TEXAS BOARD OF NURSING

AGENCY STRATEGIC PLAN

Fiscal Years 2025-2029

Submission Date:
June 1, 2024

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Fiscal Years 2025-2029

by

TEXAS BOARD OF NURSING

Board Member	Dates of Term	Hometown
Kathleen Shipp, MSN, APRN, FNP (President)	2011-2029	Lubbock
Allison P Edwards, DrPH, MS, RN, CNE, CDDN, FAAN (Vice-President)	2015-2027	Bellaire
Kathy Boswell, MSN, RN	2023-2029	Mineral Wells
Daryl Chambers, BBA	2015-2027	Grand Prairie
Laura A. Disque, MSN, RN, CGRN	2019-2025	Edinburg
Carol Kay Hawkins-Garcia, BSN, RN	2019-2025	San Antonio
Mazie Mathews Jamison, BA, MA	2018-2029	Dallas
Kenneth D. “Ken” Johnson, BSN, RN	2021-2027	San Angelo
Kathy Leader-Horn, LVN	2009-2027	Granbury
Dru Riddle, PhD, APRN, CRNA	2023-2029	Fort Worth
Melissa Schat, LVN	2019-2025	Granbury
Rickey “Rick” Williams	2019-2025	Killeen
Kimberly “Kim” Wright, LVN	2018-2023	Corpus Christi

June 1, 2024

Signed: Kristin K. Benton, DNP, RN

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Kristin K. Benton, DNP, RN
Executive Director

Approved: Kathy Shipp

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Kathleen Shipp, MSN, RN, FNP
President

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Agency Mission and Philosophy

Agency Mission

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

Agency Philosophy

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

Core Values

- **Integrity:** At the Texas Board of Nursing, we value honesty in conducting our daily business. We strive to be fair in all of our deliberations and seek to inspire the trust and respect of the public we serve.
- **Respect:** We believe in acting in a respectful manner towards others including other employees, and dignifying others through our words and actions. We value a pleasant, non-hostile work environment.
- **Professionalism:** We believe in conforming to the technical and ethical standards of our profession and performing our work in a businesslike manner.
- **Accountability:** We believe in taking responsibility for our work, our decisions, our behavior and our actions. We are accountable for promoting our mission of public protection through safe nursing practice.
- **Excellence:** At the Texas Board of Nursing, we believe in striving for the highest level of performance and results.
- **Teamwork and Collaboration:** We believe in working with other people and teams to produce better outcomes. We support each other in carrying out individual and group work.

Agency Goals and Action Plan

BOARD OF NURSING OPERATIONAL GOAL AND ACTION PLAN

Goal A: **Protection of the Public and Enforcement of the Nursing Practice Act** – The Board of Nursing is responsible for swift, fair, and effective enforcement of the Nursing Practice Act (NPA) so consumers are protected from unsafe, incompetent and unethical nursing practice.

SPECIFIC ACTION ITEMS TO ACHIEVE YOUR GOAL

Currently, each of these action items is ongoing and being implemented:

1. The Board administers a system of enforcement and adjudication and responds to new regulatory challenges.
    a. Investigate "Operation Nightingale" cases to address those licensees who have been implicated as having obtained pre-licensure nursing education credentials from fraudulent nursing education programs named by the US Department of Health and Human Services Office of Inspector General in "Operation Nightingale".
    b. Issue licensure renewal denials to those licensees identified by federal government authorities as obtaining fraudulent nursing education credentials.
    c. Adjudicate contested licensure denials through an alternative dispute resolution process or formal hearing.
    d. Establish enhanced fraud detection processes for licensure applications from graduates of nursing education programs outside of Texas.
    e. Establish an education review process to determine substantial equivalence of nursing education programs outside of Texas.
    f. Adopt rules and establish a process for peer review of alleged standard of care violations by Advanced Practice Registered Nurses (done).
2. The Board identifies, refers, and assists those nurses whose practice is impaired by a substance use disorder or other mental health condition.
    a. Implement a process for re-evaluation of students immediately prior to licensure (done).
    b. Adopt rules to establish guidelines for participation in the Board's peer assistance program-based diagnosis and need by January 1, 2019 (done).
    c. Implement performance measures for evaluating the Texas Peer Assistance Program for Nurses by January 1, 2019 (done; see Strategy B.1.2).
3. The Board approves innovative alternative programs aimed at assessing competency and remediating unsafe nursing practice. Currently, this alternative practice remediation is offered to address only certain types of practice violations.
    a. Propose rule amendments to provide the ability for remedial education providers to pilot innovative, individualized remediation programs for practice violations at the level of reprimand by September 1, 2027.
4. The Board implements process changes to achieve earlier resolution of complaints.
    a. Increase the use of the alternative dispute resolution process (ongoing).
    b. Adopt a modern enforcement database that is interoperable with the Board's licensure database by September 1, 2027.
5. The Board implements regulatory actions to address the ongoing opioid crisis.
    a. Provide educational opportunities to licensees regarding the nurse's role in addressing the opioid crisis (ongoing).
    b. Adopt rules requiring licensees with prescriptive authority of controlled substances to utilize the statewide prescription drug monitoring program as set forth in statute by January 1, 2019 (done).
    c. Collaborate with the Texas State Board of Pharmacy and other state agencies in relation to the Prescriptive Drug Monitoring Program (ongoing).

