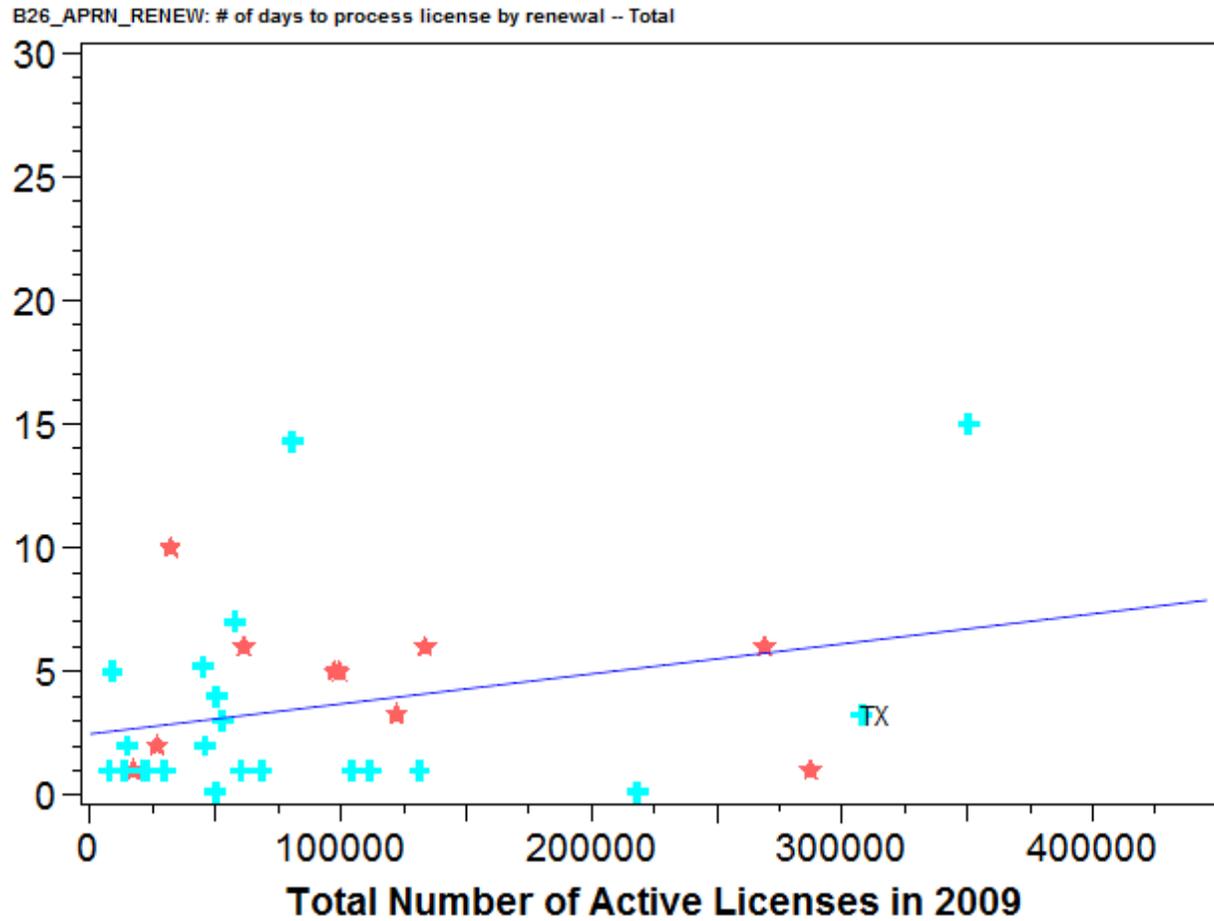
FY09 CORE Data – Survey of BONs  
Texas Data

Figure 17: Question 26: Average Number of Days to Process Licensure by Initial Examination – Total



FY09 CORE Data – Survey of BONs  
Texas Data

Figure 18: Question 26: Average Number of Days to Process Licensure by Renewals – Total



\*Umbrella BONs  
+Independent BONs

## LICENSURE – Nurses

Almost 80 percent of the nurses surveyed held an RN license (Nurses Question 1).

Table 82: Nurses Question 1: Types of Licenses/Certifications Held – FY02

<i>What type(s) of nursing license/certification do you hold?</i>	<b>Aggregate (All BONs)</b>	<b>Texas (Independent)</b>
n	2,669	–
LPN/VN	24.2%	–
RN	73.1%	–
APRN with prescriptive privileges	4.8%	–
APRN without prescriptive privileges	2.4%	–
Other	2.1%	–

Table 83: Nurses Question 1: Types of Licenses/Certifications Held – FY05

<i>What type(s) of nursing license/certification do you hold?</i>	<b>Aggregate (All BONs)</b>	<b>Texas (Independent)</b>
n	4,912	138
LPN/VN	28.2%	34.8%
RN	72.6%	65.9%
APRN with prescriptive privileges	1.2%	0.0%
APRN without prescriptive privileges	0.7%	0.0%
Other	1.6%	0.0%

Table 84: Nurses Question 1: Types of Licenses/Certifications Held – FY07

<i>What type(s) of nursing license/certification do you hold?</i>	<b>Aggregate (All BONs)</b>	<b>Texas (Independent)</b>	<b>Independent BONs</b>	<b>Umbrella BONs</b>
n	16,455	299	8,759	7,696
LPN/VN	22.7%	23.7%	20.2%	25.7%
RN	76.2%	74.9%	79.2%	72.8%
APRN with prescriptive privileges	2.1%	1.0%	1.8%	2.4%
APRN without prescriptive privileges	0.9%	0.3%	0.8%	1.1%
Other	2.8%	1.3%	2.1%	3.5%

Table 85: Nurses Question 1: Types of Licenses/Certifications Held – FY09

<i>What type(s) of nursing license/certification do you hold?</i>	<b>Aggregate (All BONs)</b>	<b>Texas (Independent)</b>	<b>Independent BONs</b>	<b>Umbrella BONs</b>
n	24,874	412	13,780	11,094
LPN/VN	17.9%	26.5%	19.3%	16.1%
RN	78.8%	72.3%	77.5%	80.5%
APRN with prescriptive privileges	5.1%	4.4%	4.6%	5.7%
APRN without prescriptive privileges	2.3%	1.2%	1.9%	2.7%
Other	4.6%	4.1%	4.6%	4.6%

Of the nurses surveyed, 85 percent were employed as a nurse (Nurses Question 2).

Table 86: Nurses Question 2: Percent Employed as a Nurse  
(Texas Compared to Aggregate: AVERAGE)

<i>Are you currently employed as a nurse?</i>	<b>Aggregate (All BONs)</b>		<b>Texas (Independent)</b>		<b>Independent BONs</b>		<b>Umbrella BONs</b>	
	<b>n</b>	<b>Percent</b>	<b>n</b>	<b>Percent</b>	<b>n</b>	<b>Percent</b>	<b>n</b>	<b>Percent</b>
FY02	2656	88.4%	–	–	2199	88.3%	457	88.8%
FY05	5029	89.6%	140	95.0%	3918	89.7%	1111	89.3%
FY07	16374	90.5%	299	92.6%	8,724	92.1%	7,650	88.6%
FY09	24793	85.1%	411	87.8%	13,733	85.7%	11,060	84.4%

For those nurses surveyed who were not employed as a nurse, it had been five years since they were last employed as a nurse (Nurses Question 2a).

Table 87: Nurses Question 2a: Number of Years Since Employed as a Nurse if not Currently Employed in Nursing  
(Texas Compared to Aggregate: ABOVE AVERAGE)

<i>If you checked no to question 2, how long has it been since you were employed in nursing?</i>	<b>Aggregate (All BONs)</b>		<b>Texas (Independent)</b>		<b>Independent BONs</b>		<b>Umbrella BONs</b>	
	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>
FY02	309	6.3 (7.44)	–	–	257	6.38 (7.57)	52	5.97 (6.81)
FY05	462	5.4 (9.12)	6	1.0 (1.41)	352	4.50 (8.77)	110	8.11 (9.71)
FY07	1,009	4.7 (6.60)	9	0.3 (0.30)	397	3.4 (6.13)	612	5.44 (6.76)0
FY09	1,296	5.0 (5.58)	18	9.1 (11.37)	707	5.0 (5.7)	589	5.05 (5.5)

A half percent of the nurses surveyed were nursing students at the time of the survey (Nurses Question 2b).

Table 88: Nurses Question 2b: Currently a Nursing Student  
(Texas Compared to Aggregate: AVERAGE)

<i>Are you currently a nursing student?</i>	<b>Aggregate (All BONs)</b>		<b>Texas (Independent)</b>		<b>Independent BONs</b>		<b>Umbrella BONs</b>	
	<b>n</b>	<b>Percent</b>	<b>n</b>	<b>Percent</b>	<b>n</b>	<b>Percent</b>	<b>n</b>	<b>Percent</b>
FY07	16383	1.2%	299	0.7%	8729	1.4%	7654	1.0%
FY09	24797	0.5%	411	0.2%	13736	0.5%	11061	0.5%

Half of the nurses surveyed were employed in a hospital (Nurses Question 3).

Table 89: Nurses Question 3: Place of Employment – FY02

<i>Which one of the following best describes the type of organization that is your current primary place of employment?</i>	<b>Aggregate (All BONs)</b>	<b>Texas (Independent)</b>
n	2,415	–
Hospital	50.7%	–
Long-term care facility	10.7%	–
Community-based/Ambulatory care	24.6%	–
Temporary service agency	1.7%	–
Other setting	12.4%	–

Table 90: Nurses Question 3: Place of Employment – FY05

<i>Which one of the following best describes the type of organization that is your current primary place of employment?</i>	<b>Aggregate (All BONs)</b>	<b>Texas (Independent)</b>
n	4,607	135
Hospital	57.9%	68.1%
Long-term care facility	13.8%	12.6%
Community-based/Ambulatory care	18.9%	15.6%
Temporary service agency	0.7%	0.7%
Other setting	8.7%	8.9%

Table 91: Nurses Question 3: Place of Employment – FY07

<i>Which one of the following best describes the type of organization that is your current primary place of employment?</i>	<b>Aggregate (All BONs)</b>	<b>Texas (Independent)</b>	<b>Independent BONs</b>	<b>Umbrella BONs</b>
n	15,143	283	8,181	6,962
Hospital	64.3%	75.3%	68.5%	59.3%
Academia/Nursing Education Programs	1.1%	0.4%	1.0%	1.2%
Long-term care facility	12.5%	10.2%	12.1%	13.0%
Community-based/Ambulatory care	14.6%	10.2%	12.0%	17.6%
Managed Care Organization	0.6%	–	0.5%	0.8%
Temporary service agency	0.6%	–	0.5%	0.7%
Other setting	6.3%	3.9%	5.4%	7.3%

Table 92: Nurses Question 3: Place of Employment – FY09

<i>Which one of the following best describes the type of organization that is your current primary place of employment?</i>	<b>Aggregate (All BONs)</b>	<b>Texas (Independent)</b>	<b>Independent BONs</b>	<b>Umbrella BONs</b>
n	22,288	381	12,441	9,847
Hospital	49.6%	48.6%	49.4%	49.9%
Academia/Nursing Education Programs	2.6%	2.4%	2.6%	2.6%
Long-term care facility	10.4%	9.7%	10.6%	10.3%
Community-based/Ambulatory care	23.5%	23.4%	23.6%	23.3%
Managed Care Organization	1.4%	1.8%	1.4%	1.5%
Temporary service agency	0.7%	1.6%	0.6%	0.8%
Other setting	11.7%	12.6%	11.8%	11.6%

Respondents had been employed as a nurse for 22 years at the time of the survey (Nurses Question 4).

Table 93: Nurses Question 4: Average Number of Years Licensed to Practice as a Nurse  
(Texas Compared to Aggregate: AVERAGE)

<i>How long have you been licensed to practice as a nurse (total time at all levels of licensure)?</i>	<b>Aggregate (All BONs)</b>		<b>Texas (Independent)</b>		<b>Independent BONs</b>		<b>Umbrella BONs</b>	
	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>
FY02	2,618	20 (11)	–	–	2165	20 (11)	453	20 (12)
FY05	4,918	13 (14)	138	3 (7)	3840	12 (14)	1078	13 (15)
FY07	16,323	9 (13)	298	2 (6)	8,695	6 (11)	7,628	12 (14)
FY09	24,707	22 (14)	411	21 (14)	13688	22 (14)	11,019	23 (14)

Overall, nurses surveyed indicated they were “satisfied” with the licensure process (Nurses Question 14).

Table 94: Nurses Question 14: Nurses’ Perceptions Regarding the Licensure Process  
 (Texas Compared to Aggregate: ABOVE AVERAGE)

<i>How satisfied or dissatisfied are you with the licensure process? (Scale: 4 = very satisfied; 3 = satisfied; 2 = dissatisfied; 1 = very dissatisfied)</i>	<b>Aggregate (All BONs)</b>		<b>Texas (Independent)</b>		<b>Independent BONs</b>		<b>Umbrella BONs</b>	
	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>
FY07	16,118	3.35 (0.613)	283	3.36 (0.60)	8,561	3.34 (0.61)	7557	3.36 (0.62)
FY09	23968	3.23 (0.60)	398	3.35 (0.62)	13325	3.25 (0.61)	10,643	3.20 (0.60)

## LICENSURE – Employers

Almost all of the employers surveyed held the title of “Director of Nursing/Chief Nursing Officer” (Employers Question 1).

Table 95: Employers Question 1: Position of Respondent – FY02

<i>Which of the following describes your position?</i>	<b>Aggregate (All BONs)</b>	<b>Texas (Independent)</b>
n	480	–
Director of Nursing/Chief Nursing Officer	83.8%	–
Other supervising nurse	5.8%	–
Non-nurse employer/supervisor	4.8%	–
Other	5.6%	–

Table 96: Employers Question 1: Position of Respondent – FY05

<i>Which of the following describes your position?</i>	<b>Aggregate (All BONs)</b>	<b>Texas (Independent)</b>
n	561	18
Director of Nursing/Chief Nursing Officer	89.9%	88.9%
Other supervising nurse	4.4%	5.6%
Non-nurse employer/supervisor	1.6%	–
Other	5.0%	5.6%

Table 97: Employers Question 1: Position of Respondent – FY07

<i>Which of the following describes your position?</i>	<b>Aggregate (All BONs)</b>	<b>Texas (Independent)</b>	<b>Independent BONs</b>	<b>Umbrella BONs</b>
n	890	33	626	264
Director of Nursing/Chief Nursing Officer	94.6%	100.0%	94.4%	95.1%
Other supervising nurse	1.5%	–	1.4%	1.5%
Non-nurse employer/supervisor	0.6%	–	0.5%	0.8%
Other	3.4%	–	3.7%	2.6%

Table 98: Employers Question 1: Position of Respondent – FY09

<i>Which of the following describes your position?</i>	<b>Aggregate (All BONs)</b>	<b>Texas (Independent)</b>	<b>Independent BONs</b>	<b>Umbrella BONs</b>
n	1,224	20	717	507
Director of Nursing/Chief Nursing Officer	96.2%	90.0%	95.7%	96.8%
Other supervising nurse	3.0%	–	3.5%	2.4%
Non-nurse employer/supervisor	0.8%	10.0%	0.8%	0.8%
Other	–	–	–	–

Employers surveyed had been in their position for an average of six years (Employers Question 1a).

Table 99: Employers Question 1a: Length of Employment (Number of Years in Current Position)  
(Texas Compared to Aggregate: ABOVE AVERAGE)

<i>How long have you been in this position?</i>	<b>Aggregate (All BONs)</b>		<b>Texas (Independent)</b>		<b>Independent BONs</b>		<b>Umbrella BONs</b>	
	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>
FY02	406	7 (7)	–	–	342	7 (7)	64	6 (7)
FY05	563	7 (7)	18	5 (5)	452	7 (7)	111	7 (7)
FY07	697	7 (7)	25	5 (6)	497	6 (7)	200	7 (7)
FY09	1,158	6 (7)	17	4 (3)	681	6 (7)	477	6 (7)

Almost 60 percent of the employers surveyed for FY09 worked in a long-term care facility. This represents a shift from previous surveys where most of the employers surveyed worked in hospitals (Employers Question 2).

Table 100: Employers Question 2: Place of Employment – FY02

<i>Which of the following best describes your place of employment?</i>	<b>Aggregate (All BONs)</b>	<b>Texas (Independent)</b>
n	483	–
Hospital	49.3%	–
Long-term care facility	30.9%	–
Community-based/Ambulatory care	12.2%	–
Temporary service agency	0.6%	–
Other setting	7.0%	–

Table 101: Employers Question 2: Place of Employment – FY05

<i>Which of the following best describes your place of employment?</i>	<b>Aggregate (All BONs)</b>	<b>Texas (Independent)</b>
n	562	18
Hospital	49.3%	94.4%
Long-term care facility	32.4%	5.6%
Community-based/Ambulatory care	10.9%	–
Temporary service agency	1.2%	–
Other setting	6.2%	–

Table 102: Employers Question 2: Place of Employment – FY07

<i>Which of the following best describes your place of employment?</i>	<b>Aggregate (All BONs)</b>	<b>Texas (Independent)</b>	<b>Independent BONs</b>	<b>Umbrella BONs</b>
n	888	33	624	264
Hospital	56.6%	63.6%	55.0%	60.6%
Long-term care facility	34.2%	36.4%	34.8%	33.0%
Community-based/Ambulatory care	3.9%	–	4.8%	1.9%
Temporary service agency	0.3%	–	0.5%	–
Other setting	4.8%	–	5.0%	4.5%

Table 103: Employers Question 2: Place of Employment – FY09

<i>Which one of the following best describes the type of organization that is your current primary place of employment?</i>	<b>Aggregate (All BONs)</b>	<b>Texas (Independent)</b>	<b>Independent BONs</b>	<b>Umbrella BONs</b>
n	1,263	20	744	519
Hospital	20.7%	15.0%	21.8%	19.3%
Long-term care facility	58.8%	30.0%	57.0%	61.5%
Community-based/Ambulatory care	16.7%	40.0%	17.9%	15.0%
Temporary service agency	0.0%	–	–	–
Other setting	3.7%	15.0%	3.4%	4.2%

The average number of FTE RN nurses employed at the facilities of the responding employers in FY09 was 45. This represents a drop from previous years due to the increased proportion of employers working in long-term care facilities (Employers Question 3).

Table 104: Employers Question 3: Number of FTE Nursing Personnel Employed – FY02

<i>Approximately how many full-time equivalent (FTE) nurses are employed by your facility/agency?</i>	<b>Aggregate (All BONs)</b>		<b>Texas (Independent)</b>	
	<b>n</b>	<b>mean</b>	<b>n</b>	<b>mean</b>
Registered nurses	465	118	–	–
Nursing assistive personnel	441	54	–	–
Licensed practical/vocational nurses	444	25	–	–
Advanced Practice registered nurses	371	5	–	–
Total	475	202	–	–

Table 105: Employers Question 3: Number of FTE Nursing Personnel Employed – FY05

<i>Approximately how many full-time equivalent (FTE) nurses are employed by your facility/agency?</i>	<b>Aggregate (All BONs)</b>		<b>Texas (Independent)</b>	
	<b>n</b>	<b>mean</b>	<b>n</b>	<b>mean</b>
Registered nurses	486	88	14	178
Nursing assistive personnel	471	56	14	75
Licensed practical/vocational nurses	478	17	14	46
Advanced Practice registered nurses	425	5	12	7
<b>Total</b>	<b>497</b>	<b>160</b>	<b>15</b>	<b>285</b>

Table 106: Employers Question 3: Number of FTE Nursing Personnel Employed – FY07

<i>Approximately how many full-time equivalent (FTE) nurses are employed by your facility/agency?</i>	<b>Aggregate (All BONs)</b>		<b>Texas (Independent)</b>		<b>Independent BONs</b>		<b>Umbrella BONs</b>	
	<b>n</b>	<b>mean</b>	<b>n</b>	<b>mean</b>	<b>n</b>	<b>mean</b>	<b>n</b>	<b>mean</b>
Registered nurses	815	146	32	85	587	132	246	170
Nursing assistive personnel	721	63	30	38	498	58	233	74
Licensed practical/vocational nurses	751	21	32	28	518	21	233	21
Advanced Practice registered nurses	411	21	11	6	279	25	132	23
<b>Total</b>	<b>836</b>	<b>226</b>	<b>32</b>	<b>151</b>	<b>589</b>	<b>210</b>	<b>247</b>	<b>263</b>

Table 107: Employers Question 3: Number of FTE Nursing Personnel Employed – FY09  
(Texas Compared to Aggregate: BELOW AVERAGE)

<i>Approximately how many full-time equivalent (FTE) nurses are employed by your facility/agency?</i>	<b>Aggregate (All BONs)</b>		<b>Texas (Independent)</b>		<b>Independent BONs</b>		<b>Umbrella BONs</b>	
	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>
Registered nurses	1191	49 (181)	20	13 (30)	705	45 (165)	486	56 (204)
Nursing assistive personnel	1106	45 (67)	19	14 (16)	654	40 (49)	452	52 (86)
Licensed practical/vocational nurses	1140	14 (28)	19	9 (7)	674	13 (16)	452	16 (40)
Advanced Practice registered nurses	707	3 (13)	11	0.1 (0.3)	425	3 (11)	282	4 (15)
<b>Total</b>	<b>1210</b>	<b>105</b>	<b>20</b>	<b>35 (40)</b>	<b>716</b>	<b>94</b>	<b>494</b>	<b>120</b>

Of the employers surveyed, 87 percent most frequently used a web-based verification system to verify licenses (Employers Question 4).

Table 108: Employers Question 4: Percent of Employers Using Method to Verify Licenses – FY05

<i>Which method do you use most frequently to verify licenses? Check all that apply.</i>	<b>Aggregate (All BONs)</b>	<b>Texas (Independent)</b>
<b>n</b>	508	15
Web-based verification system	71.9%	66.7%
Phone – automated system	18.7%	53.3%
Call-in	20.9%	13.3%
E-mail	9.1%	6.7%
Nursys	15.6%	20.0%
Letter	6.1%	13.3%
Fax	2.8%	0.0%

Table 109: Employers Question 4: Percent of Employers Using Method to Verify Licenses – FY07

<i>Which method do you use most frequently to verify licenses? Check all that apply.</i>	<b>Aggregate (All BONs)</b>	<b>Texas (Independent)</b>	<b>Independent BONs</b>	<b>Umbrella BONs</b>
n	866	32	606	260
Web-based verification system	79.1%	68.8%	78.1%	81.5%
Phone – automated system	14.9%	37.5%	17.0%	10.0%
Call-in	13.3%	12.5%	14.5%	10.4%
E-mail	12.2%	6.3%	11.9%	13.1%
Nursys	11.2%	21.9%	11.1%	11.5%
Letter	5.2%	3.1%	5.3%	5.0%
Fax	3.3%	0.0%	3.3%	3.5%

Table 110: Employers Question 4: Percent of Employers Using Method to Verify Licenses – FY09

<i>Which method do you use most frequently to verify licenses? Check only one.</i>	<b>Aggregate (All BONs)</b>	<b>Texas (Independent)</b>	<b>Independent BONs</b>	<b>Umbrella BONs</b>
n	1,229	20	728	501
Web-based verification system	86.7%	85.0%	83.5%	91.4%
Phone – automated system	4.1%	5.0%	4.9%	3.0%
Call-in	2.8%	0.0%	3.2%	2.4%
E-mail	3.4%	10.0%	4.7%	1.6%
Nursys	6.0%	5.0%	7.0%	4.6%
Letter	0.8%	0.0%	1.1%	0.4%
Fax	0.9%	0.0%	1.1%	0.6%

The average number of new graduates hired at the facilities of the responding employers in FY09 was two RNs and five LPN/VNs. The RN count represents a drop from previous years and the LPN/VN count represents an increase from previous years. Both changes are due to the increased proportion of employers working in long-term care facilities (Employers Question 5).

Table 111: Employers Question 5: Number of New Graduates Hired by License Type – FY02

<i>Approximately how many new graduates (licensed 12 months or less) were hired by your facility/agency during the past 12 months?</i>	<b>Aggregate (All BONs)</b>		<b>Texas (Independent)</b>	
	<b>n</b>	<b>mean</b>	<b>n</b>	<b>mean</b>
Number of RNs hired in last 12 mos.	369	8	–	–
Number of LPN/VNs hired in last 12 mos.	442	2	–	–
Number of APRNs hired in last 12 mos.	321	0.5	–	–

Table 112: Employers Question 5: Number of New Graduates Hired by License Type – FY05

<i>Approximately how many new graduates (licensed 12 months or less) were hired by your facility/agency during the past 12 months?</i>	<b>Aggregate (All BONs)</b>		<b>Texas (Independent)</b>	
	<b>n</b>	<b>mean</b>	<b>n</b>	<b>mean</b>
Number of RNs hired in last 12 mos.	510	8	16	19
Number of LPN/VNs hired in last 12 mos.	496	2	15	4
Number of APRNs hired in last 12 mos.	431	0.4	14	0.3

Table 113: Employers Question 5: Number of New Graduates Hired by License Type – FY07

<i>Approximately how many new graduates (licensed 12 months or less) were hired by your facility/agency during the past 12 months?</i>	<b>Aggregate (All BONs)</b>		<b>Texas (Independent)</b>		<b>Independent BONs</b>		<b>Umbrella BONs</b>	
	<b>n</b>	<b>mean</b>	<b>n</b>	<b>mean</b>	<b>n</b>	<b>mean</b>	<b>n</b>	<b>mean</b>
Number of RNs hired in last 12 mos.	540	18	13	17	367	18	173	18
Number of LPN/VNs hired in last 12 mos.	440	18	18	5	300	3	140	4
Number of APRNs hired in last 12 mos.	164	2	5	0.8	103	1	61	3

Table 114: Employers Question 5: Number of New Graduates Hired by License Type – FY09

(Texas Compared to Aggregate: **BELOW AVERAGE**)

<i>Approximately how many new graduates (licensed 12 months or less) were hired by your facility/agency during the past 12 months?</i>	<b>Aggregate (All BONs)</b>		<b>Texas (Independent)</b>		<b>Independent BONs</b>		<b>Umbrella BONs</b>	
	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>
Number of RNs hired in last 12 mos.	1115	4 (23)	16	1 (2)	649	5 (25)	466	5 (19)
Number of LPN/VNs hired in last 12 mos.	1049	2 (4)	16	1 (1)	609	2 (5)	440	2 (2)
Number of APRNs hired in last 12 mos.	670	0.2 (1)	10	0 (0)	397	0.2 (1)	273	0.3 (2)

## ADMINISTRATIVE – BONs

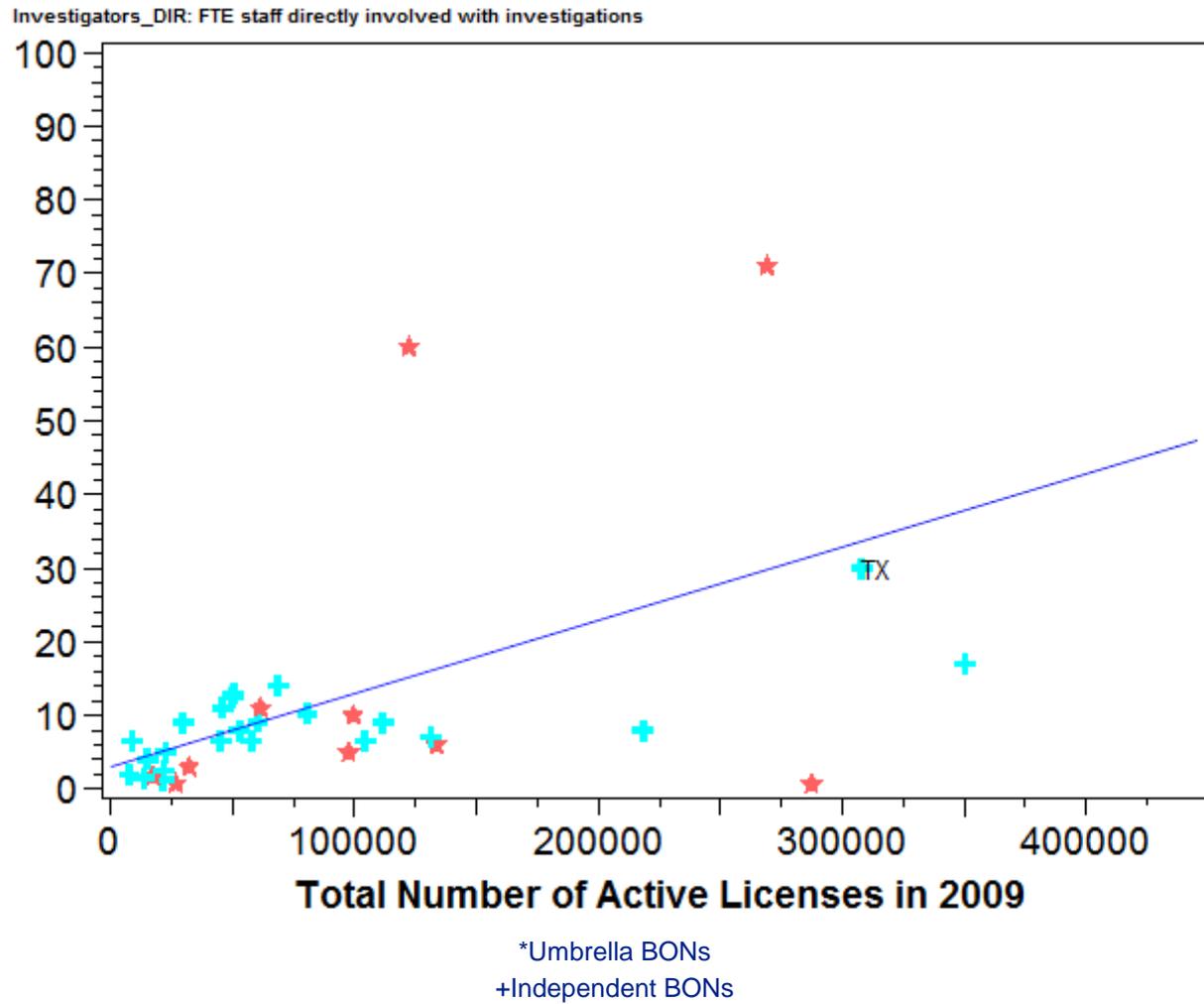
On average, 11.5 FTEs are directly involved in investigations and 4.5 FTEs are indirectly involved. The average number of FTEs in independent BON states directly involved in investigations is 8.7, while the number of FTEs in umbrella BON states directly involved is 18.7 (BON Question 15).

Table 115: BONs Question 15: FTEs Involved with Investigations  
(Texas Compared to Aggregate: ABOVE AVERAGE)

<i>Enter the number of full-time equivalent (FTE) staff who were directly and indirectly involved in the investigative process during FY2009.</i>	Aggregate (All BONs)			Texas (Independent)		Independent BONs			Umbrella BONs		
	n	Direct	Indirect	Direct	Indirect	n	Direct	Indirect	n	Direct	Indirect
<b>Board of Nursing</b>											
Investigators who are nurses	32	3.6	0.1	8.0	2.0	23	3.3	0.1	9	4.3	0.0
Investigators who are not nurses	32	2.8	0.1	15.0	0.0	23	1.9	0.1	9	5.1	0.0
Coordinator/Manager	32	0.6	0.4	2.0	4.0	23	0.6	0.5	9	0.6	0.2
Administrative Support Staff	32	1.1	1.4	3.0	3.0	23	1.3	1.8	9	0.5	0.4
Attorney	32	0.5	0.3	2.0	2.0	23	0.5	0.4	9	0.3	0.0
<b>Non-Board Employees from Other State Agencies</b>											
Investigators who are nurses	32	0.1	0.2	0.0	0.0	23	0.1	0.0	9	0.0	0.7
Investigators who are not nurses	32	2.6	0.2	0.0	0.0	23	0.5	0.0	9	7.9	0.7
Attorney	32	0.1	0.1	0.0	0.0	23	0.1	0.1	9	0.0	0.1
Other	32	0.0	1.7	0.0	0.0	23	0.0	0.0	9	0.0	6.1
<b>Contracted Personnel not Employed by the State</b>											
Other	32	0.1	0.0	0.0	0.0	23	0.1	0.0	9	0.0	0.0
<b>GRAND TOTAL (Standard Deviation)</b>	<b>32</b>	<b>11.5 (15.3)</b>	<b>4.5 (10.0)</b>	<b>30.0 (-)</b>	<b>11.0 (-)</b>	<b>23</b>	<b>8.7 (6.2)</b>	<b>3.0 (3.7)</b>	<b>9</b>	<b>18.7 (26.9)</b>	<b>8.2 (18.0)</b>

FY09 CORE Data – Survey of BONs  
Texas Data

Figure 19: Question 15: Total FTEs Directly Involved with Investigations



On average, 2.0 attorney FTEs are hired for legal services. The average number of attorney FTEs in independent BON states is 2.3 while the average number of attorney FTEs in umbrella BON states is 1.0 (BON Question 16).

Table 116: BONs Question 16: Attorney FTEs  
(Texas Compared to Aggregate: ABOVE AVERAGE)

<i>How many attorney FTEs are assigned for legal services?</i>	Aggregate (All BONs)		Texas (Independent)	Independent BONs		Umbrella BONs	
	n	mean	mean	n	mean	n	mean
Attorney employed by the Board of Nursing	32	0.7	4.0	23	0.9	9	0.2
Attorney General's Office	32	0.9	0.0	23	1.0	9	0.5
Other	32	0.3	0.0	23	0.4	9	0.3
<b>GRAND TOTAL (Standard Deviation)</b>	<b>32</b>	<b>2.0 (2.4)</b>	<b>4.0 (-)</b>	<b>23</b>	<b>2.3 (2.7)</b>	<b>9</b>	<b>1.0 (0.7)</b>

Spending on discipline and alternative to discipline programs takes up one third of expenditures (BON Question 17).

Table 117: BONs Question 17: Expenditures by Functional Area – FY07

<i>Excluding capital expenditures please indicate the Board's total FY2007 expenditures.</i>	Aggregate (All BONs)			Texas (Independent)	Independent BONs			Umbrella BONs		
	n	Average Expenditures	Range	Average Expenditures	n	Average Expenditures	Range	n	Average Expenditures	Range
Total Expenditures	28	\$3,998,837	\$367,000 to \$23,078,334	–	21	\$3232641	\$367,000 to \$23,078,334	6	\$6,808,220	\$1,906,626 to \$14,589,222
Discipline	25	33%	9% to 59%	–	18	34%	17% to 59%	6	31%	9% to 54%
Licensure	23	19 %	5% to 81%	–	18	17%	5% to 32%	4	32%	6% to 81%
Education Program Approval	23	7%	0% to 25%	–	18	8%	2% to 25%	4	2%	0% to 3%
Practice	23	5%	0% to 29%	–	18	6%	0% to 29%	4	1%	0% to 2%
Other	24	36%	0% to 64%	–	18	36%	0% to 29%	5	36%	0% to 52%

Table 118: BONs Question 17: Expenditures by Functional Area – FY09  
 (Texas Compared to Aggregate: ABOVE AVERAGE)

<i>Excluding capital expenditures please indicate the Board's total FY2009 expenditures.</i>	Aggregate (All BONs)			Texas (Independent)	Independent BONs			Umbrella BONs		
	n	Average Expenditures (Std. Dev.)	Range	Average Expenditures	n	Average Expenditures (Std. Dev.)	Range	n	Average Expenditures (Std. Dev.)	Range
Total Expenditures	26	\$3,884,572 (\$4,457,252)	\$305,000 to \$22,052,208	\$8,534,111	22	\$3,548,402 (\$4,599,948)	\$305,000 to \$22,052,208	4	\$5,733,507 (\$3,472,132)	\$909,146 to \$8,504,630
Discipline	22	28% (12%)	7% to 53%	36% (-)	19	28% (12%)	7% to 53%	3	29% (15%)	14% to 43%
Alt/Monitoring programs	23	6% (5%)	0% to 16%	7% (-)	20	5% (5%)	0% to 16%	3	11% (2%)	10% to 14%
Licensure	20	19% (12%)	8% to 60%	33% (-)	19	19% (12%)	8% to 60%	1	18%	18%
Educ. Program Approval	21	5% (3%)	0% to 13%	5% (-)	19	5% (3%)	0% to 13%	2	6% (6%)	2% to 11%
Practice	21	4% (3%)	0% to 9%	4% (-)	19	4% (3%)	0% to 9%	2	1% (1%)	1% to 2%
Other	19	37% (14%)	0% to 56%	15% (-)	18	36% (14%)	0% to 56%	1	41%	41%

On average, 2.2 FTEs are directly involved with Education Program Approval and 0.5 FTE staff are indirectly involved (BON Question 23).

Table 119: BONs Question 23: FTEs Involved with Education Program Approval  
(Texas Compared to Aggregate: ABOVE AVERAGE)

<i>Enter the number of full-time equivalent (FTE) staff who were involved directly and indirectly in the education program approval and monitoring process.</i>	<b>Aggregate (All BONs)</b>			<b>Texas (Independent)</b>		<b>Independent BONs</b>			<b>Umbrella BONs</b>		
	<b>n</b>	<b>Direct</b>	<b>Indirect</b>	<b>Direct</b>	<b>Indirect</b>	<b>n</b>	<b>Direct</b>	<b>Indirect</b>	<b>n</b>	<b>Direct</b>	<b>Indirect</b>
Education Consultant/Manager	33	1.7	0.1	4.0	1.0	23	1.7	0.2	10	1.6	0.0
Administrative Support Staff	33	0.4	0.3	1.0	0.0	23	0.5	0.3	10	0.1	0.2
Attorney	33	0.0	0.1	0.0	1.0	23	0.0	0.1	10	0.0	0.0
Contract personnel	33	0.1	0.0	0.0	0.5	23	0.1	0.0	10	0.0	0.0
Other	33	0.0	0.0	0.5	0.0	23	0.0	0.0	10	0.0	0.0
<b>GRAND TOTAL (Standard Deviation)</b>	<b>33</b>	<b>2.2 (2.3)</b>	<b>0.5 (0.8)</b>	<b>5.5 (-)</b>	<b>2.5 (-)</b>	<b>23</b>	<b>2.4 (2.5)</b>	<b>0.6 (0.9)</b>	<b>10</b>	<b>1.7 (1.7)</b>	<b>0.2 (0.4)</b>

On average, 8.0 FTEs are directly involved with licensure and 2.9 FTEs are indirectly involved. The average number of FTEs in independent BON states directly involved in licensure is 9.1 while the number of FTEs in umbrella BON states directly involved is 5.4 (BON Question 24).

Table 120: BONs Question 24: FTEs Involved with Licensure  
(Texas Compared to Aggregate: ABOVE AVERAGE)

<i>Enter the number of full-time equivalent (FTE) staff who were directly and indirectly involved in the licensure process.</i>	Aggregate (All BONs)			Texas (Independent)		Independent BONs			Umbrella BONs		
	n	Direct	Indirect	Direct	Indirect	n	Direct	Indirect	n	Direct	Indirect
Manager	33	1.1	0.4	4.0	0.0	23	1.2	0.3	10	0.8	0.5
Licensing Support Staff	33	6.5	2.3	18.0	5.0	23	7.4	1.0	10	4.5	5.6
Attorney	33	0.1	0.1	0.0	0.0	23	0.1	0.1	10	0.0	0.2
Contract personnel	33	0.0	0.0	1.0	0.0	23	0.1	0.0	10	0.0	0.1
Other	33	0.3	0.0	4.0	0.0	23	0.3	0.0	10	0.1	0.0
<b>GRAND TOTAL (Standard Deviation)</b>	<b>33</b>	<b>8.0 (10.3)</b>	<b>2.9 (8.1)</b>	<b>27.0 (-)</b>	<b>5.0 (-)</b>	<b>23</b>	<b>9.1 (11.6)</b>	<b>1.4 (1.7)</b>	<b>10</b>	<b>5.4 (6.0)</b>	<b>6.3 (14.4)</b>

On average, 2.1 FTEs are directly involved with practice and 0.5 FTE staff are indirectly involved (BON Question 25).

Table 121: BONs Question 25: FTEs involved with Practice  
(Texas Compared to Aggregate: ABOVE AVERAGE)

<i>Enter the number of full-time equivalent (FTE) staff who were directly and indirectly involved in nursing practice issues.</i>	Aggregate (All BONs)			Texas (Independent)		Independent BONs			Umbrella BONs		
	n	Direct	Indirect	Direct	Indirect	n	Direct	Indirect	n	Direct	Indirect
Nurse	33	1.5	0.2	4.0	0.0	23	1.6	0.2	10	1.4	0.1
Practice Administrative Support Staff	33	0.5	0.3	1.0	0.0	23	0.5	0.4	10	0.3	0.0
Attorney	33	0.0	0.1	0.0	0.0	23	0.0	0.1	10	0.1	0.1
Contract personnel	33	0.0	0.0	1.0	0.0	23	0.0	0.0	10	0.0	0.0
Other	33	0.0	0.0	0.0	0.0	23	0.0	0.0	10	0.0	0.0
<b>GRAND TOTAL (Standard Deviation)</b>	<b>33</b>	<b>2.1 (1.9)</b>	<b>0.5 (1.1)</b>	<b>6.0 (-)</b>	<b>0.0 (-)</b>	<b>23</b>	<b>2.2 (2.0)</b>	<b>0.7 (1.2)</b>	<b>10</b>	<b>1.8 (1.8)</b>	<b>0.2 (0.3)</b>

## ADMINISTRATIVE – Nurses

About 10 percent of nurses surveyed indicated that they had attended a BON meeting (Nurses Question 7).

Table 122: Nurses Question 7: Attend BON Meeting  
(Texas Compared to Aggregate: **BELOW AVERAGE**)

<i>Have you ever attended a board meeting in the state you hold your primary license?</i>	Aggregate (All BONs)		Texas (Independent)		Independent BONs		Umbrella BONs	
	n	% “Yes”	n	% “Yes”	n	% “Yes”	n	% “Yes”
Attended a board meeting	24,846	9.8%	412	6.8%	13,762	10.9%	11,084	8.5%

About 10 percent of nurses surveyed indicated that they had contacted their BON about a nonpractice issue (Nurses Question 13).

Table 123: Nurses Question 13: Contacted BON About Nonpractice Issues  
(Texas Compared to Aggregate: **AVERAGE**)

<i>During the last 12 months, did you have any other communication with this state Board of Nursing? (e.g., attended a formal presentation by the Board of Nursing, asked a non-practice issue question, etc.)</i>	Aggregate (All BONs)		Texas (Independent)		Independent BONs		Umbrella BONs	
	n	% “Yes”	n	% “Yes”	n	% “Yes”	n	% “Yes”
FY07	16,390	11.4%	296	19.9%	8,729	13.8%	7,661	8.7%
FY09	24,795	10.4%	411	12.2%	13,732	12.2%	11,063	8.2%

Overall, nurses who had contacted their BON about a nonpractice issue were “satisfied” with the BON’s communication. Nurses from independent BON states rated their BON’s communication higher than those from umbrella BON states (Nurses Question 13a).

Table 124: Nurses Question 13a: Satisfaction with BON on Questions Regarding Nonpractice Issues  
(Texas Compared to Aggregate: AVERAGE)

<i>If yes, how “satisfied” or “dissatisfied” were you with the other communication you had with this state Board of Nursing? (Scale: 4 = very satisfied; 3 = satisfied; 2 = dissatisfied; 1 = very dissatisfied)</i>	<b>Aggregate (All BONs)</b>		<b>Texas (Independent)</b>		<b>Independent BONs</b>		<b>Umbrella BONs</b>	
	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>
FY07	1823	3.12 (0.80)	59	2.93 (0.81)	1,177	3.12 (0.82)	646	3.12 (0.78)
FY09	2751	3.19 (0.77)	52	3.15 (0.78)	1,773	3.22 (0.76)	978	3.12 (0.80)

Nurses primarily used the nursing practice law and rules and BON website to find out about scope of practice decisions (Nurses Question 16).

Table 125: Nurses Question 16: Sources Used to Find Out About Scope of Practice/Practice Decisions – FY02

<i>Which of the following do you use to find out scope of practice/practice decisions?</i>	<b>Aggregate (All BONs)</b>	<b>Texas (Independent)</b>
Nursing practice law and rules	73%	–
Board Web site	21%	–
Board newsletter	63%	–
Personal communication with Board staff or member	25%	–
Public meetings/educational workshops	23%	–
Other association Web site	3%	–
Other association newsletter	12%	–
Public notice	6%	–
Public hearings	2%	–
Other	10%	–

Table 126: Nurses Question 16: Sources Used to Find Out About Scope of Practice/Practice Decisions – FY05

<i>Which of the following do you use to find out scope of practice/practice decisions?</i>	<b>Aggregate (All BONs)</b>	<b>Texas (Independent)</b>
n	4,279	115
Nursing practice law and rules	75%	82%
Board Web site	37%	50%
Board newsletter	41%	37%
Personal communication with Board staff or member	16%	16%
Public meetings/educational workshops	14%	14%
Other association Web site	6%	10%
Other association newsletter	11%	8%
Public notice	5%	5%
Public hearings	1%	2%
Other	7%	2%

Table 127: Nurses Question 16: Sources Used to Find Out About Scope of Practice/Practice Decisions – FY07

<i>Which of the following do you use to find out scope of practice/practice decisions?</i>	<b>Aggregate (All BONs)</b>	<b>Texas (Independent)</b>	<b>Independent BONs</b>	<b>Umbrella BONs</b>
n	15,763	295	8,480	7,283
Nursing practice law and rules	58%	64%	59%	58%
Board Web site	43%	65%	48%	38%
Board newsletter	17%	22%	20%	14%
Personal communication with Board staff or member	9%	10%	9%	10%
Public meetings/educational workshops	23%	6%	23%	25%
Other association Web site	3%	6%	3%	3%
Other association newsletter	12%	3%	11%	14%
Public notice	6%	2%	5%	1%
Public hearings	2%	0.7%	2%	3%
Other	9%	2%	9%	11%

Table 128: Nurses Question 16: Sources Used to Find Out About Scope of Practice/Practice Decisions – FY09

<i>Which of the following do you use to find out scope of practice/practice decisions?</i>	<b>Aggregate (All BONs)</b>	<b>Texas (Independent)</b>	<b>Independent BONs</b>	<b>Umbrella BONs</b>
n	23,274	387	12,992	10,282
Nursing practice law and rules	56%	57%	56%	56%
Board Web site	41%	51%	44%	36%
Board newsletter	30%	50%	37%	22%
Personal communication with Board staff or member	12%	8%	13%	11%
Public meetings/educational workshops	11%	15%	10%	12%
Other association Web site	7%	7%	6%	9%
Other association newsletter	13%	10%	10%	15%
Public notice	3%	1%	3%	4%
Public hearings	1%	0.5%	1%	1%
Other	9%	5%	7%	10%

Overall, nurses thought the BON provided adequate regulation in the areas of scope of practice, discipline, education program approval and licensure. In the areas of discipline and education program approval, more nurses thought the BON provided too little regulation than too much regulation (Nurses Question 17).

Table 129: Nurses Question 17: Ratings of Existing Statutes and Administrative Rules/Regulations – FY02

<i>Please rate the degree or extent of regulation in this state in each of the following areas.</i>	<b>Aggregate (All BONs)</b>	<b>Texas (Independent)</b>
<b>a. Practice standards/scope of practice</b>		
Too much regulation	4.5%	–
Adequate regulation	92.3%	–
Too little regulation	3.2%	–
<b>b. Complaint resolution/discipline process</b>		
Too much regulation	3.8%	–
Adequate regulation	91.4%	–
Too little regulation	4.8%	–
<b>c. Education program approval/accreditation</b>		
Too much regulation	5.4%	–
Adequate regulation	87.0%	–
Too little regulation	7.6%	–
<b>d. Requirements for licensure</b>		
Too much regulation	4.1%	–
Adequate regulation	89.7%	–
Too little regulation	6.2%	–

Table 130: Nurses Question 17: Ratings of Existing Statutes and Administrative Rules/Regulations – FY05

<i>Please rate the degree or extent of regulation in this state in each of the following areas.</i>	<b>Aggregate (All BONs)</b>	<b>Texas (Independent)</b>
<b>a. Practice standards/scope of practice</b>		
Too much regulation	3.5%	3.2%
Adequate regulation	93.1%	93.6%
Too little regulation	3.4%	3.2%
<b>b. Complaint resolution/discipline process</b>		
Too much regulation	2.4%	5.8%
Adequate regulation	92.0%	90.4%
Too little regulation	5.6%	3.8%
<b>c. Education program approval/accreditation</b>		
Too much regulation	4.2%	7.4%
Adequate regulation	88.9%	82.8%
Too little regulation	6.9%	9.8%
<b>d. Requirements for licensure</b>		
Too much regulation	4.9%	7.6%
Adequate regulation	90.6%	84.7%
Too little regulation	4.5%	7.6%

Table 131: Nurses Question 17: Ratings of Existing Statutes and Administrative Rules/Regulations – FY07

<i>Please rate the degree or extent of regulation in this state in each of the following areas.</i>	<b>Aggregate (All BONs)</b>	<b>Texas (Independent)</b>	<b>Independent BONs</b>	<b>Umbrella BONs</b>
<b>a. Practice standards/scope of practice</b>				
Too much regulation	4.6%	2.5%	4.3%	4.9%
Adequate regulation	92.9%	95.0%	93.3%	91.7%
Too little regulation	2.9%	2.5%	2.4%	3.5%
<b>b. Complaint resolution/discipline process</b>				
Too much regulation	3.0%	2.0%	3.1%	2.9%
Adequate regulation	90.5%	93.1%	91.3%	89.5%
Too little regulation	6.5%	4.9%	5.6%	7.6%
<b>c. Education program approval/accreditation</b>				
Too much regulation	4.2%	6.1%	4.0%	4.4%
Adequate regulation	88.3%	84.5%	89.0%	87.4%
Too little regulation	7.5%	9.4%	7.0%	8.2%
<b>d. Requirements for licensure</b>				
Too much regulation	4.3%	5.4%	4.7%	3.8%
Adequate regulation	91.8%	91.1%	92.0%	91.6%
Too little regulation	3.9%	3.5%	3.3%	4.6%

Table 132: Nurses Question 17: Ratings of Existing Statutes and Administrative Rules/Regulations – FY09

(Texas Compared to Aggregate: AVERAGE)

<i>For each of the following, please indicate whether you think the Board of Nursing's existing statutes and administrative rules/regulations provide too much, too little, or an adequate amount of regulation.</i>	<b>Aggregate (All BONs)</b>	<b>Texas (Independent)</b>	<b>Independent BONs</b>	<b>Umbrella BONs</b>
<b>a. Practice standards/scope of practice</b>	20,663	376	11,852	8,779
Too much regulation	3.7%	5.6%	3.6%	3.9%
Adequate regulation	92.1%	91.0%	92.7%	91.3%
Too little regulation	4.2%	3.5%	3.7%	4.8%
<b>b. Complaint resolution/discipline process</b>	17124	329	10039	7085
Too much regulation	3.4%	5.8%	3.6%	3.1%
Adequate regulation	88.4%	86.6%	89.0%	87.6%
Too little regulation	8.2%	7.6%	7.4%	9.3%
<b>c. Education program approval/accreditation</b>	20,041	367	11,490	8,551
Too much regulation	4.0%	4.1%	3.9%	4.0%
Adequate regulation	88.6%	88.8%	89.6%	87.3%
Too little regulation	7.4%	7.1%	6.4%	8.7%
<b>d. Requirements for licensure</b>	21,788	389	12,408	9,380
Too much regulation	3.7%	5.1%	3.6%	4.0%
Adequate regulation	91.6%	90.7%	92.3%	90.6%
Too little regulation	4.7%	4.1%	4.2%	5.4%

Overall, nurses surveyed thought that the BON's newsletter/magazine was "good" (Nurses Question 18).

Table 133: Nurses Question 18: Nurses' Perceptions Regarding BON Newsletter  
(Texas Compared to Aggregate: AVERAGE)

<i>Please rate the Board of Nursing's newsletter/magazine. (Scale: 4 = excellent; 3 = good; 2 = fair; 1 = poor)</i>	<b>Aggregate (All BONs)</b>		<b>Texas (Independent)</b>		<b>Independent BONs</b>		<b>Umbrella BONs</b>	
	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>
FY02	2270	3.06 (0.612)	–	–	1943	3.08 (0.621)	327	2.98 (0.55)
FY05	3724	3.07 (0.6)	109	3.02 (0.65)	3103	3.09 (0.62)	621	3.0 (0.57)
FY07	10176	3.00 (0.57)	215	3.12 (0.61)	6045	3.02 (0.59)	621	2.99 (0.57)
FY09	17,649	2.96 (0.61)	394	3.03 (0.66)	11,267	2.99 (0.61)	6,382	2.92 (0.59)

Overall, nurses surveyed thought that the BON's website was "good" Nurses from independent BON states rated their BON's website slightly higher than those from umbrella BON states (Nurses Question 19).

Table 134: Nurses Question 19: Nurses' Perceptions Regarding BON Website  
(Texas Compared to Aggregate: ABOVE AVERAGE)

<i>Please rate the Board of Nursing's Web site. (Scale: 4 = excellent; 3 = good; 2 = fair; 1 = poor)</i>	<b>Aggregate (All BONs)</b>		<b>Texas (Independent)</b>		<b>Independent BONs</b>		<b>Umbrella BONs</b>	
	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>
FY02	757	3.028 (0.60)	–	–	647	3.048 (0.60)	110	2.909 (0.60)
FY05	3429	3.044 (0.64)	124	3.10 (0.68)	2766	3.066 (0.64)	663	2.953 (0.63)
FY07	12076	2.960 (0.65)	281	3.14 (0.64)	7332	2.98 (0.65)	4744	2.933 (0.65)
FY09	15678	2.92 (0.64)	339	3.04 (0.69)	9818	2.96 (0.63)	5,860	2.84 (0.65)

Overall, nurses surveyed thought that the BON's telephone system was "fair" (Nurses Question 20).

Table 135: Nurses Question 20: Nurses' Perceptions Regarding Telephone System  
(Texas Compared to Aggregate: AVERAGE)

<i>Please rate the Board of Nursing's telephone system. (Scale: 4 = excellent; 3 = good; 2 = fair; 1 = poor)</i>	<b>Aggregate (All BONs)</b>		<b>Texas (Independent)</b>		<b>Independent BONs</b>		<b>Umbrella BONs</b>	
	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>
FY02	753	2.75 (0.74)	–	–	644	2.769 (0.73)	109	2.61 (0.80)
FY05	2120	2.60 (0.82)	80	2.50 (0.87)	1714	2.62 (0.83)	406	2.52 (0.83)
FY07	6634	2.56 (0.83)	187	2.56 (0.95)	3874	2.55 (0.83)	2760	2.57 (0.83)
FY09	8783	2.49 (0.80)	197	2.53 (0.85)	5567	2.52 (0.80)	3216	2.44 (0.80)

Overall, nurses surveyed thought that the BON did a "good" job in protecting the health and safety of the public. Nurses from independent BON states rated their BON's public protection slightly higher than those from umbrella BON states (Nurses Question 25).

Table 136: Nurses Question 25: Nurses' Perceptions Regarding Effectiveness in Protecting the Public  
(Texas Compared to Aggregate: AVERAGE)

<i>Overall, how effective is the state's Board of Nursing in protecting the health and safety of the public? (Scale: 4 = excellent; 3 = good; 2 = fair; 1 = poor)</i>	<b>Aggregate (All BONs)</b>		<b>Texas (Independent)</b>		<b>Independent BONs</b>		<b>Umbrella BONs</b>	
	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>
FY02	2450	3.10 (0.62)	–	–	2040	3.11 (0.62)	410	3.01 (0.65)
FY05	4855	3.21 (0.61)	134	3.28 (0.59)	3794	3.24 (0.60)	1061	3.10 (0.62)
FY07	15694	3.11(0.59)	295	3.28 (0.56)	8490	3.14 (0.58)	7204	3.07 (0.60)
FY09	23764	3.06 (0.61)	408	3.11 (0.62)	13337	3.11 (0.61)	10427	3.01 (0.60)

## ADMINISTRATIVE – Employers

Overall, employers surveyed thought that the BON was “somewhat responsive” to changes in practice. Employers from independent BON states rated their BON’s responsiveness to changes in practice distinctly higher than those from umbrella BON states (Employers Question 7).

Table 137: Employers Question 7: Responsiveness of BON to Changes in Practice  
(Texas Compared to Aggregate: ABOVE AVERAGE)

<i>How responsive or unresponsive is the Board of Nursing to changes in practice? (Scale: 4 = responsive; 3 = somewhat responsive; 2 = somewhat unresponsive; 1 = unresponsive)</i>	Aggregate (All BONs)		Texas (Independent)		Independent BONs		Umbrella BONs	
	n	mean (std)	n	mean (std)	n	mean (std)	n	mean (std)
FY05	523	3.44 (0.67)	15	3.47 (0.64)	423	3.48 (0.64)	100	3.28 (0.75)
FY07	841	3.35 (0.69)	33	3.30 (0.77)	592	3.41 (0.68)	249	3.19 (0.68)
FY09	1,204	3.28 (0.69)	18	3.56 (0.51)	717	3.40 (0.64)	487	3.10 (0.71)

Overall, employers surveyed were “satisfied” with information provided by the BON at presentations they attended. Employers from independent BON states rated their satisfaction with BON presentations higher than employers from umbrella BON states (Employers Question 8).

Table 138: Employers Question 8: Employers’ Perceptions Regarding BON Presentations  
(Texas Compared to Aggregate: ABOVE AVERAGE)

<i>How satisfied or dissatisfied were you with information provided by the Board of Nursing over the past 12 months during presentations you attended? (Scale: 4 = very satisfied; 3 = satisfied; 2 = dissatisfied; 1 = very dissatisfied)</i>	Aggregate (All BONs)		Texas (Independent)		Independent BONs		Umbrella BONs	
	n	mean (std)	n	mean (std)	n	mean (std)	n	mean (std)
FY02	207	3.29 ( 0.56)	–	–	182	3.30 (0.54)	25	3.16 (0.69)
FY05	266	3.28 (0.57)	8	3.50 (0.53)	218	3.30 (0.59)	48	3.19 (0.45)
FY07	422	3.27 (0.57)	16	3.31 (0.60)	315	3.30 (0.58)	107	3.18 (0.53)
FY09	1,093	3.08 (0.56)	17	3.35 (0.49)	661	3.16 (0.54)	432	2.96 (0.57)

Overall, employers surveyed were “satisfied” with assistance provided by the BON about nonpractice issues. Employers from independent BON states rated their satisfaction with BON assistance higher than employers from umbrella BON states (Employers Question 9).

Table 139: Employers Question 9: Contacted BON About Nonpractice Issues  
(Texas Compared to Aggregate: ABOVE AVERAGE)

<i>How satisfied or dissatisfied were you with assistance provided by the Board of Nursing over the past 12 months in response to an inquiry you made (other than questions about practice issues)?</i> (Scale: 4 = very satisfied; 3 = satisfied; 2 = dissatisfied; 1 = very dissatisfied)	Aggregate (All BONs)		Texas (Independent)		Independent BONs		Umbrella BONs	
	n	mean (std)	n	mean (std)	n	mean (std)	n	mean (std)
FY02	336	3.35 (0.54)	–	–	296	3.36 (0.59)	40	3.25 (0.63)
FY05	443	3.24 (0.70)	13	3.54 (0.52)	372	3.28 (0.67)	71	3.04 (0.84)
FY07	687	3.14 (0.68)	27	3.04 (0.71)	501	3.19 (0.68)	186	2.99 (0.64)
FY09	1,109	3.08 (0.64)	18	3.22 (0.55)	690	3.15 (0.66)	419	2.96 (0.60)

Overall, employers surveyed found the BON’s telephone system to be “good.” Employers from independent BON states rated their BON’s phone system higher than employers from umbrella BON states (Employers Question 10).

Table 140: Employers Question 10: Employers’ Perceptions Regarding Telephone System  
(Texas Compared to Aggregate: ABOVE AVERAGE)

<i>Please rate the Board of Nursing's telephone system.</i> (Scale: 4 = excellent; 3 = good; 2 = fair; 1 = poor)	Aggregate (All BONs)		Texas (Independent)		Independent BONs		Umbrella BONs	
	n	mean (std)	n	mean (std)	n	mean (std)	n	mean (std)
FY02	308	2.90 (0.68)	–	–	272	2.95 (0.66)	36	2.52 (0.73)
FY05	391	2.72 (0.75)	15	2.87 (0.64)	372	2.75 (0.74)	64	2.53 (0.75)
FY07	599	2.52 (0.77)	24	2.38 (0.65)	451	2.57 (0.77)	148	2.36 (0.74)
FY09	907	2.57 (0.78)	15	2.80 (0.78)	574	2.63 (0.80)	333	2.45 (0.75)

Overall, employers surveyed found the BON’s newsletter/magazine to be “good.” Employers from independent BON states rated their BON’s newsletter/magazine higher than employers from umbrella BON states (Employers Question 11).

Table 141: Employers Question 11: Employers’ Perceptions Regarding BON Newsletter  
(Texas Compared to Aggregate: AVERAGE)

<i>Please rate the Board of Nursing's newsletter/magazine. (Scale: 4 = excellent; 3 = good; 2 = fair; 1 = poor)</i>	Aggregate (All BONs)		Texas (Independent)		Independent BONs		Umbrella BONs	
	n	mean (std)	n	mean (std)	n	mean (std)	n	mean (std)
FY02	413	3.21 (0.60)	–	–	363	3.23 (0.59)	50	3.02 (0.68)
FY05	488	3.13 (0.63)	16	3.13 (0.62)	409	3.14 (0.61)	79	3.05 (0.67)
FY07	684	3.04 (0.69)	33	3.33 (0.54)	545	3.09 (0.70)	139	2.86 (0.63)
FY09	1,008	2.97 (0.66)	19	3.05 (0.85)	670	3.03 (0.61)	338	2.84 (0.61)

Overall, employers surveyed found the BON’s website to be “good.” Employers from independent BON states rated their BON’s website higher than employers from umbrella BON states (Employers Question 12).

Table 142: Employers Question 12: Employers’ Perceptions Regarding BON Website  
(Texas Compared to Aggregate: ABOVE AVERAGE)

<i>Please rate the Board of Nursing's Web site. (Scale: 4 = excellent; 3 = good; 2 = fair; 1 = poor)</i>	Aggregate (All BONs)		Texas (Independent)		Independent BONs		Umbrella BONs	
	n	mean (std)	n	mean (std)	n	mean (std)	n	mean (std)
FY02	308	3.19 (0.58)	–	–	269	3.23 (0.56)	39	2.92 (0.66)
FY05	506	3.14 (0.61)	17	3.24 (0.75)	413	3.17 (0.60)	93	2.97 (0.60)
FY07	799	2.96 (0.70)	32	3.22 (0.66)	590	3.02 (0.98)	209	2.78 (0.68)
FY09	1,129	3.00 (0.69)	19	3.47 (0.61)	704	3.08 (0.63)	425	2.87 (0.65)

Almost all employers surveyed indicated that they knew how to report a suspected violation of the nursing statute or rules (Employers Question 13).

Table 143: Employer Question 13: Employers’ Knowledge of How to Report a Suspected Violation of Nursing Statutes and Rules  
(Texas Compared to Aggregate: AVERAGE)

<i>Do you know how to report a suspected violation of the nursing statute or rule?</i>	<b>Aggregate (All BONs)</b>		<b>Texas (Independent)</b>		<b>Independent BONs</b>		<b>Umbrella BONs</b>	
	<b>n</b>	<b>% “Yes”</b>	<b>n</b>	<b>% “Yes”</b>	<b>n</b>	<b>% “Yes”</b>	<b>n</b>	<b>% “Yes”</b>
FY02	422	97.2%	-	-	366	97.3%	56	96.4%
FY05	564	97.0%	18	94.4%	453	97.1%	111	96.4%
FY07	878	95.2%	33	93.9%	619	95.2%	259	95.4%
FY09	1,257	95.1%	20	90.0%	742	95.4%	515	94.6%

Employers primarily used the nursing practice law and rules and the BON website to find out about scope of practice decisions (Employers Question 14).

Table 144: Employers Question 14: Sources Used to Find Out About Scope of Practice/Practice Decisions – FY02

<i>Which of the following do you use to find out about scope of practice/practice decisions?</i>	<b>Aggregate (All BONs)</b>	<b>Texas (Independent)</b>
Nursing practice law and rules	84%	–
Board Web site	43%	–
Board newsletter	59%	–
Personal communication with Board staff or member	58%	–
Public meetings/educational workshops	27%	–
Other association Web site	9%	–
Other association newsletter	19%	–
Public notice	7%	–
Public hearings	3%	–

Table 145: Employers Question 14: Sources Used to Find Out About Scope of Practice/Practice Decisions – FY05

<i>Which of the following do you use to find out about scope of practice/practice decisions?</i>	<b>Aggregate (All BONs)</b>	<b>Texas (Independent)</b>
n	567	18
Nursing practice law and rules	75%	94%
Board Web site	54%	78%
Board newsletter	50%	56%
Personal communication with Board staff or member	50%	39%
Public meetings/educational workshops	21%	17%
Other association Web site	8%	17%
Other association newsletter	12%	17%
Public notice	6%	17%
Public hearings	3%	0%

Table 146: Employers Question 14: Sources Used to Find Out About Scope of Practice/Practice Decisions – FY07

<i>Which of the following do you use to find out about scope of practice/practice decisions?</i>	<b>Aggregate (All BONs)</b>	<b>Texas (Independent)</b>	<b>Independent BONs</b>	<b>Umbrella BONs</b>
n	888	33	624	264
Nursing practice law and rules	80%	73%	81%	77%
Board Web site	52%	76%	57%	42%
Board newsletter	38%	64%	46%	19%
Personal communication with Board staff or member	32%	24%	35%	25%
Public meetings/educational workshops	19%	21%	18%	23%
Other association Web site	19%	21%	18%	21%
Other association newsletter	15%	12%	14%	16%
Public notice	7%	6%	6%	10%
Public hearings	3%	3%	4%	2%

Table 147: Employers Question 14: Sources Used to Find Out About Scope of Practice/Practice Decisions – FY09

<i>Which of the following do you use to find out about scope of practice/practice decisions?</i>	<b>Aggregate (All BONs)</b>	<b>Texas (Independent)</b>	<b>Independent BONs</b>	<b>Umbrella BONs</b>
n	1,255	20	741	514
Nursing practice law and rules	72%	65%	73%	69%
Board Web site	58%	65%	61%	55%
Board newsletter	31%	40%	36%	23%
Personal communication with Board staff or member	28%	10%	33%	20%
Public meetings/educational workshops	16%	5%	16%	16%
Other association Web site	15%	30%	14%	17%
Other association newsletter	15%	10%	13%	17%
Public notice	6%	0%	5%	8%
Public hearings	2%	0%	1%	2%
Other	5%	0%	3%	7%

Overall, most employers think that the BON’s focus should be split equally between regulatory policy development and enforcement. Currently employers think the BONs focus is slanted towards policy development (Employers Questions 19 and 20).

Table 148: Employers Questions 19 and 20: Employers’ Perceptions of BON’s Role Regarding Regulatory Policy and Enforcement – FY05

<i>What best reflects the Board’s current role regarding regulatory policy?</i>	<b>Aggregate (All BONs)</b>		<b>Texas (Independent)</b>	
	<b>Current Role</b>	<b>Ideal Role</b>	<b>Current Role</b>	<b>Ideal Role</b>
<i>What best reflects the Board’s ideal role regarding regulatory policy?</i>				
n	524	529	17	17
All focus on regulatory policy development	4.8%	2.5%	17.6%	5.9%
More focus on policy development	23.3%	9.1%	11.8%	5.9%
Equal focus on development & enforcement	56.5%	83.9%	52.9%	88.2%
More focus on policy enforcement	12.4%	4.2%	17.6%	–
All focus on regulatory policy enforcement	3.1%	0.4%	–	–

Table 149: Employers Questions 19 and 20: Employers' Perceptions of BON's Role Regarding Regulatory Policy and Enforcement – FY07

<i>What best reflects the Board's current role regarding regulatory policy?</i>	<b>Aggregate (All BONs)</b>		<b>Texas (Independent)</b>		<b>Independent BONs</b>		<b>Umbrella BONs</b>	
	<b>Current Role</b>	<b>Ideal Role</b>	<b>Current Role</b>	<b>Ideal Role</b>	<b>Current Role</b>	<b>Ideal Role</b>	<b>Current Role</b>	<b>Ideal Role</b>
n	780	783	30	30	557	555	223	228
All focus on regulatory policy development	7.4%	5.0%	6.7%	10.0%	5.9%	5.2%	11.2%	4.4%
More focus on policy development	17.8%	11.7%	33.3%	3.3%	16.9%	10.8%	20.2%	14.0%
Equal focus on development & enforcement	57.9%	76.5%	56.7%	80.0%	60.0%	77.3%	52.9%	74.6%
More focus on policy enforcement	12.6%	5.6%	–	6.7%	12.6%	5.9%	12.6%	4.8%
All focus on regulatory policy enforcement	4.2%	1.1%	3.3%	–	4.7%	0.7%	3.1%	2.2%

Table 150: Employer Questions 19 and 20: Employers' Perceptions of BONs Role Regarding Regulatory Policy and Enforcement – FY09

<i>What best reflects the Board's current role regarding regulatory policy?</i>	<b>Aggregate (All BONs)</b>		<b>Texas (Independent)</b>		<b>Independent BONs</b>		<b>Umbrella BONs</b>	
	<b>Current Role</b>	<b>Ideal Role</b>	<b>Current Role</b>	<b>Ideal Role</b>	<b>Current Role</b>	<b>Ideal Role</b>	<b>Current Role</b>	<b>Ideal Role</b>
n	1,115	1,162	19	19	669	691	446	471
All focus on regulatory policy development	7.0%	3.3%	15.8%	21.1%	6.1%	3.8%	8.3%	2.5%
More focus on policy development	20.2%	10.8%	31.6%	10.5%	17.2%	10.9%	24.7%	10.8%
Equal focus on development & enforcement	59.1%	80.9%	52.6%	68.4%	64.9%	80.8%	50.4%	81.1%
More focus on policy enforcement	9.1%	3.4%	–	–	8.2%	3.0%	10.5%	3.8%
All focus on regulatory policy enforcement	4.6%	1.6%	–	–	3.6%	1.6%	6.1%	1.7%

Overall, employers thought the BON provided adequate regulation in the areas of scope of practice, discipline, education program approval and licensure. In the areas of discipline and education program approval, more employers thought the BON provided too little regulation than too much regulation (Employers Question 21).

Table 151: Employers Question 21: Ratings of Existing Statutes and Administrative Rules/Regulations – FY02

<i>Please rate the degree or extent of regulation in this state in each of the following areas.</i>	<b>Aggregate (All BONs)</b>	<b>Texas (Independent)</b>
<b>a. Practice standards/scope of practice</b>		
Too much regulation	4.9%	–
Adequate regulation	91.7%	–
Too little regulation	3.4%	–
<b>b. Complaint resolution/discipline process</b>		
Too much regulation	4.8%	–
Adequate regulation	89.2%	–
Too little regulation	6.0%	–
<b>c. Education program approval/accreditation</b>		
Too much regulation	6.1%	–
Adequate regulation	85.4%	–
Too little regulation	8.5%	–
<b>d. Requirements for licensure/certification</b>		
Too much regulation	4.2%	–
Adequate regulation	88.4%	–
Too little regulation	7.3%	–

Table 152: Employers Question 21: Ratings of Existing Statutes and Administrative Rules/Regulations – FY05

<i>Please rate the degree or extent of regulation in this state in each of the following areas.</i>	<b>Aggregate (All BONs)</b>	<b>Texas (Independent)</b>
<b>a. Practice standards/scope of practice</b>		
Too much regulation	4.8%	11.1%
Adequate regulation	88.2%	83.3%
Too little regulation	7.0%	5.6%
<b>b. Complaint resolution/discipline process</b>		
Too much regulation	5.5%	11.8%
Adequate regulation	79.2%	70.6%
Too little regulation	15.3%	17.6%
<b>c. Education program approval/accreditation</b>		
Too much regulation	6.3%	6.3%
Adequate regulation	84.7%	81.3%
Too little regulation	9.0%	12.5%
<b>d. Requirements for licensure/certification</b>		
Too much regulation	5.9%	–
Adequate regulation	88.8%	82.4%
Too little regulation	5.4%	17.6%

Table 153: Employers Question 21: Ratings of Existing Statutes and Administrative Rules/Regulations – FY07

<i>Please rate the degree or extent of regulation in this state in each of the following areas.</i>	<b>Aggregate (All BONs)</b>	<b>Texas (Independent)</b>	<b>Independent BONs</b>	<b>Umbrella BONs</b>
<b>a. Practice standards/scope of practice</b>				
Too much regulation	2.9%	12.9%	3.1%	2.5%
Adequate regulation	90.4%	74.2%	91.1%	88.8%
Too little regulation	6.7%	12.9%	5.8%	8.8%
<b>b. Complaint resolution/discipline process</b>				
Too much regulation	3.6%	7.1%	4.4%	1.7%
Adequate regulation	79.0%	75.0%	79.7%	77.3%
Too little regulation	17.3%	17.9%	15.9%	21.0%
<b>c. Education program approval/accreditation</b>				
Too much regulation	5.3%	3.3%	4.0%	8.4%
Adequate regulation	79.6%	80.0%	82.7%	72.1%
Too little regulation	15.1%	16.7%	13.4%	19.5%
<b>d. Requirements for licensure/certification</b>				
Too much regulation	3.3%	3.4%	3.1%	3.8%
Adequate regulation	87.7%	86.2%	89.8%	82.5%
Too little regulation	9.1%	10.3%	7.1%	13.8%

Table 154: Employers Question 21: Ratings of Existing Statutes and Administrative Rules/Regulations – FY09

(Texas Compared to Aggregate: AVERAGE)

<i>For each of the following, please indicate whether you think the Board of Nursing's existing statutes and administrative rules/regulations provide too much, too little, or an adequate amount of regulation.</i>	<b>Aggregate (All BONs)</b>	<b>Texas (Independent)</b>	<b>Independent BONs</b>	<b>Umbrella BONs</b>
<b>a. Practice standards/scope of practice</b>	1184	19	707	477
Too much regulation	5.6%	5.3%	5.1%	6.3%
Adequate regulation	86.5%	94.7%	88.1%	84.1%
Too little regulation	7.9%	–	6.8%	9.6%
<b>b. Complaint resolution/discipline process</b>	1153	18	692	461
Too much regulation	3.9%	–	2.5%	6.1%
Adequate regulation	79.4%	77.8%	84.0%	72.7%
Too little regulation	16.7%	22.2%	13.6%	21.3%
<b>c. Education program approval/accreditation</b>	1141	18	676	465
Too much regulation	3.7%	–	2.8%	4.9%
Adequate regulation	79.8%	94.4%	84.3%	73.3%
Too little regulation	16.5%	5.6%	12.9%	21.7%
<b>d. Requirements for licensure/certification</b>	1196	19	711	485
Too much regulation	3.8%	–	4.4%	2.9%
Adequate regulation	89.0%	100.0%	91.3%	85.6%
Too little regulation	7.3%	–	4.4%	11.5%

Most employers surveyed (93 percent) thought the BON's statutes and rules were accessible; 73 percent of the employers surveyed thought the statutes and rules were clear (Employers Questions 22 and 23).

Table 155: Employers Questions 22 and 23: Accessibility and Clarity of BON Statutes/Rules  
(Texas Compared to Aggregate: AVERAGE)

<i>Are Boards of Nursing statutes/rules accessible?</i>	<b>Aggregate (All BONs)</b>		<b>Texas (Independent)</b>		<b>Independent BONs</b>		<b>Umbrella BONs</b>	
	<b>n</b>	<b>Percent</b>	<b>n</b>	<b>Percent</b>	<b>n</b>	<b>Percent</b>	<b>n</b>	<b>Percent</b>
<i>Are Boards of Nursing statutes/rules clear?</i>								
FY05								
Rules are accessible	559	95.7%	17	100.0%	449	96.4%	110	92.7%
Rules are clear	554	75.1%	18	72.2%	444	75.5%	110	73.6%
FY07								
Rules are accessible	883	95.5%	33	100.0%	623	96.4%	110	92.7%
Rules are clear	567	73.2%	32	65.6%	605	74.0%	254	68.1%
FY09								
Rules are accessible	1,239	93.3%	20	95.0%	733	95.8%	506	89.7%
Rules are clear	1,195	73.1%	18	72.2%	707	75.8%	488	69.1%

Overall, employers thought the BON provided adequate involvement in the areas of evolving scopes of practice and legislative issues. In the areas of nursing supply and demand issues, and workplace issues, 30 percent of the employers thought the BON provided too little regulation (Employers Question 24).

Table 156: Employers Question 24: Employers' Perceptions of the BON's Involvement in Areas of Interest – FY07

<i>In your opinion, what is the Board of Nursing's level of involvement in the following issues? (Scale: 3 = too much involvement, 2 = adequate involvement, or 1 = too little involvement)</i>	<b>Aggregate (All BONs)</b>	<b>Texas (Independent)</b>	<b>Independent BONs</b>	<b>Umbrella BONs</b>
<b>a. Nursing supply and demand issues</b>				
Too much involvement	0.8%	–	0.7%	0.9%
Adequate involvement	41.1%	34.5%	45.7%	29.9%
Too little involvement	58.1%	65.5%	53.6%	69.2%
<b>b. Evolving scopes of practice</b>				
Too much involvement	1.0%	–	0.7%	1.7%
Adequate involvement	73.9%	75.0%	76.6%	67.4%
Too little involvement	25.1%	25.0%	22.7%	30.9%
<b>c. Legislative issues</b>				
Too much involvement	2.6%	–	1.9%	4.4%
Adequate involvement	76.3%	84.4%	77.6%	72.9%
Too little involvement	21.1%	15.6%	20.5%	22.7%
<b>d. Workplace issues</b>				
Too much involvement	1.9%	3.2%	2.2%	1.3%
Adequate involvement	53.8%	38.7%	57.3%	45.4%
Too little involvement	44.2%	58.1%	40.5%	53.3%

Table 157: Employers Question 24: Employers’ Perceptions of the BON’s Involvement in Areas of Interest – FY09  
(Texas Compared to Aggregate: AVERAGE)

<i>In your opinion, what is the Board of Nursing’s level of involvement in the following issues? (Scale: 3 = too much involvement, 2 = adequate involvement, or 1 = too little involvement)</i>	<b>Aggregate (All BONs)</b>	<b>Texas (Independent)</b>	<b>Independent BONs</b>	<b>Umbrella BONs</b>
<b>a. Nursing supply and demand issues</b>	1028	17	610	418
Too much involvement	4.9%	–	4.3%	5.7%
Adequate involvement	64.8%	52.9%	69.8%	57.4%
Too little involvement	30.4%	47.1%	25.9%	36.8%
<b>b. Evolving scopes of practice</b>	1133	18	677	456
Too much involvement	4.1%	–	4.0%	4.4%
Adequate involvement	77.9%	88.9%	83.2%	70.2%
Too little involvement	17.9%	11.1%	12.9%	25.4%
<b>c. Legislative issues</b>	1100	19	657	443
Too much involvement	7.4%	5.3%	7.2%	7.7%
Adequate involvement	76.6%	68.4%	81.4%	69.3%
Too little involvement	16.1%	26.3%	11.4%	23.0%
<b>d. Workplace issues</b>	1027	19	636	443
Too much involvement	4.1%	5.3%	3.5%	5.0%
Adequate involvement	67.4%	73.7%	73.1%	59.1%
Too little involvement	28.5%	21.1%	23.4%	35.9%

Employers thought four business days was a reasonable amount of time to answer a practice question (Employers Question 26).

Table 158: Employers Question 26: Reasonable Number of Business Days to Answer a Practice Question – FY09  
(Texas Compared to Aggregate: Not enough Data)

<i>What do you think is a reasonable number of business days for the Board staff to take to respond to a practice question?</i>	<b>Aggregate (All BONs)</b>		<b>Texas (Independent)</b>		<b>Independent BONs</b>		<b>Umbrella BONs</b>	
	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>
Number of Business Days	371	4 (7)	4	3 (2)	264	3 (4)	107	6 (12)

Overall, employers surveyed thought that the BON did “well” in protecting the health and safety of the public. Employers from independent BON states rated their BON’s public protection higher than those from umbrella BON states (Employers Question 33).

Table 159: Employers Question 33: Employers’ Perceptions Regarding Effectiveness in Protecting the Public  
(Texas Compared to Aggregate: ABOVE AVERAGE)

<i>Overall, how well or poorly does the Board of Nursing fulfill its role process in protecting the health and safety of the public? (Scale: 4 = very well; 3= well; 2= poorly; 1= very poorly)</i>	<b>Aggregate (All BONs)</b>		<b>Texas (Independent)</b>		<b>Independent BONs</b>		<b>Umbrella BONs</b>	
	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>
FY02	452	3.34 (0.57)	–	–	389	3.36 (0.57)	63	3.21 (0.54)
FY05	559	3.27 (0.57)	17	3.24 (0.56)	448	3.30 (0.55)	111	3.12 (0.61)
FY07	819	3.04 (0.68)	31	2.87 (0.62)	310	3.10 (0.68)	236	2.91 (0.66)
FY09	1,214	3.09 (0.65)	19	3.37 (0.60)	722	3.19 (0.61)	492	2.95 (0.68)

## ADMINISTRATIVE – Education Programs

Overall, education programs surveyed thought that the BON was “effective” in promoting public protection, promoting quality in education and responding to health care changes. Education programs thought BONs were “somewhat effective” in responding to innovation in education. Across all four areas, education programs from independent BON states rated their BON’s effectiveness slightly higher than those from umbrella BON states (Education Programs Question 1).

Table 160: Education Programs Question 1: Education Programs’ Perceptions Regarding Effectiveness of Regulation – FY02

<i>Please rate your Board of Nursing’s effectiveness in each of the following areas. (Scale: 4 = very effective; 3 = somewhat effective; 2 = ineffective; 1 = not effective at all)</i>	Aggregate (All BONs)		Texas (Independent)	
	n	mean	n	mean
Public protection/accountability	194	3.85	–	–
Promotion of quality in education	194	3.69	–	–
Responsiveness to health care changes	194	3.57	–	–
Responsiveness to innovation in education	193	3.52	–	–

Table 161: Education Programs Question 1: Education Programs’ Perceptions Regarding Effectiveness of Regulation – FY05

<i>Please rate your Board of Nursing’s effectiveness in each of the following areas. (Scale: 4 = very effective; 3 = somewhat effective; 2 = ineffective; 1 = not effective at all)</i>	Aggregate (All BONs)		Texas (Independent)	
	n	mean	n	mean
Public protection/accountability	610	3.77	76	3.83
Promotion of quality in education	610	3.64	76	3.72
Responsiveness to health care changes	607	3.48	76	3.64
Responsiveness to innovation in education	606	3.41	76	3.50

Table 162: Education Programs Question 1: Education Programs' Perceptions Regarding Effectiveness of Regulation – FY07

<i>Please rate your Board of Nursing's effectiveness in each of the following areas. (Scale: 4 = very effective; 3 = somewhat effective; 2 = ineffective; 1 = not effective at all)</i>	Aggregate (All BONs)		Texas (Independent)		Independent BONs		Umbrella BONs	
	n	mean	n	mean	n	mean	n	mean
Public protection/accountability	1,559	3.84	102	3.89	919	3.87	640	3.81
Promotion of quality in education	1544	3.71	102	3.76	908	3.73	636	3.68
Responsiveness to health care changes	1544	3.56	102	3.74	909	3.62	635	3.49
Responsiveness to innovation in education	1540	3.46	102	3.66	906	3.52	634	3.38

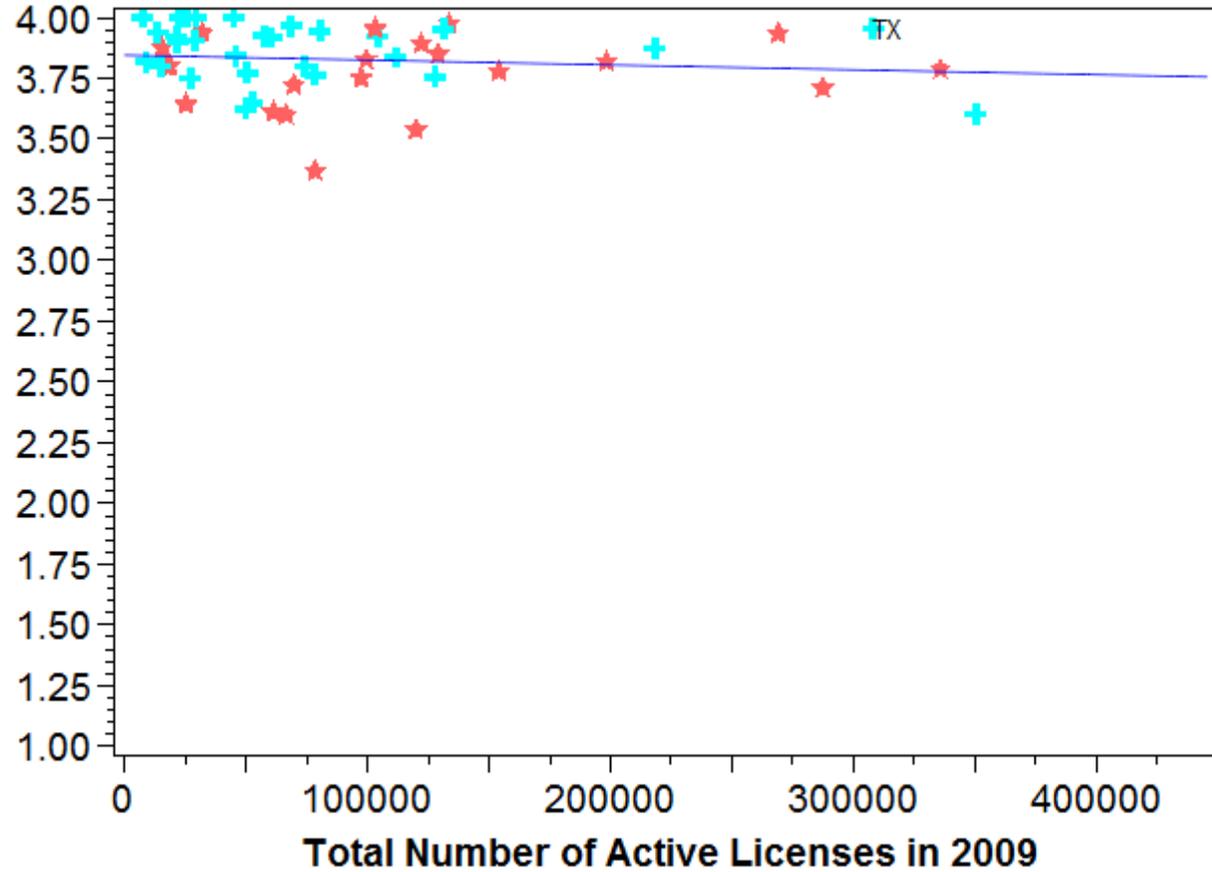
Table 163: Education Programs Question 1: Education Programs' Perceptions Regarding Effectiveness of Regulation – FY09  
(Texas Compared to Aggregate: ABOVE AVERAGE)

<i>Please rate how effective or ineffective your Board of Nursing is in each of the following areas. (Scale: 4 = effective; 3 = somewhat effective; 2 = ineffective; 1 = not effective at all)</i>	Aggregate (All BONs)		Texas (Independent)		Independent BONs		Umbrella BONs	
	n	mean (std)	n	mean (std)	n	mean (std)	n	mean (std)
Public protection/accountability	1,733	3.82 (0)	91	3.96 (0)	919	3.86 (0)	814	3.77 (0)
Promotion of quality in education	1,731	3.66 (1)	89	3.83 (0)	916	3.70 (1)	815	3.61 (1)
Responsiveness to health care changes	1,719	3.56 (1)	89	3.80 (0)	907	3.60 (1)	812	3.52 (1)
Responsiveness to innovation in education	1,727	3.45 (1)	89	3.84 (0)	913	3.51 (1)	814	3.39 (1)

FY09 CORE Data – Survey of Education Programs  
Texas Data

Figure 20: Question 1: Rate BON Effectiveness in Public Protection

**NP1A: Rate BON Public protection**



\*Umbrella BONs

+Independent BONs

Scale: 4=Effective; 3=Somewhat Effective; 2=Ineffective; 1=Not Effective at All

Overall, 87 percent of the education programs surveyed indicated that the BON reviews their program (Education Programs Question 2).

Table 164: Education Programs Question 2: Education Programs Reviewed by the BON  
(Texas Compared to Aggregate: AVERAGE)

<i>Does the Board of Nursing review your Nursing Program?</i>	Aggregate (All BONs)		Texas (Independent)		Independent BONs		Umbrella BONs	
	n	% "Yes"	n	% "Yes"	n	% "Yes"	n	% "Yes"
FY09	1,727	86.6%	89	79.8%	915	92.9%	812	79.6%

Overall, education programs surveyed found BON staff to be “somewhat helpful” in addressing emerging issues (Education Programs Question 6).

Table 165: Education Programs Question 6: Education Programs’ Perceptions of BON Addressing Emerging Issues  
(Texas Compared to Aggregate: ABOVE AVERAGE)

<i>How helpful or unhelpful are Board staff in addressing emerging issues? (Scale: 4 = very helpful; 3 = somewhat helpful; 2 = somewhat unhelpful; 1 = very unhelpful)</i>	Aggregate (All BONs)		Texas (Independent)		Independent BONs		Umbrella BONs	
	n	mean (std)	n	mean (std)	n	mean (std)	n	mean (std)
FY02	183	3.46 (0.65)	–	–	116	3.53 (0.61)	67	3.34 (0.71)
FY05	594	3.17 (0.80)	74	3.26 (0.84)	374	3.31 (0.76)	220	2.94 (0.81)
FY07	1538	3.28 (0.76)	102	3.61 (0.60)	913	3.31 (0.74)	625	3.22 (0.78)
FY09	1,739	3.39 (0.76)	91	3.65 (0.66)	921	3.42 (0.76)	818	3.35 (0.75)

Overall, education programs surveyed found BON staff to be “somewhat timely” in addressing emerging issues (Education Programs Question 7).

Table 166: Education Programs Question 7: Education Programs’ Perceptions of BON Timeliness in Addressing Emerging Issues  
(Texas Compared to Aggregate: ABOVE AVERAGE)

<i>How timely or untimely are Board staff in addressing emerging issues? (Scale: 4 = very timely; 3 = somewhat timely; 2 = somewhat untimely; 1 = very untimely)</i>	<b>Aggregate (All BONs)</b>		<b>Texas (Independent)</b>		<b>Independent BONs</b>		<b>Umbrella BONs</b>	
	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>
FY05	585	3.15 (0.79)	72	3.24 (0.80)	370	3.32 (0.71)	215	2.86 (0.85)
FY07	1522	3.23 (0.76)	101	3.52 (0.63)	902	3.26 (0.76)	620	3.18 (0.76)
FY09	1,740	3.31 (0.76)	91	3.62 (0.59)	923	3.36 (0.74)	817	3.26 (0.78)

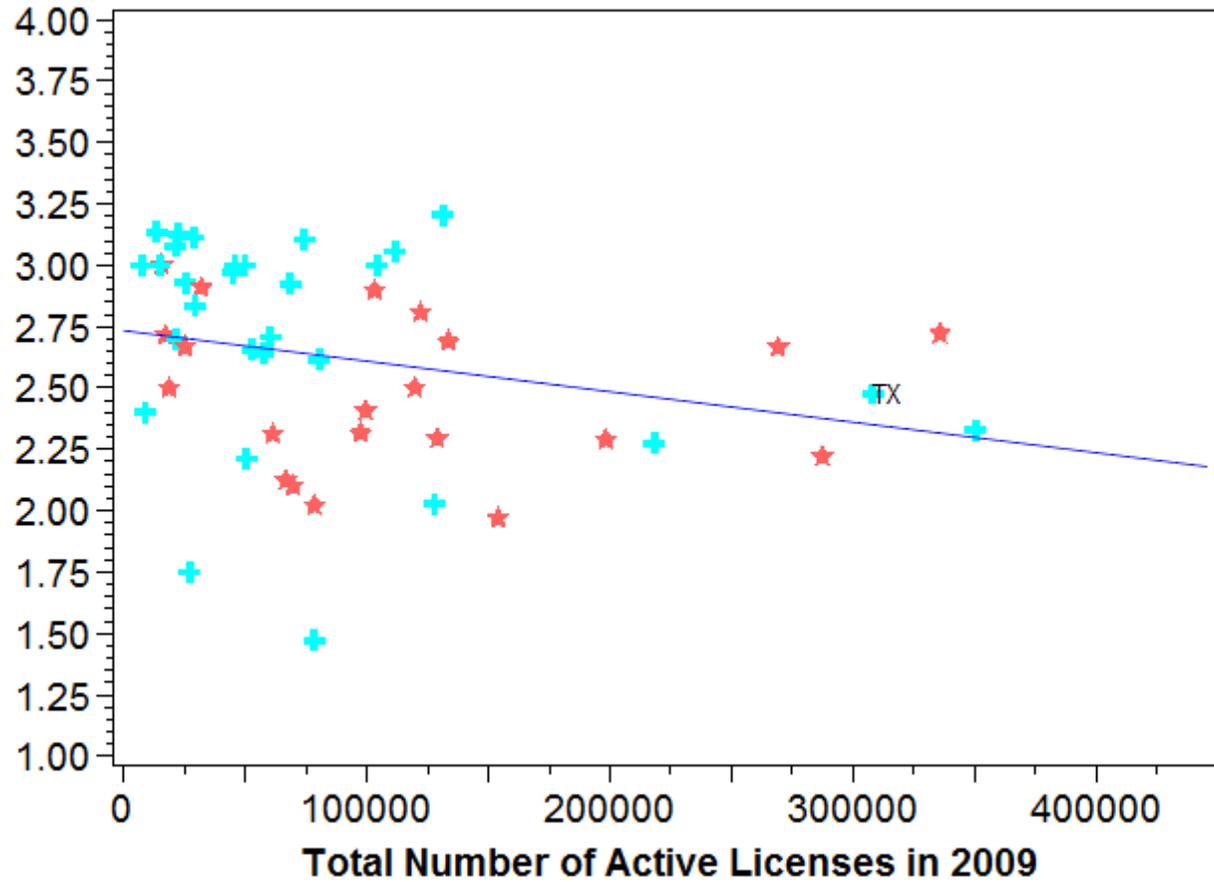
Overall, education programs surveyed found the BON’s telephone system to be “good.” Education programs from independent BON states rated their BON’s phone system higher than programs from umbrella BON states (Education Programs Question 8).

Table 167: Education Programs Question 8: Education Programs’ Perceptions Regarding Telephone System  
(Texas Compared to Aggregate: AVERAGE)

<i>Please rate the Board of Nursing's telephone system. (Scale: 4 = excellent; 3 = good; 2 = fair; 1 = poor)</i>	<b>Aggregate (All BONs)</b>		<b>Texas (Independent)</b>		<b>Independent BONs</b>		<b>Umbrella BONs</b>	
	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>
FY02	126	2.80 (0.80)	–	–	72	2.92 (0.82)	54	2.65 (0.76)
FY05	445	2.51 (0.93)	60	2.55 (0.87)	274	2.73 (0.87)	171	2.16 (0.92)
FY07	1183	2.60 (0.86)	89	2.54 (0.80)	713	2.64 (0.86)	470	2.54 (0.85)
FY09	1,336	2.57 (0.86)	82	2.48 (0.83)	741	2.65 (0.84)	595	2.48 (0.88)

FY09 CORE Data – Survey of Education Programs  
Texas Data  
Figure 21: Question 8: Rate the BON Phone System

NP8: Rate BON automated phone system



\*Umbrella BONS  
+Independent BONS  
Scale: 4=Excellent; 3=Good; 2=Fair; 1=Poor

Overall, education programs surveyed found the BON’s newsletter/magazine to be “good.” Education programs from independent BON states rated their BON’s newsletter/magazine higher than programs from umbrella BON states (Education Programs Question 9).

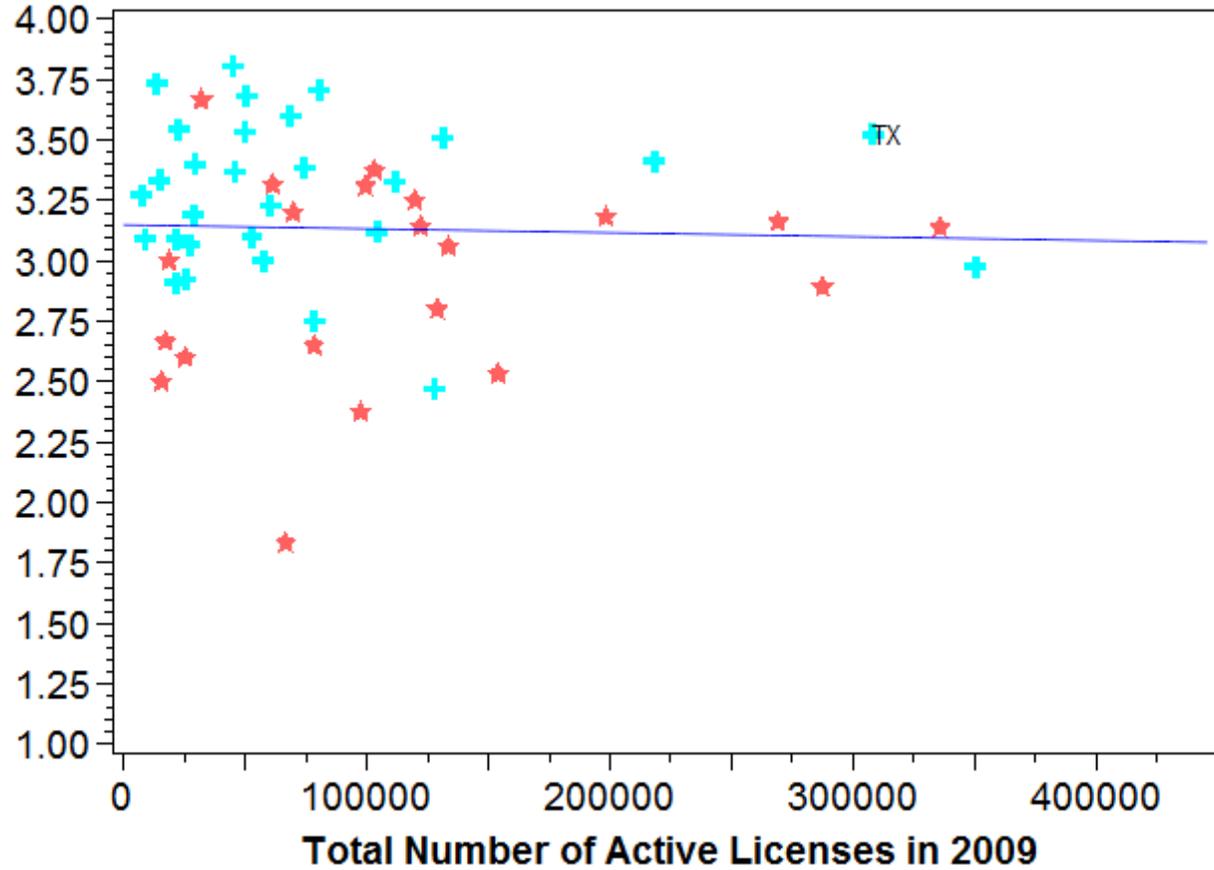
Table 168: Education Programs Question 9: Education Programs’ Perceptions Regarding BON Newsletter

(Texas Compared to Aggregate: ABOVE AVERAGE)

Please rate the Board of Nursing's newsletter/magazine. (Scale: 4 = excellent; 3 = good; 2 = fair; 1 = poor)	Aggregate (All BONs)		Texas (Independent)		Independent BONs		Umbrella BONs	
	n	mean (std)	n	mean (std)	n	mean (std)	n	mean (std)
FY02	157	3.31 (0.59)	–	–	114	3.44 (0.56)	43	2.98 (0.51)
FY05	530	3.29 (0.66)	72	3.47 (0.63)	364	3.40 (0.62)	166	3.07 (0.67)
FY07	1200	3.29 (0.67)	102	3.54 (0.59)	777	3.35 (0.66)	423	3.17 (0.66)
FY09	1,303	3.23 (0.70)	90	3.52 (0.60)	817	3.33 (0.66)	486	3.07 (0.73)

FY09 CORE Data – Survey of Education Programs  
Texas Data  
Figure 22: Question 9: Rate the BON Newsletter

**NP9: Rate BON newsletter**



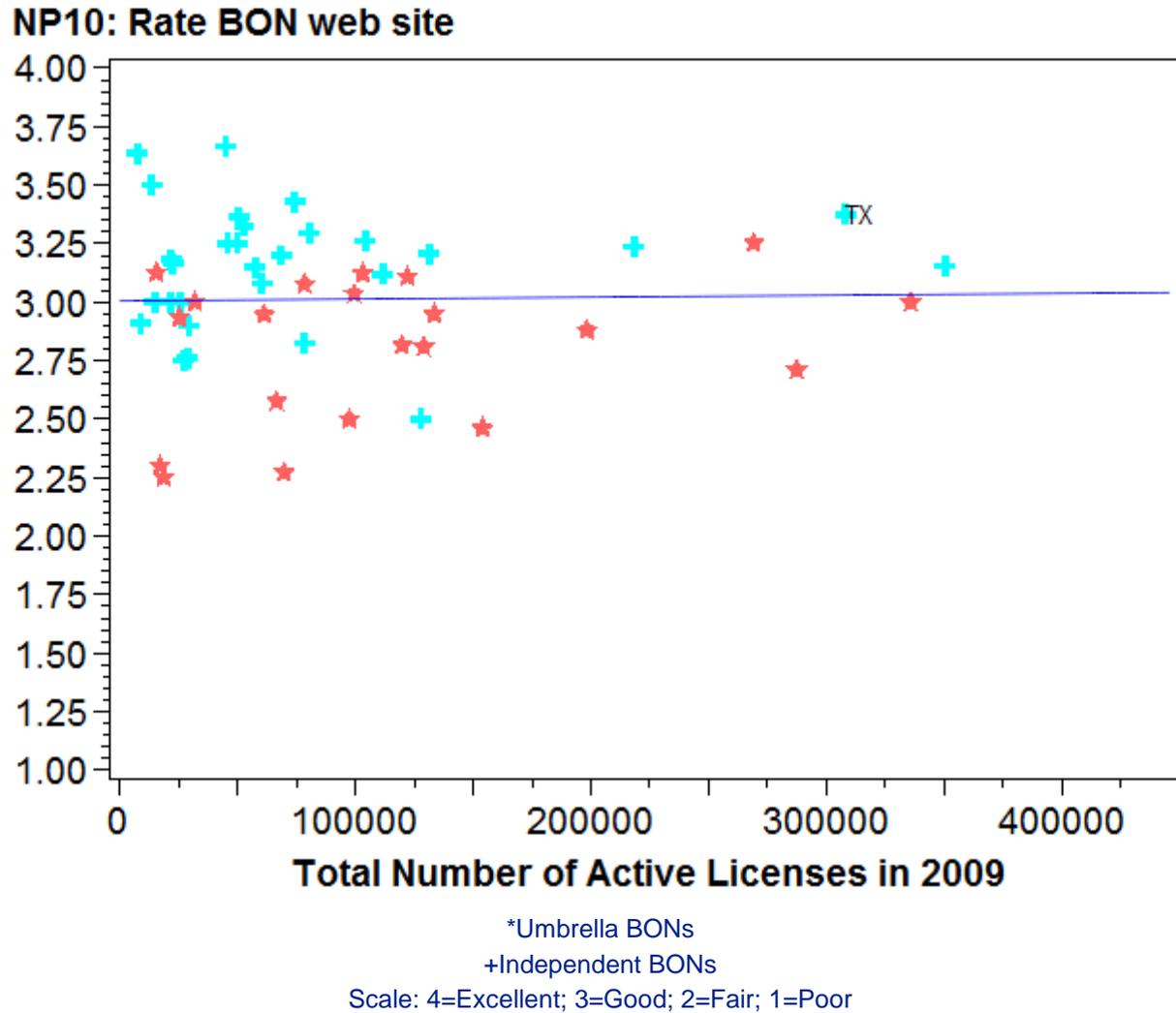
\*Umbrella BONS  
+Independent BONS  
Scale: 4=Excellent; 3=Good; 2=Fair; 1=Poor

Overall, education programs surveyed found the BON’s website to be “good.” Education programs from independent BON states rated their BON’s website higher than programs from umbrella BON states (Education Programs Question 10).

Table 169: Education Programs Question 10: Education Programs’ Perceptions Regarding BON Website  
 (Texas Compared to Aggregate: ABOVE AVERAGE)

<i>Please rate the Board of Nursing's Web site. (Scale: 4 = excellent; 3 = good; 2 = fair; 1 = poor)</i>	<b>Aggregate (All BONs)</b>		<b>Texas (Independent)</b>		<b>Independent BONs</b>		<b>Umbrella BONs</b>	
	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>
FY02	185	3.32 (0.66)	–	–	120	3045 (0.65)	65	3.08 (0.62)
FY05	575	3.13 (0.78)	74	3.36 (0.71)	369	3.31 (0.69)	206	2.80 (0.81)
FY07	1528	3.12 (0.75)	103	3.35 (0.65)	916	3.21 (0.74)	612	2.99 (0.76)
FY09	1,702	3.06 (0.76)	91	3.37 (0.64)	920	3.19 (0.70)	782	2.91 (0.79)

FY09 CORE Data – Survey of Education Programs  
 Texas Data  
 Figure 23: Question 10: Rate the BON Website



Overall, education programs surveyed found the BON’s activities to be “very helpful” in familiarizing program directors with pertinent rules, regulations and policies. Education programs from independent BON states rated their BON’s activities higher than programs from umbrella BON states (Education Programs Question 12).

Table 170: Education Programs Question 12: Education Programs’ Perceptions Regarding Familiarizing Program Directors with Rules, Regulations and Policies  
(Texas Compared to Aggregate: ABOVE AVERAGE)

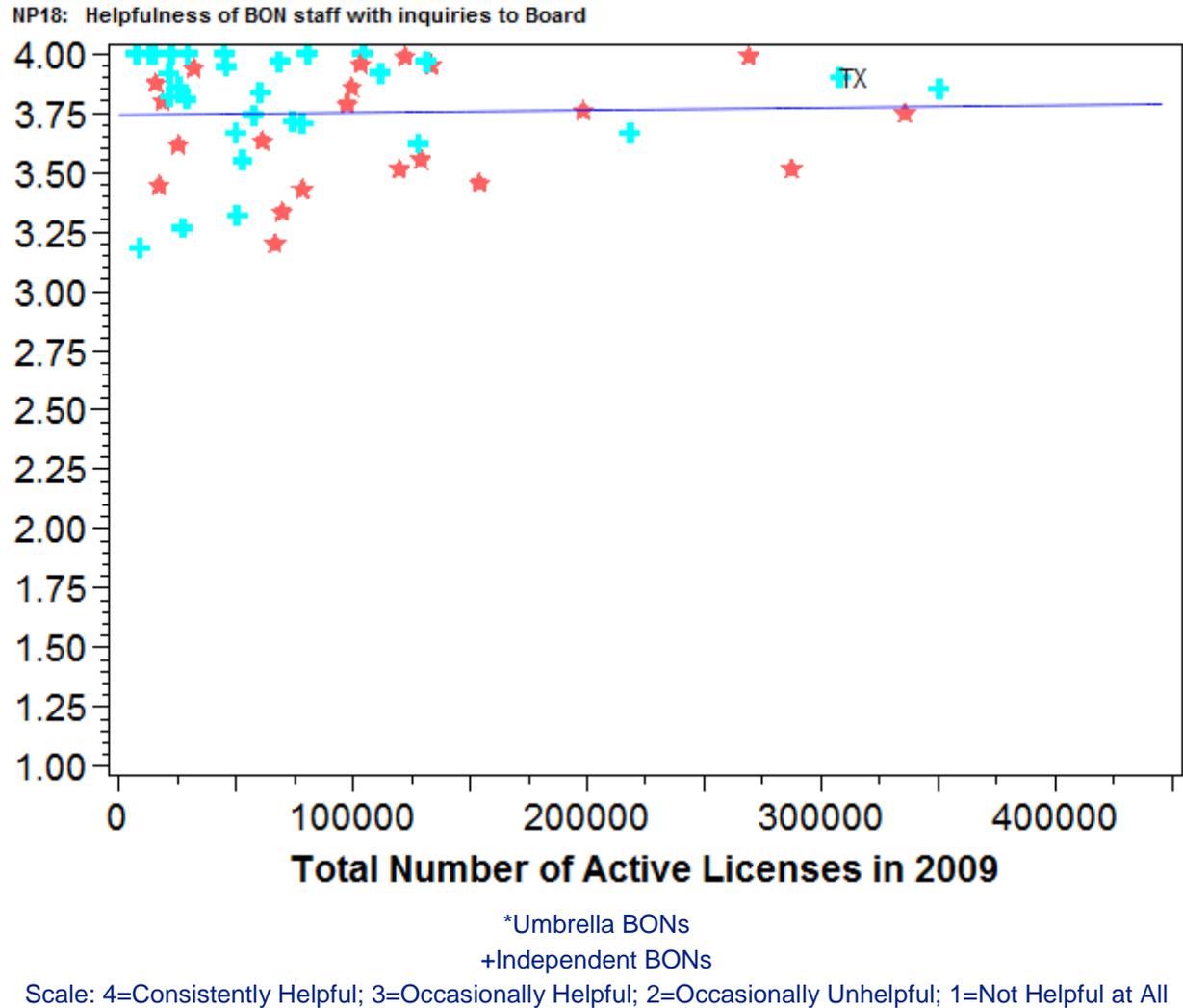
<i>Overall, were the Board of Nursing’s activities and resources helpful or unhelpful in familiarizing program directors with pertinent rules, regulations and policies? (Scale: 4 = very helpful; 3 = somewhat helpful; 2 = somewhat unhelpful; 1 = very unhelpful)</i>	<b>Aggregate (All BONs)</b>		<b>Texas (Independent)</b>		<b>Independent BONs</b>		<b>Umbrella BONs</b>	
	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>
FY07	1,550	3.62 (0.61)	102	3.78 (0.44)	918	3.68 (0.57)	632	3.54 (0.65)
FY09	1,739	3.53 (0.67)	91	3.87 (0.45)	920	3.61 (0.62)	819	3.45 (0.72)

Overall, education programs surveyed found BON staff to be “consistently helpful” with the assistance they provided. Education programs from independent BON states rated their BON’s assistance slightly higher than programs from umbrella BON states (Education Programs Question 18).

Table 171: Education Programs Question 18: Education Programs’ Perceptions of Assistance Provided by BON Staff  
(Texas Compared to Aggregate: ABOVE AVERAGE)

<i>How helpful or unhelpful has the Board of Nursing staff been with any assistance you have needed? (Scale: 4 = consistently helpful; 3 = occasionally helpful; 2 = rarely; 1 = not helpful at all)</i>	<b>Aggregate (All BONs)</b>		<b>Texas (Independent)</b>		<b>Independent BONs</b>		<b>Umbrella BONs</b>	
	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>	<b>n</b>	<b>mean (std)</b>
FY02	191	3.91 (0.29)	–	–	120	3.95 (0.22)	71	3.83 (0.38)
FY05	596	3.85 (0.42)	75	3.89 (0.31)	379	3.90 (0.34)	217	2.76 (0.51)
FY07	1542	3.82 (0.43)	103	3.95 (0.26)	910	3.85 (0.39)	632	3.78 (0.49)
FY09	1,718	3.77 (0.55)	91	3.90 (0.37)	914	3.82 (0.47)	804	3.71 (0.62)

FY09 CORE Data – Survey of Education Programs  
 Texas Data  
 Figure 24: Question 18: Helpfulness of BON Staff



Overall, education programs thought the BON provided adequate regulation in the areas of scope of practice, discipline, education program approval and licensure (Education Programs Question 19).

Table 172: Education Programs Question 19: Ratings of Existing Statutes and Administrative Rules/Regulations – FY05

<i>Please rate the degree or extent of regulation in this state in each of the following areas.</i>	<b>Aggregate (All BONs)</b>	<b>Texas (Independent)</b>
<b>a. Practice standards/scope of practice</b>		
Too much regulation	4.1%	10.7%
Adequate regulation	91.7%	88.0%
Too little regulation	4.1%	1.3%
<b>b. Complaint resolution/discipline process</b>		
Too much regulation	3.5%	7.0%
Adequate regulation	92.7%	88.7%
Too little regulation	3.8%	4.2%
<b>c. Education program approval/accreditation</b>		
Too much regulation	14.3%	25.3%
Adequate regulation	81.8%	73.3%
Too little regulation	3.8%	1.3%
<b>d. Requirements for licensure/certification</b>		
Too much regulation	3.5%	7.9%
Adequate regulation	94.0%	89.5%
Too little regulation	2.5%	2.6%

Table 173: Education Programs Question 19: Ratings of Existing Statutes and Administrative Rules/Regulations – FY07

<i>Please rate the degree or extent of regulation in this state in each of the following areas.</i>	<b>Aggregate (All BONs)</b>	<b>Texas (Independent)</b>	<b>Independent BONs</b>	<b>Umbrella BONs</b>
<b>a. Practice standards/scope of practice</b>				
Too much regulation	2.5%	4.9%	2.2%	3.0%
Adequate regulation	93.8%	92.2%	95.7%	91.0%
Too little regulation	3.7%	2.9%	2.1%	5.9%
<b>b. Complaint resolution/discipline process</b>				
Too much regulation	2.1%	4.3%	2.3%	1.7%
Adequate regulation	94.8%	94.7%	94.2%	95.5%
Too little regulation	3.1%	1.1%	3.4%	2.8%
<b>c. Education program approval/accreditation</b>				
Too much regulation	10.7%	16.8%	11.8%	9.1%
Adequate regulation	86.0%	83.2%	85.3%	87.1%
Too little regulation	3.2%	–	2.9%	3.8%
<b>d. Requirements for licensure/certification</b>				
Too much regulation	3.3%	2.9%	3.5%	3.0%
Adequate regulation	94.9%	97.1%	95.6%	93.9%
Too little regulation	1.8%	–	0.9%	3.0%

Table 174: Education Programs Question 19: Ratings of Existing Statutes and Administrative Rules/Regulations – FY09

(Texas Compared to Aggregate: AVERAGE)

<i>For each of the following, please indicate whether you think the Board of Nursing's existing statutes and administrative rules/regulations provide too much, too little, or an adequate amount of regulation.</i>	<b>Aggregate (All BONs)</b>	<b>Texas (Independent)</b>	<b>Independent BONs</b>	<b>Umbrella BONs</b>
<b>a. Practice standards/scope of practice</b>	1717	89	916	801
Too much regulation	3.3%	2.2%	2.9%	3.6%
Adequate regulation	92.2%	95.5%	95.0%	89.0%
Too little regulation	4.5%	2.2%	2.1%	7.4%
<b>b. Complaint resolution/discipline process</b>	1611	84	859	752
Too much regulation	1.9%	–	2.1%	1.6%
Adequate regulation	93.4%	96.4%	92.8%	94.0%
Too little regulation	4.8%	3.6%	5.1%	4.4%
<b>c. Education program approval/accreditation</b>	1685	88	901	784
Too much regulation	8.8%	4.5%	9.9%	7.7%
Adequate regulation	84.3%	89.8%	86.0%	82.3%
Too little regulation	6.9%	5.7%	4.1%	10.1%
<b>d. Requirements for licensure/certification</b>	1712	88	910	802
Too much regulation	2.0%	–	2.2%	1.7%
Adequate regulation	95.2%	100.0%	96.7%	93.4%
Too little regulation	2.9%	–	1.1%	4.9%



### **What the Graph Shows**

The graph displays the data for each board of nursing (BON) that responded to question four on the CORE Board of Nursing Survey. The height of the data point along the vertical axis represents the percentage of cases open at the end of fiscal year 2009 (FY09) for six months or less. Data on the total number of active licenses determine the data point's position across the horizontal axis. The graph uses cyan plus signs to represent independent BONs and red stars to represent umbrella BONs. The thin blue line cutting across the graph formed the regression equation created by regressing the Percentage of Cases Open at the End of FY09 for Six Months or Less data on the Total Number of Active Licenses in FY09 data. It serves as a "middle point" for the Percentage of Cases Open data after accounting for the number of licensees in the state. Finally, the graph displays the data for a demonstration state. The point which represents the demonstration state's data is marked on the graph by the "XX" which appears to the immediate right of it.

### **How to Interpret the Data**

In graph on the previous page, a higher caseload in the open six months or less category is a more favorable outcome, so higher numbers are better. Thus, the graph shows that the demonstration state had a smaller percentage of newer cases than states with similar numbers of licensees and is therefore performing poorer than comparable states. The downward slope of the regression line suggests that states with fewer licensees typically have a newer caseload than those with more licensees. While the cyan plus signs representing the independent BONs are distributed fairly evenly above and below the regression line, most of the red stars representing the umbrella BONs fall below the line. This suggests that there is some evidence between umbrella and independent BONs on this topic, with the independent BONs doing a little better than the umbrella BONs.

**Appendix B**  
**Participation in CORE Surveys by State and Year**

	BON	BON Survey	Nurses Survey	Employers Survey	Programs Survey	BON Structure
1	AK	– – – –	– – 2007 2009	– – 2007 2009	– – 2007 2009	Umbrella
2	AL	– – – –	– – – –	– – – 2009	– – – 2009	Independent
3	AR	2002 2005 2007 2009	– 2005 2007 2009	– 2005 2007 2009	– 2005 2007 2009	Independent
4	AS	– –	– –	– –	2007 2009	Independent
5	AZ	2002 2005 2007 2009	2002 2005 2007 2009	2002 2005 2007 2009	2002 2005 2007 2009	Independent
6	CARN	2002 2005 2007 2009	– – – 2009	– – 2007 2009	– – 2007 2009	Independent
7	CAVN	– –	2007 2009	2007 2009	2007 2009	Umbrella
8	CO	– –	2007 2009	2007 2009	2007 2009	Umbrella
9	CT	2002 2005 2007 –	– – – 2009	– – – 2009	– – – 2009	Umbrella
10	DC	– 2009	2007 2009	2007 2009	2007 2009	Umbrella
11	DE	– – – –	– – 2007 2009	– – 2007 2009	– – 2007 2009	Umbrella
12	FL	2002 2005 2007 2009	2002 2005 2007 2009	2002 2005 2007 2009	2002 2005 2007 2009	Umbrella
13	GAPN	– – – –	– – 2007 2009	– – 2007 2009	– – 2007 2009	Umbrella

	BON	BON Survey	Nurses Survey	Employers Survey	Programs Survey	BON Structure
14	GARN	2002 – – –	– – 2007 2009	– – 2007 2009	– – 2007 2009	Umbrella
15	GU	– – – –	– – – –	– – – –	– – – 2009	Umbrella
16	HI	2002 2005 2007 –	– – – 2009	– – – 2009	– – – 2009	Umbrella
17	IA	2002 – 2007 2009	– 2005 2007 2009	– 2005 2007 2009	– 2005 2007 2009	Independent
18	ID	2002 – 2007 2009	– 2005 2007 2009	– 2005 2007 2009	– 2005 2007 2009	Independent
19	IL	– – – –	– 2005 2007 2009	– 2005 2007 2009	– 2005 2007 2009	Umbrella
20	IN	2002 2005 – –	– – 2007 2009	– – 2007 2009	– – 2007 2009	Umbrella
21	KS	2002 2005 2007 2009	2002 2005 2007 2009	2002 2005 2007 2009	2002 2005 2007 2009	Independent
22	KY	2002 2005 2007 2009	2002 2005 2007 2009	2002 2005 2007 2009	2002 2005 2007 2009	Independent
23	LAPN	2002 – 2007 2009	– – – –	– – 2007 2009	– – 2007 2009	Independent
24	LARN	2002 2005 2007 2009	2002 2005 2007 2009	2002 2005 2007 2009	2002 2005 2007 2009	Independent

	<b>BON</b>	<b>BON Survey</b>	<b>Nurses Survey</b>	<b>Employers Survey</b>	<b>Programs Survey</b>	<b>BON Structure</b>
25	MA	– – – 2009	– 2005 2007 2009	– 2005 2007 2009	– 2005 2007 2009	Umbrella
26	MD	2002 2005 2007 –	– 2005 2007 2009	– – 2007 2009	– – 2007 2009	Independent
27	ME	– – – –	– 2005 2007 2009	– – 2007 2009	– – 2007 2009	Independent
28	MI	– – – –	– – 2007 2009	– – – 2009	– – 2007 2009	Umbrella
29	MN	2002 2005 2007 2009	2002 2005 2007 2009	2002 2005 2007 2009	2002 2005 2007 2009	Independent
30	MO	2002 2005 2007 2009	2002 2005 2007 2009	2002 2005 2007 2009	2002 2005 2007 2009	Independent
31	MP	– – – –	– – – –	– – – –	– – – –	Umbrella
32	MS	2002 – – 2009	2005 – 2007 2009	– – 2007 2009	– – 2007 2009	Independent
33	MT	2002 – – 2009	– – 2007 2009	– – 2007 2009	– – 2007 2009	Umbrella
34	NC	2002 2005 2007 2009	2002 2005 2007 2009	2002 2005 2007 2009	2002 2005 2007 2009	Independent
35	ND	2002 2005 2007 2009	2002 2005 2007 2009	2002 2005 – 2009	2002 2005 2007 2009	Independent

	BON	BON Survey	Nurses Survey	Employers Survey	Programs Survey	BON Structure
36	NE	2002 – – 2009	2002 2005 2007 2009	2002 2005 – 2009	2002 2005 2007 2009	Umbrella
37	NH	2002 2005 2007 2009	– – 2007 2009	– – 2007 2009	– – 2007 2009	Independent
38	NJ	2002 – – –	– – 2007 2009	– – 2007 2009	– – 2007 2009	Independent
39	NM	2002 – – –	– 2005 2007 2009	– 2005 2007 2009	– 2005 2007 2009	Independent
40	NV	2002 2005 2007 2009	– 2005 2007 2009	– 2005 2007 2009	– 2005 2007 2009	Independent
41	NY	2002 2005 2007 –	– – 2007 2009	– – 2007 2009	– – 2007 2009	Umbrella
42	OH	2002 2005 2007 2009	– – 2007 2009	– – 2007 2009	– – 2007 2009	Independent
43	OK	2002 2005 2007 2009	2002 2005 2007 2009	2002 2005 2007 2009	2002 2005 2007 2009	Independent
44	OR	2002 2005 2007 2009	2002 2005 2007 2009	2002 2005 2007 2009	2002 2005 2007 2009	Independent
45	PA	2002 2005 2007 2009	– – 2007 2009	– – – 2009	– – 2007 2009	Umbrella
46	RI	– – 2007 –	– – 2007 2009	– – 2007 2009	– – 2007 2009	Umbrella

	BON	BON Survey	Nurses Survey	Employers Survey	Programs Survey	BON Structure
47	SC	– 2002 2005 2007 2009	– – – 2007 2009	– – – 2007 2009	– – – 2007 2009	Umbrella
48	SD	– 2005 2007 2009	– 2005 2007 2009	– 2005 2007 2009	– 2005 2007 2009	Independent
49	TN	– – 2007 –	– 2005 2007 2009	– – 2007 2009	– – 2007 2009	Umbrella
50	TX	– 2005 – 2009	2002 2005 2007 2009	2002 2005 2007 2009	2002 2005 2007 2009	Independent
51	UT	– – – –	– 2005 2007 2009	– – 2007 2009	– – 2007 2009	Umbrella
52	VA	– – 2007 2009	– – 2007 2009	– – 2007 2009	– – 2007 2009	Umbrella
53	VI	– – – –	– – 2007 2009	– – – –	– – 2007 2009	Umbrella
54	VT	– – – –	– – 2007 2009	– – – 2009	– – 2007 2009	Umbrella
55	WA	2002 2005 2007 2009	2002 – – 2009	2002 – – 2009	2002 – 2007 2009	Umbrella
56	WI	2002 2005 2007 2009	– – 2007 2009	– – 2007 2009	– – 2007 2009	Umbrella
57	WVPN	2002 2005 2007 2009	2002 2005 2007 2009	2002 2005 2007 2009	2002 2005 2007 2009	Independent

	<b>BON</b>	<b>BON Survey</b>	<b>Nurses Survey</b>	<b>Employers Survey</b>	<b>Programs Survey</b>	<b>BON Structure</b>
58	WVRN	2002 2005 2007 –	– – 2007 2009	2002 2005 2007 2009	2002 2005 2007 2009	Independent
59	WY	– – – 2009	– – – 2009	– – – 2009	– – – 2009	Independent
	Total	33	53	55	58	

**Appendix C**  
**FY09 CORE Data**  
**Texas Open-ended Comments**

*What other suggestions do you have for improving the Board of Nursing's activities for the protection of the public?*

**Comments from Nurses**

- I like it much better when license was every 2 yrs & CPR every 2 yrs. Nurses are very busy. Most CPR classes are scheduled during working hours so its very hard to schedule.
- Require more CEU's for licensure renewal being an education nurse protects the public.
- Easier access. Most people don't know the function of the board of nurses. I never have had to report a co-worker.
- Too many new nursing students that I have personally been preceptor to, are totally unequipped to handle the stress of an acute unit or skilled long-term unit. Common sense has been hard to come by for some time. Too many new nurses are going into the profession for the money only. I know it is difficult to screen everyone. A big help would be for all facilities to have drug testing upon hire and at random. If something isn't done about this problem, our profession sill severely suffer or continue to suffer. Nursing schools should also have drug testing in place for their students. PLEASE! PLEASE! SOMEONE ADDRESS this issue and the issue of poor staffing!
- Continuing education does not seem well monitored allowing inadequate nurses to remain licensed.
- Random confidential contact either by e-mail or phone requesting information, how it relates to scope of practice issues. I apology, my essential tremor especially bad today. Mel.
- I was initially licensed in Ohio, but moved to N.J. soon afterward, was licensed there, and practiced as an R.N. for many years. We moved to KY almost seven years ago, and I found obtaining my license very difficult and frustrating as well as expensive. I tried to contact a live human at the KBN, but had a difficult experience doing so. When I finally did reach someone, the person was curt, cold and apparently not interested in giving me any help or information.
- I have no suggestions. The KY Board of Nursing does an excellent job!! FYI: This letter states that I was sent a survey before...I did not receive one!!
- Working nurses, involved in patient care, 1 on 1, should not have to have so many CEU's so often.
- Website a bit difficult to navigate.
- Closer monitoring on Nursing programs and the education they are providing. Sometimes the students who do their clinical work in our facility report spending a lot of time arguing with instructors to raise their scores on exams. Perhaps they should look at their teaching methods and why they are not getting the point across, rather than throwing out what the students suggest is a bad question. Also, perhaps the universities should take a good look at the candidates they are accepting into their programs.
- License should have picture ID for verification.

- It would really be nice if when LPN's want to further their education, we really should be accepted without having to test just to get back into school. There are hundreds of LPN good & caring nurses, myself being one, but because of entrance exams that sometimes can't be passed for whatever. We still should have access to attending school, until proven that we can't keep up.
- More refresher courses available.
- I have not practiced as an employed RN. I volunteer for many organizations. I married a physician 30 yrs ago and cont. to keep my CEU's up to date and licensure current.
- There should be limits set on nurse-patient ratio. I feel this is a great safety issue. You address all issues, but not this matter. How can a nurse give safe care with a patient load of over 7 patients. I have had up to 12 patients. Our administration informed me that no one was willing to come in to help. We have up to 9 patients and giving blood transfusions. This includes admitting, discharging & wound care. I will repeat this is not safe. The Board of Nursing could address this matter by setting some limits and rules for the safety of the patients. Thank you.
- More information sent in mail to nurses homes.
- When asking a specific question about RN scope of practice, little help in detail is given. Directions to read the website are given. When asked for clarification or interpretation, 5 months later, I received an email which stated they had no further information. As an educator, why can we get help in interpretation of the scope of practice details. They seem to be vague on purpose, leaving the nurse in the dark.
- Look closer at nurse to patient ratio!
- If the board could give each aspect of nsg-example me with rehab nursing, hospital nursing, long care nursing etc.-an outline of their specific nursing laws ? direct to web sites more specific to each area of nursing practices. Hopefully it will help nursing in specific fields to more understand-laws and rules to their fields-issues of understanding all laws (rules to all of nursing)-which I know I and all nurses should know basic laws/rules of nursing overall-but would likely practice and able to teach laws/rules and our specific fields and less likely to depend on our employers for these laws/rules.
- KBN I suggest nothing however the curriculum for ADN programs is too much theory & not enough reality based learning. Most new grads don't have a clue how to care for the pt. & what it takes to do bedside nursing. I learned much more hands on as a LPN than ADN. They also need to teach the importance of time management & more on legal issues.
- Get laws passed to eliminate all forced over-time, back up lists to force staffing over due to call ins, short staffing, vacations, etc. These forced over-times are ripe for med errors/accidents just waiting to happen. Tired nurses make poor decisions. I'm sure statistics bear this out. Thank you.
- I went to the Texas Board of Nursing in person to resolve a paperwork issue. I sat in the waiting room for over thirty minutes while the employees enjoyed some type of lunchtime party. I'm disgusted that my dues pay for these people to be employed. The Texas Board of Nursing is apparently incapable of processing anything efficiently. On a positive note, I do appreciate the RN/ARNP licensure verification available online.

- I think mandatory drug testing should be implemented by the board. There are too many nurses on drugs & not enough regulation or spontaneous testings.
- I am involved with a professional organization KSNA, they keep me up to date on most activities & changes. I am not sure if I wasn't in this organization how well I would stay up to date on current changes.
- The KY Bd. of Nsg. employees I spoke with (except for one) need not to tell the public about how overworked they are! They lack compassion or understanding. My experience that lasted a couple weeks was horrible!
- Require more CE.
- Unannounced visits to various areas of practice.
- This really falls to the supervisors & leaders in healthcare facilities but the board does need to make the reporting process easy but fair & all accusations should be examined fairly & evidence weighed carefully.
- Work on raising ARNP independence! Be our advocate!
- I would like to see a quicker resolution by the board when nurses are reported for substance abuse.
- I am getting ready to graduate with my MSN. I wish the state board had a web link or service available to assist me in entering practice as a FNP.
- State Board of Nursing should offer guidance to bedside nursing regarding reasonable safe nursing staffing for various settings. Many especially new nurses have no idea what safe #'s might be and so are taken advantage of by management in many situations.
- The standards of practice are very vague & when trying to find specifics not clear.
- It would be good if there was a way that board could state that the education-school would place more time on hands on clinical work for the students and a little less book work. The nursing students today when they graduate have very little hands on experience. They may be able to tell you how to do a procedure, but they have never done it or maybe have done it one other time.
- I am retired & only do volunteer work - occasionally do some nursing (ex: case management, camp nurse). I keep my license current.
- I think nurse's in the KARE program should appear in the KBN magazine just like all other nurses. Nurses that are on probation only, should not be drug tested as much as nurse's that are documented user's & are in the RARE program. I think if you fail a drug test or charged twice while in the Kara program your fines & suspension of licensure should be severe.
- Bd. of Nsg. should take more interest in nurses' safety and their rights while working.
- Should look into making it easier for LPN to move up to RN while working. Without having to take a lot of classes that do not pertain to nursing at all.

- Hold all nurses to the highest standard of patient responsibility in ensuring quality of care and accountability. No shortcuts when dealing with patients. All complaints re: nurse should be fully investigated in a timely manner.
- The Texas Board of Nursing is very accessible on the phone & through the internet. Thank you for letting me participate in this survey.
- Go back to only 2 year renewal & the option of doing it by mail & not computer.
- All nurses need to be tested for drug use at random by the Texas Board of Nursing, because hospitals/facilities only test the nurses they suspect are drug-free. Drug use is getting worse, and patient care and drug free co-workers have to work in a conflicting environment.
- It would be nice to talk to a person without the automated phone service, but this is with every company modern tech.
- Make certain nurses get breaks & lunch! A rested nurse is a safe one!!! The Board should protect the public with safe RN vs. patient ratios. Hospitals make too much money cutting RN shifts, having RN's miss lunch-patients are not being taken care of properly!
- I think the Board of Nursing should implement a safe nurse/patient ratio in hospitals like the State of California.
- Too difficult to communicate per phone or mail. Some nurses do not use computer very well. But we still have questions & opinions.
- I made a very legitimate complaint on an RN that had negligently caused permanent damage to a Pt. After I filed the complaint, I didn't receive any information as to the status of my complaint. If any disciplinary actions had been taken, it would have been printed in the newsletters. Absolutely nothing happened and this nurse continues to practice.
- Too many nursing programs, accredited by the board, are turning but inadequate nurses. Poorly trained on the clinical aspects of nursing and what is required/needed of patients. Students are not allowed to perform many tasks in patient care and therefore, are ill prepared upon graduation. The licensure testing procedure does not adequately evaluate the abilities of the nurse, it did not 25 years ago, and does not today.
- Overall, I believe they do a great job. I do wish that the good grandfather the LPN's that have a lot of clinical experience take the test to see if they qualify.
- Are there requirements for potential students into the non-stationary university nursing programs? (Concern about students accepted into some nursing programs).
- It is very difficult to find opinions on practice issues without a long in-depth process. Hard to get a concrete answer that satisfies my questions.
- To put rules & all things in ways everyone can understand instead of legal talk. Everything is always in legal writing & very hard to understand.

- I think supervisors should have limitations on how many years they hold that position. Even the president of the U.S.A. has a limit of two terms. This would protect staff nurses from the threats of being fired for reporting breaks in practice and policy,
- Would prefer biannual renewal.
- Allow a nurse/patient ratio to be set in place as a guideline. This may help to increase/improve patient safety because the nurses caring for these people would be able to truly focus on each of their patients, and their patients' needs. -I think that you could also improve the protection of the patients/public by supervising the nurses caring for them (the public). My number one goal for my patients is safety. So any way the Board finds to do this and improve on things, I believe they should.
- In the past I have requested answers to questions I had regard scope/practice from the board web site. I never received a response to my questions so I quit going to the board web site. I now get answers from other sites or colleagues.
- It is degrading to the Board to publish details of disciplinary action against nurses in it's Newsletter. Anyone with the need to know should contact the board by phone or mail. Any lay person could pick up the Newsletter & read it. This would not contribute to the public's confidence in the nursing profession. Most nurses find these lists distasteful.
- Too much power to investigators. Anyone can complain about anything and they have attitude towards nurse & take excessive amounts of time to resolve and provide little if any help/support/guidance. Texas Board of Nursing Sucks!
- More branches in community. Representatives on more local levels.
- Yearly testing.
- There are many nurses who do not like using the internet for license renewal. They do not like to enter credit card info.
- The facility I work for & KY B.O.N. laws are different. I like renewing lic every 2 yrs.
- Would like to see randomized drug screening by the board.
- More public awareness/public education provided.
- KY Board of Nursing is wonderful in every aspect I have needed it for. The only exception is the educational facility at which I received my training. Issues other than preparing us for nursing was the major focus of 3 of our instructors. They passed everyone for fear of being fired due to a situation that happened before my class entered. One student (in my class) allowed his fiancee to don nursing attire and accompany him to his OR rotation and our instructor was aware & let it pass until the rest of the class brought it to her attention. Only then, was the student disciplined & only because Lauren feared for her job, 3 months after the fact.
- I'd like to see more articles in the KBN magazine about the state's nursing practice act regarding safe delegation of tasks to unlicensed personnel.

- Let organizations know when a nurse's license has been suspended. Need to ask nurses where they work during the license renewal process.
- I don't see any problems.
- Standards for passing NCLEX too high. The continuous increase places excessive hardship on nsg programs and nursing students. Protecting the public is not at stake, the new graduate is a novice. He/she can not enter the workforce an expert. Using “first time pass rates” is not realistic. We all know that this is not indicative of the level of expertise of the new graduate. I believe that the increase in the standards is not to protect the public, it is an entry into practice issue, squeeze out the ADN.
- I have been in management 17 of my 20 yrs. I've dealt with the board many times and feel the process is effective for the most part. I can tell you many nurses who have not been in executive leadership roles have very little knowledge of the board.
- 1) Stricter requirements to obtain CEU's 2) Return to CEU requirement of every 2 years.

### **Comments from Employers**

- Periodic communication net status of discipline-takes month & months other than that KBN does great job!
- I feel we have an excellent nursing board.
- No known concerns at this time. Board has a good web site.
- More in-services on BON activities and future course.
- Less time on disciplinary actions.

### **Comments from Education Programs**

- Change regulation to requiring ether 120 before or 120 hrs. after for clinical practicum, but not both. PN students have difficulty finding employment to get 120 hours when they continue on full time into the RN bridge program.
- Establish specific guidelines for New Program proposal related to clinical sites & clinical experiences.
- The Texas Board of Nursing does a very good job.
- KBN does a commendable job.
- I think they do an excellent job overall in staying on top of trends for safe healthcare & nurse education.
- My experience with our board of nursing has been overwhelmingly positive. As a body they are user friendly for both the lay public and professionals. It is a dynamic board that places patient safety and educational quality as top priorities as well as attention to changing health care practices and how this may impact all concerned.

# Appendix D

## FY09 Board of Nursing Survey



# BOARD OF NURSING SURVEY

This questionnaire is part of the Commitment to Ongoing Regulatory Excellence (CORE) project: a performance measurement system for nursing regulators. These data will help improve organizational performance practices, capabilities, and evidenced-based results in the provision of regulatory services.

1. Please indicate your Board of Nursing

2. How many complaints against nurses did the board receive in FY2009? (Count all complaints captured before triage and include complaints received by phone, fax, mail, or email. If you do not know or you do not count what is not reportable or within your jurisdiction GO TO QUESTION 3))

3. Of all captured complaints counted in question 2, how many were initially determined to be potential violations within the jurisdiction of the board?

4. What percentage of the cases still open at the end of FY2009 had been open for

Percentage

- 6 months or less  %
- 7-12 months  %
- 13-24 months  %
- Over 24 months  %

For the following questions, please provide information of RN/LPNs and APRNs. If you do not know how many RN/LPNs and APRNs just enter the TOTAL number.

	RN/LPN	APRN		Total
5. Of all cases resolved in FY2009, what was the average length of time (in days) between the receipt of the complaint to the resolution of the complaint?	<input style="width: 60px; height: 25px;" type="text"/>	<input style="width: 60px; height: 25px;" type="text"/>		
6. What was the total number of cases open on the last day of FY2008?	<input style="width: 60px; height: 25px;" type="text"/>	<input style="width: 60px; height: 25px;" type="text"/>	OR	<input style="width: 60px; height: 25px;" type="text"/>
7. What was the total number of new cases assigned to investigators during FY2009?	<input style="width: 60px; height: 25px;" type="text"/>	<input style="width: 60px; height: 25px;" type="text"/>	OR	<input style="width: 60px; height: 25px;" type="text"/>
8. What was the total number of cases open on the last day of FY2009?	<input style="width: 60px; height: 25px;" type="text"/>	<input style="width: 60px; height: 25px;" type="text"/>	OR	<input style="width: 60px; height: 25px;" type="text"/>
9. How many individual nurses had investigations opened against them during FY2009?	<input style="width: 60px; height: 25px;" type="text"/>	<input style="width: 60px; height: 25px;" type="text"/>	OR	<input style="width: 60px; height: 25px;" type="text"/>
10. How many individuals were initially placed on active probation/restriction/monitoring for even one day during FY2009 (excluding alternative programs)?	<input style="width: 60px; height: 25px;" type="text"/>	<input style="width: 60px; height: 25px;" type="text"/>	OR	<input style="width: 60px; height: 25px;" type="text"/>
11. Of the cases with a disciplinary action taken in FY2009, how many were the result of a violation of a board order or consent agreement?	<input style="width: 60px; height: 25px;" type="text"/>	<input style="width: 60px; height: 25px;" type="text"/>	OR	<input style="width: 60px; height: 25px;" type="text"/>

**12. Of the total complaints resolved in FY2009 what percent of the complaints were resolved through:**

<b>DISCIPLINARY ACTION</b>	<b>RN/LPN %</b>	<b>APRN %</b>		<b>Total %</b>
Settlement.....	<input type="text"/>	<input type="text"/>	OR	<input type="text"/>
Hearing.....	<input type="text"/>	<input type="text"/>	OR	<input type="text"/>
Other.....	<input type="text"/>	<input type="text"/>	OR	<input type="text"/>
<b>NON-DISCIPLINARY ACTION</b>				
Referral to alternative-to-discipline (substance use disorder) .....	<input type="text"/>	<input type="text"/>	OR	<input type="text"/>
Referral to alternative-to-discipline (non-substance use disorder)	<input type="text"/>	<input type="text"/>	OR	<input type="text"/>
Dismissal .....	<input type="text"/>	<input type="text"/>	OR	<input type="text"/>
Other.....	<input type="text"/>	<input type="text"/>	OR	<input type="text"/>

**13. Of the cases with disciplinary actions, what is the average amount of time (in days) it takes from the receipt of the complaint to the resolution of the complaint?**

<b>DISCIPLINARY ACTION</b>	<b>Average Amount of Time (in days)</b>
Settlement.....	<input type="text"/>
Hearing.....	<input type="text"/>
Other.....	<input type="text"/>
<b>NON-DISCIPLINARY ACTION</b>	
Referral to alternative-to-discipline (substance use disorder)	<input type="text"/>
Referral to alternative-to-discipline (non-substance use disorder)	<input type="text"/>
Dismissal .....	<input type="text"/>
Other.....	<input type="text"/>

**14. Does staff have delegated authority by board policy to:**

- Triage/prioritize complaints without any Board action.....  Yes  No
- Close complaints without any Board action.....  Yes  No
- Issue Licenses without any Board action.....  Yes  No
- Resolve discipline cases without any Board action.....  Yes  No

Go to Next Page

15. Please enter the number of full-time equivalent (FTE) staff who were directly (i.e., carry a caseload) and indirectly (e.g., consulting, decision-making, provide support) involved in the investigative process during FY2009 (To convert part-time employees to FTEs, divide the number of paid hours by 2,080 (52 weeks multiplied by 40 hours per week).

BOARD OF NURSING	# FTEs Involved in Investigative Process	
	Direct	Indirect
Investigators who are nurses.....	<input type="text"/>	<input type="text"/>
Investigators who are not nurses.....	<input type="text"/>	<input type="text"/>
Coordinator/Manager (Include Executive Director, if applicable).....	<input type="text"/>	<input type="text"/>
Administrative Support Staff.....	<input type="text"/>	<input type="text"/>
Attorney (i.e., who are not investigators).....	<input type="text"/>	<input type="text"/>

NON-BOARD EMPLOYEES FROM OTHER STATE AGENCIES	# FTEs Involved in Investigative Process	
	Direct	Indirect
Investigators who are nurses.....	<input type="text"/>	<input type="text"/>
Investigators who are not nurses.....	<input type="text"/>	<input type="text"/>
Attorney (i.e., who are not investigators).....	<input type="text"/>	<input type="text"/>
Other.....	<input type="text"/>	<input type="text"/>
<b>CONTRACTED PERSONNEL NOT EMPLOYED BY THE STATE</b> .....	<input type="text"/>	<input type="text"/>
<b>OTHER (Specify)</b> <input type="text"/>	<input type="text"/>	<input type="text"/>

16. How many attorney FTEs are assigned for legal services?

Attorney employed by the Board of Nursing .....	<input type="text"/>
Attorney General's Office.....	<input type="text"/>
Other (Specify) <input type="text"/>	<input type="text"/>

Go to Next Page

17. Excluding capital expenditures please indicate the Board's total FY2009 expenditures. Please use the worksheet provided to calculate your costs. Fill out what you are able to.

	Actual dollars	Percent of Total Expenditure
Total Expenditures.....	<input type="text"/>	<input type="text" value="100%"/>
Discipline/Monitoring/Complaint Handling.....	<input type="text"/>	<input type="text"/>
Alternative/Monitoring programs for chemical dependency/mental health/physical health.....	<input type="text"/>	<input type="text"/>
Licensure.....	<input type="text"/>	<input type="text"/>
Education Program Approval/ Monitoring.....	<input type="text"/>	<input type="text"/>
Practice.....	<input type="text"/>	<input type="text"/>
Other.....	<input type="text"/>	<input type="text"/>

18. Does your board require federal criminal background checks?  Yes  No

19. Which of the following databases does your board use when licensing a nurse: (Check All That Apply)

- Sex Offender
- Parole database
- Nursys
- FITS
- Accreditation database
- Other state boards of nursing websites
- State only criminal background checks
- Other licensing boards
- Other (Please Specify)

20. Does your board perform audits of the license process?  Yes  No

21. What percentage of initial licenses are processed on-line?

22. What percentage of licensure renewals are processed on-line?

Go to Next Page

23. Please enter the number of full-time equivalent (FTEs) staff who were involved directly and indirectly in the education program approval and monitoring process? An FTE of 1.0 means that the person is equivalent to a full-time worker, while an FTE of 0.5 signals that the worker is only half-time.

# FTEs Involved in the Education Program Approval and Monitoring Process		
	Direct	Indirect
Education Consultant/Manager (Include Executive Director, if applicable)	<input type="text"/>	<input type="text"/>
Administrative Support Staff.....	<input type="text"/>	<input type="text"/>
Attorney.....	<input type="text"/>	<input type="text"/>
Contract personnel .....	<input type="text"/>	<input type="text"/>
Other (Specify) <input style="width: 300px;" type="text"/>	<input type="text"/>	<input type="text"/>

24. Please enter the number of full-time equivalent (FTEs) staff who were directly (i.e., carry a caseload) and indirectly (e.g., consulting, decision-making, provide support) involved in the licensure process? An FTE of 1.0 means that the person is equivalent to a full-time worker, while an FTE of 0.5 signals that the worker is only half-time.

# FTEs Involved in the Licensure Process		
	Direct	Indirect
Manager (Include Executive Director, if applicable)	<input type="text"/>	<input type="text"/>
Licensing Support Staff.....	<input type="text"/>	<input type="text"/>
Attorney.....	<input type="text"/>	<input type="text"/>
Contract personnel .....	<input type="text"/>	<input type="text"/>
Other (Specify) <input style="width: 200px;" type="text"/>	<input type="text"/>	<input type="text"/>

25. Please enter the number of full-time equivalent (FTEs) staff who were directly (i.e., carry a caseload) and indirectly (e.g., consulting, decision-making, provide support) involved in nursing practice issues. An FTE of 1.0 means that the person is equivalent to a full-time worker, while an FTE of 0.5 signals that the worker is only half-time.

# FTEs Involved in Nursing Practice Issues?		
	Direct	Indirect
Nurse (Include Executive Director, if applicable).....	<input type="text"/>	<input type="text"/>
Practice Administrative Support Staff.....	<input type="text"/>	<input type="text"/>
Attorney.....	<input type="text"/>	<input type="text"/>
Contract personnel .....	<input type="text"/>	<input type="text"/>
Other (Specify) <input style="width: 150px;" type="text"/>	<input type="text"/>	<input type="text"/>

Go to Next Page

26. During FY2009, for each type of nurse, what was the length of time in days it took to process applications for licensure from receipt of all required information to authorization to practice? Exclude disciplinary and/or unusual situations.

Length of time (in days) for...	LPN/VN	RN	APRN		Total
Licensure by initial examination.....	<input type="text"/>	<input type="text"/>	<input type="text"/>	OR	<input type="text"/>
Renewals.....	<input type="text"/>	<input type="text"/>	<input type="text"/>	OR	<input type="text"/>

27. Please indicate the number of education programs (include each program and campus that is assigned an NCLEX program code) in your state and how many at the end of FY2009 had received initial approval, full approval, conditional approval, denied initial approval or had lost approval.

Number of Education Programs	Number of Programs with Initial Approval	Number of Programs with Full Approval	Number of Programs with Conditional Approval	Number of Programs Denied Initial Approval	Number of Programs That Lost Approval
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

**Thank you.**

Please return the survey by email to [kkenward@ncsbn.org](mailto:kkenward@ncsbn.org)

Or mail it to: Kevin Kenward, PhD NCSBN, 111 E. Wacker Dr.,  
Suite 2900, Chicago, IL 60601

## FY2009 Budget Clarification Worksheet

This worksheet is provided so that costs will be uniformly reported. In the past, not all boards included indirect costs or salaries in their calculations. Because we want to be able to calculate variables such as “cost per complaint handled” and compare the costs of the work of the board by staffing patterns, we are requesting you use this worksheet to calculate your costs.

Please indicate expenses for the following budget items. If you do not have exact figures, please estimate. Adding the total expenses for all items should match your total FY2009 expenditures. **When a member of the Board staff contributes to more than one category, please allocate a proportion of their salary among the appropriate times.**

(Note: Please do not include one-time capital expenditures or expenses related to the regulation of Certified Nursing Assistants (CNAs) or other Assistive Personnel in any of the following categories.)

1. **The Board's total fiscal year 2009 expenditures** (excluding capital expenditures) \_\_\_\_\_
  
2. **Discipline/Complaint Handling**
  - a) Total salaries (including fringe) of board staff involved in discipline/complaint handling \_\_\_\_\_
  - b) Attorney (non board staff) fees \_\_\_\_\_
  - c) Investigator (non board staff) fees \_\_\_\_\_
  - d) Hearing Costs (including board expenses related to hearings) \_\_\_\_\_
  - e) Expenses related to monitoring compliance with probation \_\_\_\_\_
  - f) Expenses related to alternative programs \_\_\_\_\_
  - g) Misc. expenses \_\_\_\_\_
  
3. **Licensure (including renewal)**
  - a) Total salaries (including fringe) of board staff involved in licensure \_\_\_\_\_
  - b) Verification expenses \_\_\_\_\_
  - c) Expenses related to endorsement (excluding board staff salaries) \_\_\_\_\_
  - d) Expenses related to examination (excluding board staff salaries) \_\_\_\_\_
  - e) Expenses related to renewal (excluding board staff salaries) \_\_\_\_\_
  - f) Other costs related to licensure \_\_\_\_\_

**4. Education Program Approval**

- a. Total salaries (including fringe) of board staff involved in education program approval \_\_\_\_\_
- b. Travel expenses related to education program approval \_\_\_\_\_
- c. Expenses related to distribution of information and materials \_\_\_\_\_
- d. Other costs related to approval of nursing programs \_\_\_\_\_

**5. Practice**

- a. Total salaries (including fringe) of board staff involved in practice activities \_\_\_\_\_
- b. Other costs related to practice \_\_\_\_\_

**6. Operational Costs**

- a. Postage and mailing expenses \_\_\_\_\_
- b. Office supplies \_\_\_\_\_
- c. Rent \_\_\_\_\_
- d. Maintenance on equipment \_\_\_\_\_
- e. Data management expenses \_\_\_\_\_

**7. Administrative Costs**

- a. Total salaries of Executive Officer and support staff (including support departments) not covered by previous categories \_\_\_\_\_
- b. Board expenses (including payments such as per diem or for compensation to board members) not covered by previous categories. \_\_\_\_\_
- c. Other administrative and indirect costs not covered by previous categories \_\_\_\_\_

**8. For any expenses not covered by this questionnaire, please list them here:**

Expense item	Amount
_____	_____
_____	_____
_____	_____

**9. Total FY2009 expenditures (Should match question #1)** \_\_\_\_\_

## **CORE DEFINITIONS**

### **ALTERNATIVE PROGRAMS**

Peer assistance/non-disciplinary approaches to rehabilitating nurses with problems such as substance abuse disorders/dependency other than through formal Board discipline processes and public sanctions.

### **BOARD**

A reference to both the staff working for the state board of nursing and the members of the state board of nursing.

### **CASE**

A complaint(s) against a particular individual assigned to investigation and within the jurisdiction of the Board of Nursing.

### **CASE/COMPLAINT RESOLUTION**

When the Board makes a final action regarding a complaint against a nurse.

This action is distinct from an appeal or any appeal process that might occur. The time for appeals or any waiting or appeal period following final action by the Board should not be used when calculating how long it took to resolve a complaint.

Resolution may be disciplinary or non-disciplinary. Resolution includes consent agreements, board orders, and dismissals.

**COMPLAINT:** An allegation received by the Board related to a specific licensee(s) that (1) has potential merit (i.e., meets requirements for being a potential violation of the Nurse Practice Act and Administrative Rules) and (2) is within the jurisdiction of the Board of Nursing.

### **CONTRACTED PERSONNEL**

Also, an independent contractor, the person who agrees to do a piece of work according to his/her own methods and is subject to the employer's control only as to end product or final result of the work. They are accountable to comply with the statutes, rules and board policies as they relate to the contracted service(s).

### **DATE OF RECEIPT OF COMPLAINT**

Date complaint is received by the state from the complainant

### **DISCIPLINARY ACTIONS**

Any administrative, civil, equitable or criminal action permitted by the state's laws which are imposed on a nurse by the state's licensing BON or other authority, including actions against an individual's license, such as revocation, suspension, probation or any other action which affects a nurse's authorization to practice.

### **DISCIPLINE PROCESS**

The procedures involved in handling complaints from receipt to resolution, including dismissal.

### **FISCAL YEAR**

The dates that correspond to an individual Board's own fiscal year.

### **HEARING**

An evidentiary proceeding before a hearing examiner/administrative law judge or a board (board is the judge) in which evidence in contested cases are heard as required by law.

### **MONITORING**

The process of continually checking, observing, recording or testing of a nurse or nursing program as directed by the Board of Nursing as a condition of disciplinary action.

# Appendix E

## FY09 Nurses Survey



### National Council of State Boards of Nursing Survey of Nurses

In order to assist Boards of Nursing measure their performance and improve their products and services we need your help! Please take a few minutes to answer the questions below. Your answers will help provide data to guide future development of evidenced-based regulation.

**1. What type(s) of nursing license/certification do you hold?**  
*(Check all that apply.)*

- Licensed practical/vocational nurse (LPN/VN)
- Registered Nurse (RN)
- Advanced Practice (APRN) with prescriptive authority:  
(includes CNM, CRNA, NP, CNS, etc.)
- Advanced Practice (APRN) without prescriptive authority:  
(includes CNM, CRNA, NP, CNS, etc.)
- Other *(Identify)*

\_\_\_\_\_

**2. Are you currently employed as a nurse?**

- Yes **Go to Question 3**
- No

**a) If you checked No, how long has it been since you were employed in nursing?**

\_\_\_\_\_ Years and \_\_\_\_\_ Months **Go to Question 4**

**b) Are you currently a nursing student?**

- Yes
- No

**3. Which one of the following *best* describes the type of organization that is your current primary place of employment?** *(Check only one.)*

- Hospital
- Academia/Nursing Education Program
- Long-term care facility
- Community-based care or ambulatory care facility/  
organization (including public health department, visiting  
nurses association, home health, physician's office, clinic,  
nursing education program, school health service,  
correctional facility, etc.)
- Managed Care Organization
- Temporary service/employment agency
- Other setting: *(Identify)*

\_\_\_\_\_

**4. How long have you been licensed to practice as a nurse (total time at all levels of licensure)?**

\_\_\_\_\_ Years and \_\_\_\_\_ Months

**5. Where did you receive your basic nursing education for your LPN/VN or RN license?** *(If you have both, please report for the RN education only.)*

- This State
- Another State, *(which state)* \_\_\_\_\_
- Outside the United States, *(which country)*

\_\_\_\_\_

Over ►

6. How well or poorly did your basic education prepare you to provide safe and effective nursing care?

- Very well prepared
- Well prepared
- Poorly prepared
- Very poorly prepared

7. Have you ever attended a board meeting in the state you hold your primary license?

- Yes
- No

8. To what extent do you understand or misunderstand the differences between the roles of the Board of Nursing and professional associations?

- Understand
- Somewhat understand
- Somewhat misunderstand
- Misunderstand

9. How well do you understand the scope/legal limits of a nurse's practice, as defined by the Nurse Practice Act and related state statutes and rules?

- Understand
- Somewhat understand
- Somewhat misunderstand
- Misunderstand

10. During the past 12 months, did you ask the Board of Nursing in this state about practice issues?

- No **Go to Question 13**
- Yes

a) If yes, overall, how helpful or unhelpful was the response you received from the Board of Nursing in this state?

- Very helpful
- Somewhat helpful
- Somewhat unhelpful
- Very unhelpful

11. Overall, did the Board respond to practice questions in a timely manner?

- Yes
- No
- Don't know how long it took

12. How responsive or unresponsive is the Board of Nursing to changes in practice?

- Very responsive
- Responsive
- Somewhat responsive
- Not responsive at all
- Don't know

13. During the last 12 months, did you have any other communication with this state Board of Nursing? (e.g., attended a formal presentation by the Board of Nursing, asked a non-practice issue question, etc.)

- No
- Yes

a) If yes, how "Satisfied" or "Dissatisfied" were you?

- Very satisfied
- Satisfied
- Dissatisfied
- Very Dissatisfied

14. How satisfied or dissatisfied are you with the licensure process?

- Very satisfied
- Satisfied
- Dissatisfied *Explain:* \_\_\_\_\_

- Very Dissatisfied *Explain:* \_\_\_\_\_

15. If you had a practice question, which one of the following would you be most likely to contact first for assistance? (Please check one.)

- Board of Nursing
- Board of Health
- Professional Nursing Association
- Facility Attorney
- Risk Management Department
- School of Nursing
- Nursing practice law and rules
- Other (please identify) \_\_\_\_\_

16. Which of the following do you use to find out about scope of practice/practice decisions? (Please check all that apply.)

- Nursing practice law and rules
- Board newsletter/magazine
- Other newsletter/magazine
- Board Web site
- Other Web site
- Personal communication with Board staff or member
- Public meetings/educational workshops
- Public hearings
- Public notice
- Other (Please identify.) \_\_\_\_\_

17. For each of the following, please indicate whether you think the Board of Nursing's existing statutes and administrative rules/regulations provide too much, too little, or an adequate amount of regulation. (Please circle the correct response.)

	Too Much Regulation	Adequate Regulation	Too Little Regulation	Not Sure
a. Practice standards/scope of practice	1	2	3	4
b. Complaint resolution/discipline process	1	2	3	4
c. Education program approval/accreditation	1	2	3	4
d. Requirements for licensure	1	2	3	4
e. Other (Specify) _____	1	2	3	4

18. Please rate the Board of Nursing's newsletter/magazine.

- Excellent
- Good
- Fair
- Poor
- Did not read/receive
- Board does not have a newsletter/magazine

20. Please rate the Board of Nursing's automated telephone system.

- Excellent
- Good
- Fair
- Poor
- Did not use
- Board does not have an automated telephone system

19. Please rate the Board of Nursing's Web site.

- Excellent
- Good
- Fair
- Poor
- Did not use
- Board does not have a Web site

21. During the past 24 months, have you been involved in any aspect of the Board of Nursing's disciplinary process (e.g., filed a complaint, provided a report to the Board, was the focus of a complaint, was a witness during a hearing, or was interviewed about a complaint)?

- No **Go to question 23**
- Yes

Over ►

22. Overall, how effective or ineffective was the Board's disciplinary (complaint/investigation/resolution) process in protecting the public?

- Very effective
- Effective
- Ineffective
- Very ineffective

23. How well do you understand the laws in your state about reporting misconduct by a nurse?

- Understand
- Somewhat understand
- Somewhat misunderstand
- Misunderstand

24. Do you know how to report a suspected violation of the nursing laws or rules?

- Yes
- No

25. Overall, how effective is the state's Board of Nursing in protecting the health and safety of the public?

- Excellent
- Good
- Fair
- Poor

26. What other suggestions do you have for improving the Board of Nursing's activities for the protection of the public?

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*Thank you for your assistance in completion of this survey instrument.*

**If you have questions or comments about this survey, please contact Kevin Kenward, PhD,  
at 312.525.3634 or kkenward@ncsbn.org.**

**Please return your completed questionnaire in the postage-paid envelope to:  
NCSBN, 111 E. Wacker Dr., Suite 2900, Chicago, IL 60601**

# Appendix F

## FY09 Employers Survey



### National Council of State Boards of Nursing Employer Survey

In order to assist Boards of Nursing measure their performance and improve their products and services we need your help! Please take a few minutes to answer the questions below. Your answers will help provide data to guide future development of evidenced-based regulation.

**1. Which of the following describes your position?**

- Director of Nursing/Chief Nursing Officer/Nursing Department Head
- Other supervising nurse
- Employer/supervisor, not a nurse
- Other *(Describe)*  
\_\_\_\_\_

**a) How long have you been in this position?**

\_\_\_\_\_ Years    \_\_\_\_\_ Months

**2. Which of the following best describes the type of organization that is your current primary place of employment?**

*(Please check one.)*

- Hospital
- Academia/Nursing Education Program
- Long-term care facility
- Community-based or ambulatory care facility/organization *(Including public health department, visiting nurses association, home health, physician's office, clinic, school health service, nursing education program, correctional facility)*
- Temporary service/employment agency
- Managed Care Organization
- Other *(Please identify)*  
\_\_\_\_\_  
\_\_\_\_\_

**3. Approximately how many full-time equivalent (FTE) nurses are employed by your facility/agency? (Count nurses by their most advanced license.)**

- \_\_\_\_\_ Nursing Assistive Personnel (aides, nursing assistants, etc.)
- \_\_\_\_\_ Licensed Practical/Vocational Nurses (LPN/VN)
- \_\_\_\_\_ Registered Nurses (RN)
- \_\_\_\_\_ Advanced Practice Registered Nurses (APRN) (all kinds)

**4. Which method do you use most frequently to verify licenses ("verification" means confirmation of licensure status)?**

*(Check only one.)*

- Call-in
- Letter
- Phone—Automated system
- Nursys
- Fax
- Web-based verification system (other than Nursys)
- E-mail

**5. Approximately how many new graduates (licensed 12 months or less) were hired by your facility/agency during the past 12 months?**

- \_\_\_\_\_ LPN/VNs
- \_\_\_\_\_ RNs
- \_\_\_\_\_ APRNs

Over ►

**6. In your opinion, how well or poorly prepared are new graduates (licensed less than 12 months) with regard to each of the following?**  
*(Please circle the appropriate number.)*

	Very Well	Well	Poorly	Very Poorly
a. Administer medication by common routes	1	2	3	4
b. Work with machinery used for patient care (i.e., IV infuser, NG suction, etc.)	1	2	3	4
c. Work effectively within a health care team	1	2	3	4
d. Perform psychomotor skills	1	2	3	4
e. Communicate relevant information	1	2	3	4
f. Document a legally defensible account of care provided	1	2	3	4
g. Recognize abnormal assessment findings	1	2	3	4
h. Teach patients	1	2	3	4
i. Assess the effectiveness of treatments	1	2	3	4
j. Recognize abnormal diagnostic/lab findings	1	2	3	4
k. Do math necessary for medication administration	1	2	3	4
l. Respond to emergency situations	1	2	3	4
m. Create a plan of care for patients	1	2	3	4
n. Supervise care provided by others	1	2	3	4
o. To what extent do you feel that experienced nurses (licensed for more than 12 months) with whom you had direct contact over the past 12 months were adequately prepared to provide safe and effective nursing care?	1	2	3	4

**7. How responsive or unresponsive is the Board of Nursing to changes in practice?**

- Responsive
- Somewhat responsive
- Somewhat unresponsive
- Unresponsive

**8. How satisfied or dissatisfied were you with information provided by the Board of Nursing over the past 12 months during presentations you attended?**

- Very satisfied
- Satisfied
- Dissatisfied
- Very dissatisfied

**9. How satisfied or dissatisfied were you with assistance provided by the Board of Nursing over the past 12 months in response to an inquiry you made (other than questions about practice issues)?**

- Very satisfied
- Satisfied
- Dissatisfied
- Very dissatisfied

**10. Please rate the Board of Nursing's automated telephone system.**

- Excellent
- Good
- Fair
- Poor
- Did not use
- The Board does not have an automated telephone system

**11. Please rate the Board of Nursing's newsletter/magazine.**

- Excellent
- Good
- Fair
- Poor
- Did not read/receive
- The Board does not have a newsletter/magazine

**12. Please rate the Board of Nursing's Web site.**

- Excellent
- Good
- Fair
- Poor
- Did not use
- The Board does not have a Web site

13. Do you know how to report a suspected violation of the nursing statute or rule?
- Yes
  - No

14. Which of the following do you use to find out about scope of practice/practice decisions? (Please check all that apply.)
- Nursing practice law and rules
  - Board newsletter/magazine
  - Board Web site
  - Association newsletter/magazine
  - Association Web site
  - Personal communication with Board staff or member
  - Public meetings/educational workshops
  - Public hearings
  - Public notice
  - Other (please identify) \_\_\_\_\_

15. How well do you understand the scope/legal limits of a nurse's practice as defined by the Nurse Practice Act and related state statutes and rules?
- Understand
  - Somewhat understand
  - Somewhat do not understand
  - Do not understand

16. If you had a practice question, which one of the following would you be most likely to contact first for assistance? (Check only one.)
- Board of Nursing
  - Board of Health
  - Professional Nursing Association
  - Facility Attorney
  - Risk Management Department
  - School of Nursing
  - Nursing practice law and rules
  - Other (Please identify)
- \_\_\_\_\_

17. How well do you understand your obligation to report conduct that you think may violate the nursing statutes and rules of the Board of Nursing?
- Understand
  - Somewhat understand
  - Somewhat do not understand
  - Do not understand
  - Was unaware this obligation exists

18. Does your state board have non-disciplinary remediation activities for nurses who have practice issues? (Exclude programs that address alcohol, drug or mental health problems).
- Yes
  - No
  - Don't know

19. What best reflects the Board's current role regarding regulatory policy?
- Almost all of the focus is on regulatory policy development
  - More focus on regulatory policy development than regulatory policy enforcement
  - An equal focus on regulatory policy development and regulatory policy enforcement
  - More focus on policy enforcement than regulatory policy development
  - Almost all of the focus is on regulatory policy enforcement

20. What best reflects the Board's ideal role regarding regulatory policy?
- Almost all of the focus should be on regulatory policy development
  - More focus on regulatory policy development than regulatory policy enforcement
  - An equal focus on regulatory policy development and regulatory policy enforcement
  - More focus on policy enforcement than regulatory policy development
  - Almost all of the focus should be on regulatory policy enforcement

21. For each of the following, please indicate whether you think the Board of Nursing's existing statutes and administrative rules/regulations provide too much, too little, or an adequate amount of regulation. (Please circle your response.)

	Too Much Regulation	Adequate Regulation	Too Little Regulation	Not Sure
a. Practice standards/scope of practice	1	2	3	4
b. Complaint resolution/discipline process	1	2	3	4
c. Education program approval/accreditation	1	2	3	4
d. Requirements for licensure/certification	1	2	3	4

Over ►

22. Are Board of Nursing statutes/rules accessible?

- Yes  No

23. Are Board of Nursing statutes/rules clear?

- Yes  No

24. In your opinion, what is the Board of Nursing's level of involvement in the following issues? (Please circle your response.)

	Too Much Regulation	Adequate Regulation	Too Little Regulation	Not Sure
a. Nursing supply and demand issues	1	2	3	4
b. Evolving scopes of practice	1	2	3	4
c. Legislative issues	1	2	3	4
d. Workplace issues	1	2	3	4

25. During the past 12 months did you make any inquiries of the Board staff in this state asking about practice issues?

- Yes  No *Skip to question 27*

26. What do you think is a reasonable number of business days for the Board staff to take to respond to a practice question?

\_\_\_\_\_ Business days

27. Have you been involved in any aspect of this state's Board of Nursing complaint handling/discipline process over the past 24 months (e.g., filed a complaint or provided a report to the Board, as a witness, an interviewee, were the focus of a complaint, etc)?

- No *Skip to question 33*  Yes

28. What do you think is a reasonable number of business days to take to resolve (take action, dismiss) any complaint?

\_\_\_\_\_ Business days

29. Overall, did the Board process resolve the complaint(s) in a timely manner?

- Yes  
 No  
 Don't know how long it took

30. Overall, how well or poorly was the Board of Nursing's disciplinary process communicated to you?

- Very well  
 Well  
 Poorly  
 Very Poorly

31. How well or poorly did the Board staff provide you with assistance you needed during the disciplinary process?

- Very well  
 Well  
 Poorly  
 Very Poorly

32. Overall, how effective or ineffective is the Board's disciplinary process in protecting the public?

- Very effective  
 Effective  
 Ineffective  
 Very ineffective

33. Overall, how well or poorly does the Board of Nursing fulfill its role in protecting the health and safety of the public?

- Very well  
 Well  
 Poorly  
 Very Poorly

34. What other suggestions do you have for improving the Board of Nursing's activities for the protection of the public?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Thank you for your assistance in completion of this survey instrument.*

If you have questions or comments about this survey, please contact Kevin Kenward, PhD, at 312.525.3634 or kkenward@ncsbn.org. Please return your completed questionnaire in the postage-paid envelope to: NCSBN, 111 E. Wacker Dr., Suite 2900, Chicago, IL 60601

# Appendix G

## FY09 Education Programs Survey



### National Council of State Boards of Nursing Survey of Education Programs

In order to assist Boards of Nursing measure their performance and improve their products and services we need your help! Please take a few minutes to answer the questions below. Your answers will help provide data to guide future development of evidenced-based regulation.

1. Please rate how effective or ineffective your Board of Nursing is in each of the following areas. (Please circle the correct response.)

	Effective	Somewhat Effective	Ineffective	Not Effective At All
a. Public protection/accountability	1	2	3	4
b. Promotion of quality in education	1	2	3	4
c. Responsiveness to health care changes	1	2	3	4
d. Responsiveness to innovation in education	1	2	3	4

2. Does the Board of Nursing review your Nursing Program?

- No *Go to question 6*
- Yes

3. Please rate how effective or ineffective your Board of Nursing is in the review process. (Please check the correct response.)

- Effective
- Somewhat effective
- Somewhat ineffective
- Not effective at all

4. Please rate how adequate or inadequate the Board of Nursing performance is with regard to each of the following areas related to the approval process. (Please circle the appropriate number.)

	Somewhat Adequate	Adequate	Somewhat Inadequate	Inadequate	Not Applicable
a. Interval between Board visits	1	2	3	4	5
b. Notification of Board visits	1	2	3	4	5
c. Communication with Board staff	1	2	3	4	5
d. Time spent on site during visit	1	2	3	4	5
e. Feedback/evaluation provided by Board	1	2	3	4	5
f. Timeliness of providing feedback	1	2	3	4	5
g. Comprehensiveness of feedback provided	1	2	3	4	5
h. Fairness/objectivity of Board findings	1	2	3	4	5
i. Time given to correct deficiencies	1	2	3	4	5
j. Fairness in monitoring compliance	1	2	3	4	5
k. Overall benefit of approval process	1	2	3	4	5
l. Due process for disagreements regarding findings and plan of corrections	1	2	3	4	5

**Over ►**

5. How essential or inessential is the Board of Nursing's involvement in approving distance education programs?

- Not essential
- Somewhat inessential
- Somewhat essential
- Very essential
- Not applicable

6. How helpful or unhelpful are board staff in addressing emerging issues?

- Very helpful
- Somewhat helpful
- Somewhat unhelpful
- Very unhelpful

7. How timely or untimely are board staff in addressing emerging issues?

- Very timely
- Somewhat timely
- Somewhat untimely
- Very untimely

8. Please rate the Board of Nursing's automated telephone system.

- Excellent
- Good
- Fair
- Poor
- Did not use
- The Board does not have an automated telephone system

9. Please rate the Board of Nursing's newsletter/magazine.

- Excellent
- Good
- Fair
- Poor
- Did not use
- The Board does not have an automated telephone system

10. Please rate the Board of Nursing's Web site.

- Excellent
- Good
- Fair
- Poor
- Did not use
- Board does not have a Web site

11. During the past 2 years, did you or any faculty members make any inquiries of the Board of Nursing regarding educational issues?

- No
- Yes

a) If you responded "yes", then how helpful or unhelpful was the response you received?

- Very helpful
- Somewhat helpful
- Somewhat unhelpful
- Very unhelpful

12. Overall, were the Board of Nursing's activities and resources helpful or unhelpful in familiarizing program directors with pertinent rules, regulations and policies?

- Very helpful
- Somewhat helpful
- Somewhat unhelpful
- Very unhelpful

13. During the past 2 years, has your nursing program received sanctions, faced closure, or been the subject of additional monitoring by the board of nursing?

- No *Go to question 18*
- Yes

a) If yes, please explain \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

14. Overall, how fair or unfair to all parties was the process used by the Board to investigate and resolve problems?

- Very fair
- Fair
- Unfair
- Very unfair

15. Overall, were the outcomes of the Board of Nursing's involvement appropriate or inappropriate?

- Appropriate
- Not appropriate
- Not certain
- Have no information on this

16. Overall, did the Board of Nursing act in a timely or untimely manner?

- Acted in a timely manner
- Acted in an untimely manner
- Not certain
- Have no information on this

17. Overall, how informed or uninformed did the Board of Nursing keep you?

- The Board kept us very well informed.
- The Board kept us well informed.
- The Board kept us minimally informed.
- The Board did not keep us informed at all.
- Other Web site

18. How helpful or unhelpful has the Board of Nursing staff been with any assistance you have needed?

- Staff have been consistently helpful.
- Has been occasionally helpful.
- Has been occasionally unhelpful.
- Has not been helpful at all.

19. For each of the following, please indicate whether you think the Board of Nursing's existing statutes and administrative rules/regulations provide too much, too little, or an adequate amount of regulation. (Please circle the appropriate response.)

	Too Much Regulation	Adequate Regulation	Too Little Regulation	Not Sure
a. Practice standards/scope of practice	1	2	3	4
b. Complaint resolution/discipline process	1	2	3	4
c. Education program approval/accreditation	1	2	3	4
d. Requirements for licensure/certification	1	2	3	4
e. Other (Specify):	1	2	3	4

\_\_\_\_\_

Over ►



**Appendix C**  
**FY09 CORE Data**  
**Texas Open-ended Comments**

*What other suggestions do you have for improving the Board of Nursing's activities for the protection of the public?*

**Comments from Nurses**

- No automated services.
- None-doing a good job.
- Send hard copy license!
- Keep on-line re-licensing.
- I think what's in place is fine.
- Please send renewal license card.
- Provide hard copy of current license
- Do not have specific recommendations.
- Cont. to check on Nurse/Patient Ratio.
- Give examples with BON guidelines & rules.
- Would like to see more educational offerings.
- No comment at this time. Thank you & God bless.
- There was no public hearing in my area to attend.
- I like that the BON provides C.E. seminars. Thanks.
- Overall satisfied with my current Board of Nursing.
- Keep providing paper mail outs. Get AWAY FROM ON-LINE!
- Start paper licensing renewal again. Stop the computer stuff.
- Continue your devoted work, you protect and guide us! Thank you!
- Retired RN's should not need 10 CEU's, 5 CEU's should be enough.
- Score nursing schools on more than simply NCLEX-RN passing rates.
- More manned telephone, less on hold & automated called & referrals.
- I don't have any suggestions. Thanks, though, for the opportunity to share!

- Need more background check before giving license. Too much drug abuse in nursing.
- Don't accredit UTA's "fast track" program - or just put RN licenses in Happy Meals.
- Proficiency and understanding of the English language (fluent - both verbal & written).
- The Texas state board is very easy to deal with-quick resolution to answered on website.
- Executive director of BNE needs to be elected by state nurses not appointed by governor.
- It takes too long to respond to complaints. There are nurses practicing that shouldn't be.
- Easier access to workshops/seminars. Have to travel too far. Maybe offer in more locations?
- To educate the public on the safety practices. Nurses are not their enemy, but their friend.
- Have more nurses on the board especially those currently working and using the new equipment.
- I think more training should be made available for nurses as far as policy, practice, laws etc.
- On site visibility. Come visit the hospitals, observe the staffing, practices. See for yourself!
- Might be nice if you made an effort to inform public that there are people doing things to protect them.
- Please continue workshops in various cities in Texas. I have attended several times. Very good information.
- Board needs to have a more public image-the public does not seem to know board exists and what role it has.
- No suggestion. Please accept my apologies for the delay in submitting my answers to this survey. Thank you.
- It would be helpful if the nurse practice act were in simpler terms as opposed to all the legal terms used.
- Very poor telephone answering systems. No call returning when calls made to inquire about particular issues.
- Filed a disciplinary action against fellow nurse and haven't heard anything about the case & its been 2 years.
- Include a diagram outlining filing a complaint to the board and how to utilize "Safe Harbor" in the BON newsletter.
- I like being kept informed through the Board's magazine and I know I can call the Board for any questions I may have.
- Have not had much interaction with our state BON, wish I had more input for you. I love to give my opinion! Keep up good work.
- Down with the resolution for money system! Increase mentor relationships for resolution time frame for/to review long drawn out.

- There are still a number of us "older" nurses who are not computer users, so don't eliminate paper license renewals or bulletins.
- In the event of an imposter or person posing as a nurse, I feel this information should be televised and brought to public attention.
- I do not feel that I can offer suggestions for improving the Board of Nursing's activities for protection of the public at this time.
- Mandate for entry level as a Registered Nurse to be a Bachelor's Degree/Science of Nursing (BSN) from an accredited school of nursing.
- -More accessible info & updated more frequently. -More info on "safe pt. load levels"/nurse to patient ratio & actually enforce the laws.
- Give us facts and means for ourselves-If we know ALL the PROPER ways to file complaints, we can be more effective in stopping inadequate nurses.
- 1972 graduate of Hermann Hospital school of nursing RN diploma program. 2009 graduate of UTMB/Galveston BSN Gerontological Nursing Certification.
- Make available classes related to new or changed practice issues. 2. Yearly review of laws reporting misconduct by a nurse, doctor or institution.
- For the nurses' protection & privacy I feel it is a huge violation to list disciplinary action in the newsletter. Talk about a failed "HIPPA" privacy act.
- Considering the numbers of LVN's in Texas I would suggest more focus on looking out for us and more mentoring and potential for career upgrades and certifications.
- I miss the wallet sign for nurse to put in purse. I have to carry a sheet of paper, which gets dirty at times. Please start sending wallet size RN cards for my purse.
- Web very difficult to get information from CA. Impossible to speak to a "human" on the telephone. Telephone can literally wait for hours. Very unfriendly organization.
- Where was the state board when the nurses in Killeen were on trial? ANA & TNA & individual nurses supported them-didn't see anything about the Texas State Board of nsg.
- Encourage/require educational programs to have more clinical hours prior to graduation. Encourage "residencies) or mentoring programs by hospital employers for new graduates.
- Patient to nurse ratios need to be mandated in every state. I live in TX. But I have worked in New York and Maryland. Also in Germany as a civilian. The military have the safest ratio.
- I think they are doing a great job. Much stricter than the last state I practiced in, (Indiana). They had no continuing education requirements, no back ground or fingerprinting checks.
- Stricter test questions for LVN's. I meet new LVN's who do not seem to have a clue. Stricter testing would lead to better schools & instructors. Although they are way to expensive now.

- More strict regulations for the fast track nursing schools. I do understand that there is a shortness of nurse's but the quantity should not be more important than the quality. (my opinion)
- Sometime back, an article in the newspaper reported a lot of practicing nurses with criminal records and history of drug related charges and they were not (apparently) known to the licensing board.
- Work with Texas hospitals in maintaining safe nurse/patient ratios. Require hospitals to abide by ratios consistently. Patient safety risks increase dramatically when safe ratios aren't maintained.
- Provide more continuing ed in my city. I am in a cardiology office, I really don't see the problems hospitals encounter, thank goodness. I do check nurses license online and always read the newsletter.
- Not-I currently am not working due to family member illness so I was unable to address some questions. Each time I have contacted the board over the years, I have found them to be informative & effective.
- Half way through RN school students should take LUN boards & practice as LUN through rest of school. They get more "bedside" clinical knowledge that is missing today in nursing along with very little "critical
- Photo ID on nursing license with a watermark on it, or special emblem that cannot be copied. Have had patients acquire other family members licenses in past years. Pictures would help stop a numerous amount of fraud.
- Should give an accused nurse to clear her name and have the individual that has accused the nurse come face to face during any decision. Often the nurse is innocent and a victim of malice, prejudice, and discrimination.
- Make sure every facility has an adequate preceptor/mentor. Nurses should not be thrown to the wolves because a facility is short staffed. All the schools in the world, can't replace actual practice and hands on experience.
- Too many nurses and little job. Nurses ratio to pt is very high, making it unsafe across the country. Pay is too little for the amount of education we receive, work load is too heavy. Easily get burnt out by this profession. Thanks.
- Have more seminars on Nurse Practice Act available on weekends. Many are held during the week when most nurses are working. Scatter the meeting around the state more. People will attend more if they don't have to travel far to attend.
- Again-I am a fan of hiring newly licensed nurses-however in the past 5 years I am amazed @ the number of them that do not understand or speak English well enough to understand simple direction. I believe it is bad enough to be mentioned!
- Has always been responsive to my inquiries & reporting. I suggest more frequent trainings by the board regarding peer review for each of the regions of Texas, at a minimum fee. New nurses are not adequately educated regarding the process.
- Get out of your ivory towers and mix it up in the real world. Most of you "civilians" are way out of touch with reality. Too much time in conferences and not enough time in real care. If it was someone you cared about, you would change your attitude.

- The BON keeps making it more difficult (and expensive) for RN's to get approved, CEU's, and the process to become a CEU approved provider is lengthy & convoluted. It is clear that the BON's function is to protect the public, but it would be beneficial to all if they didn't make it more & more difficult to comply with requirements. Nursing is a very primitive profession; and, the BON seems determined to keep it that way.
- Need more workshops on the practice laws & rules. Make copies more available. I am 57 yrs old-work full time, raising my grandchildren & have a father I need to check on. Time is issue. I don't get as much done on my days off as I use too. I need rest. Ha.
- I thought finger printing requirement was a great idea. Perhaps when a nurse begins work @ a new facility, it should be a requirement that the nurse provide the copy of their license within a 2 day period if they don't provide it during the 1st day of employment. In other words a 2 day limit only or they (he or she) are dismissed until he or she provides it.
- Increase the # of clinical hours required for NP education-NOT # of documents written, # of research studies performed or # of nursing philosophies discussed/generated. The Nurse Practitioner is a health care provider first-s/he must be capable of providing safe, comprehensive care in a rapidly moving clinical environment. IF this must be a PhD level program-please DO NOT allow the educators to create a program that provides minimal clinical exposure. I consider appropriate @ of hours a minimum of 2080 for the # of years of tuition you are demanding. Yes demanding. That is a lot of time & money for the same similar license a PA obtains with a masters/and a lot more clinical hours. You did ask.
- I am currently supervising a RN with a stipulation on her license. I understand the boards need to protect the public. However, they did not take action for over 2 years. During that 2 years the nurse functioned in my facility with above average performance. She also self monitored with drug tests that she provided to the board. After 2 years she now can not wk for me unless I am with her. The only RN being punished is me. I follow all her hours & must be here or in meetings in addition to her hours. Recently my other RN had a death in the family and I covered those hours also. The action taken by the board is 2 years too late. The RN has proven herself in that 2 years. Action should be taken in a timely manner. I can not take action 2 yrs after an event with an employee. That would not be acceptable.
- Sometimes I think the board may have too many issues to deal with timely to address an issue. I reported an impaired nurse and it has been over a year and I receive letters that “the investigation is still open”. On other issues I spoke to consultants and got immediate assistance regarding peer review, however, I think it is still a complicated process to some degree to fully understand. I was very pleased with the assistance & support I received.
- When a nurse referral is made to the BON, I would like to have the Board notify the filer that the referral was made and what the outcome of the referral was. I know results of allegations toward nurses are printed in the newsletter, but a more “personal” response would be appreciated.
- BON should be more involved in the product” nursing schools are turning out. Many of these “youngsters” are ethically challenged. Maybe, it is the state of our society, and what we are seeing is just a product of it. We will continue to see more bad outcomes if somehow this is not challenged, addressed, put under a microscope whatever it takes. As long, as BON requires that new graduates are only ones capable of teaching in nursing schools, universities, etc. we will see this continue.
- I had a nurse manager who called the board on the nurses she disliked, for any little reason, good nurses & she used that to terrorize all the nurses and a couple of nurses that I saw making bad mistakes (medicine errors) over and over, she let it go because they were friends. I was scared of saying something, so I left the job, not knowing what to do to protect my license & the patient. I left I work

somewhere else, after I complained several times to the manager about the medical errors done by these nurses, please also need information how to use safe harbor.

- When the list of nurses whose license has been suspended or revoked is presented in the newsletter and on the website, please consider listing the nurses former (most recent) place of employment. Several years ago another RN-from my state (Texas) who had almost an identical name as my own was listed, and it was quite embarrassing to have to explain to my employer and to the clinic where I volunteered that it was not me!
- More involvement in creating rules (and thus legislation) to limit practices that create unsafe environments for patients such as nurses working too many hours in a row, nurses taking unsafe assignments, nurses with inadequate education performing unsafe tasks (such as LVN's being allowed to administer IV push drugs simply by placing them on a pump for five or ten minutes). I think the Board "looks the other way" in many unsafe situations for the sake of hospital & agency profit.
- I believe all nurses should be sent updated on most recent standards of nursing practice. I received a copy when I graduated in 1996 from the University and have only received RN updates thereafter. The specific items you have referenced in this survey would be included (outlined) in those practice standards.
- I would like something done so nurses want to stay at a place of employment for longer periods. There is a large amount of turn arounds - jumping from one place to another. The longer one works at a place of employment, I believe the better, for the protection of the patient.
- To regulate new nursing graduates not to get out of bedside care before 5 years of experience. In other words a new RN must work at least 5 years at the bedside before applying to any type of graduate school such as nurse practitioner or similar. We hardly keep nurses more than 2 years then they leave to go to school for a specialty. Thanks.
- I would suggest a more timely resolution to complaints filed against a nurse. Don't make an RN wait two years. A really incompetent nurse would need to be removed from practice long before that! Please improve/regulate how a complaint is filed, by who/check on these things quicker. There's little faith in the BNE for protection/persecution when you know you did nothing wrong. Don't make us wait years for an answer!!!
- TX nurses are very fortunate to have such a progressive, fair BON. I have nothing, but positive interactions with them. They do not hesitate to take a such controversial issues such as simulation lab exp. & standardized "exit" exams (HESI). As a nurse educator, I appreciate their involvement.
- I believe the Board of Nursing has not protected the public by allowing hospitals to put money before good nursing care. I would not go to school to be a nurse today. PATIENTS deserve better care than they get these days. I would rather die @ home, than come to a hospital if I became ill. Emergency room care is awful & nurses have too many patients, too many long hours - and who suffers - THE PATIENTS."
- I think you should give LVN's that have 30 or more years, some type of recognition and a special license. I have trained new RN's-several times. I think the RN now use their RN against the LVN to do all the dirty work, that isn't fair. You have a number of nurses in the field, just for the money, not the caring of someone I started RN school. You need to stick with nursing questions part of body, not talk about some airplane use in the flight or fight. Stick to nursing. Passing the course is hard enough with confusing us with airplane & pizza."

- Allow more local control over disciplinary problems. I feel the rules are very intrusive when it comes to gaining a license or renewing one. (The finger printing is ridiculous). Hasn't seemed to stop anyone from posing as a nurse if they are willing to take the chance of getting caught.
- Make it easier to find nursing homes, skilled units, LTAC's & hospitals' RATINGS & SCORES as evaluated by the State, in order for family members to make more of an informed decision (more detailed than what is posted in these facilities) when needing placement for family members/loved ones. Need to be MORE STRICT when dealing with negligence, abuse, facility-acquired infections & treatment with follow-up. Also, falls, deculitus ulcers/pressure sores, weight loss, wounds with care & follow-up, UTI's reoccurrence, personal dignity/privacy issues not being adhered to...
- Only serious reports with credible “evidence” against a nurse should be followed up on. The TX BON “reacts” aggressively for any little matter and blows it up into more than it is at taxpayer expense. They have a very high numbers of Nurse Violations which should bring questions against them and the problem is more on the BON than an any violations against a nurse. The TX BON is a “problem” and hated by all LVN/RN's because we know they will cut our throats over the slightest matter. They are hated.

### **Comments from Employers**

- More oversight of actions of TPAPIN nurses.
- Nurses must be protected for malicious complaints.
- Training-especially supervisory training for nurses.
- Become more involved in nursing supply/demand issues.
- What about the protection of nurses from lying public!
- Reciprocity application submission. IV infusion should be a required practitioner.
- Work load for the nurses in the hosp. in the state of TX is still a major issue, that the board of nursing need TX to add
- Being able to implement responses to phone calls immediately or put a 24 hr on-call phone call person or nurses to respond to public & nurses' questions when necessary.
- Curriculum focus on clinical and academics likes books. There should be equal exposure on book knowledge & practical clinical-hands on experiences for the graduate nurse!

### **Comments from Education Programs**

- Keep up the good work!
- Feel BON has public in best interest.
- Excellent, dedicated, responsive staff!
- Kudos to the Texas BON!! Wonderful staff!!
- They are very cordial, helpful & respond quickly to e-mail messages.

- Improve newsletter. More web site education. Closer monitoring of CEU's & type of CEU's.
- Please change program director Lori Moseley, MSN, RN, RNE 112 Lamar Dr Hillsboro TX 76692
- More staff to handle background checks results - taking more than 30 days to get clearance.
- I think the TX BON does a great job & always are very responsive to my needs. Donna Rutledge R.N.
- Continued support of licensure for practice. Less restrictions on innovations in nursing education.
- I would suggest building in some sort of feedback system, whereby Directors of Schools could verify a student has, in fact, filed a necessary declaratory order.
- Always available when needed-answers questions in a timely manner. Appreciate the "road shows" the BON did last year-helped in understanding the changes & updates better.
- The BON should not allow EMT-P to sit boards with no formal nursing school. They go thru Excelsior & never do clinicals or skills. They pass the test and are a danger to our pts.
- The education consultants are the most hard working individuals focused on assisting/guiding directors/chairs to make best practice decisions. Kudos to the board they are outstanding.
- Our school participated in the conference call yesterday & I found that to be helpful in keeping us informed. I feel the board takes action on issues by creating "position statements" and I feel this to be beneficial for public protection.
- BON is very sensitive to changes occurring in nursing education. They seek and seriously consider pertinent information from the programs prior to implementing change. All members are very knowledgeable of issues affecting current educational practice.
- The Texas Board of Nursing does an outstanding job of protecting the citizens of Texas. The staff is very responsive to our needs. They are prompt when answering questions. They are very supportive when we face challenges from students. I have interacted with the BON as a nurse educator for more than 20 years. The people have changed, but the helpfulness and positive attitude has not.
- The Texas Board of Nursing exhibits & models the epitome of what a Board of Nursing should be. The TX BON follows a service model while meeting professional & legal obligations to the public & nursing. The TX BON uses published & commonly accepted, evidence based research findings & considers input from stakeholders in all matters. Through this model, the board is widely respected, and often consulted. Too many boards of nursing act as adversaries to nurses & nursing education."
- Since the board has undertaken FBI background checks for incoming students, it has become an issue. This summer, again, I had to deal with the problem of not receiving students background check results in time, during the peak application times. Later in the summer it went very smoothly but during the peak application time the board needs to assign more staff to this task, so that we receive our applicants' results in a timely manner. I do believe that doing an FBI background check prior to admission to the program is a great advantage to the nursing student as opposed to being turned down just before graduation but it needs to go faster so that we don't turn away applicants because their background check results are not ready. Thank you.
- The only issue I have is that the board's staff are not meeting my needs & my program needs regarding processing applicants background checks fast enough for me & applicants to know where we stand i.e.

whether applicants can get in the program or not. I do know that part of the problem this application period has been that the FBI did not respond fast enough. Never the less it put me & my applicants in a dilemma.

- "I wish they had ability to limit the number of new programs relative to the availability of clinical sites. Also, the Texas (governor) legislature keeps reducing their budget-they can't do their jobs properly. (They'd have enough funds if they could keep the licensure fee money!) The staff at the Texas BON is fantastic!! I feel very fortunate to be able to work so easily with them.
- The Texas Board of Nursing is completely service oriented. Processes and procedures are state of the art, clearly defined and are offered as advocates for nursing and public safety. Many other BON's seem adversarial, arbitrary, uninformed and almost anti-nursing. (I know this is strongly worded, but unfortunately, is accurate).
- There are too many programs applying for approval. The work for each educational consultant is unreasonable. Programs misrepresent themselves and the BON approves the new program. There should be a limit on the number of programs that can apply for approval each year, similar to the occupational therapy application for approval process. This would protect the public & help regulate what is coming into our state.