DESCRIBE HOW YOUR GOAL OR ACTION ITEMS SUPPORTS EACH STATEWIDE OBJECTIVE

1. Accountable to tax and fee payers of Texas.

The Board demonstrates accountability to taxpayers responding to approximately 20,000 complaints annually. BON staff members, in response to complaints, investigate reported violations of the NPA, Board Rules and Regulations, and other laws relating to the safe practice of nursing. Following investigation by Enforcement staff, disciplinary recommendation(s) are offered to nurses in the form of agreed orders. Proposed licensure disciplinary action contested by nurses are brought before an administrative law judge (ALJ) for resolution.

Nurses determined to have impaired practice, either by a substance use disorder or other mental health condition, may be referred to the Texas Peer Assistance Program for Nurses (TPAPN) for treatment and monitoring. Nurses refusing to participate in TPAPN may be referred back to the Board for disciplinary proceedings.

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

Efficiency and transparency in achieving this goal is brought about through a consistent response to violations of the NPA, BON Rules and Regulations, or other laws pertaining to the safe practice of nursing. The Board utilizes a disciplinary action matrix when determining disciplinary action in response to investigatory findings. Utilization of the matrix eliminates inconsistency and guesswork concerning action in response to a complaint or criminal conviction. "Rap Back," where the Board receives and responds to criminal conviction information on nurses from the Texas Department of Public Safety ensures information pertaining to criminal conduct by nurses is received in a timely manner. A federal "Rap Back" process was implemented on 4/1/2018.

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

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

Efficiency Measures:

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

Explanatory Measures:

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

Output Measures:

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

4. Attentive to providing excellent customer service.

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

an online complaint portal, an accessible service to constituents who require assistance with the complaint process and disciplinary action reports.

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

DESCRIBE ANY OTHER CONSIDERATIONS RELEVANT TO YOUR GOAL OR ACTION ITEM

Action Item 1:

A. On January 25, 2023, the U.S. Department of Health and Human Services Office of Inspector General (HHSOIG) and law enforcement partners launched a multistate coordinated law enforcement action to apprehend individuals engaged in a scheme to sell false and fraudulent nursing degree diplomas and transcripts. The alleged scheme involved the selling of fake and fraudulent nursing degree diplomas and transcripts obtained from accredited Florida-based nursing schools to Registered Nurse (RN) and Licensed Practical/Vocational Nurse (LPN/VN) candidates. The individuals who acquired the fraudulent nursing credentials used them to qualify to sit for the national nursing exam. Upon successful completion of the exam, the nursing applicants became eligible to obtain licensure in various states to work as an RN or an LPN/VN.

   Upon being notified of "Operation Nightingale" and being provided the lists of schools and individuals involved in the federal investigation, Board staff began working with all appropriate nursing regulatory bodies, nursing education program providers, accreditation bodies, and authorities to detect, investigate and resolve these matters as quickly as possible. A webpage was created on the Board's website to share information on the schools involved in the scheme, press releases, nurses with formal charges, individuals with disciplinary action, and those denied licensure.

   As of March 2024, approximately 7,800 individuals involved with seven reported schools have been reviewed by Board staff to locate Texas nurses or applicants who received disputed education. Of those, 154 disciplinary cases are currently open to further investigate the nurses' educational qualifications, and 27 cases have been closed with action on the pertinent Texas license. HHSOIG has continued to inform the agency of completed investigations into additional schools requiring initiation of new investigations on Texas licensees. This has resulted in an ongoing increase in work within the agency, impacting the nursing education consultants, licensing, legal, and the investigations staff.

B. Senate Bill (SB)1343, enacted during the 2023 regular legislative session, amended the Nursing Practice Act as it relates to procedures applicable to complaints against advanced practice registered nurses. As a result of the passage of SB 1343, the Board was required to adopt rules no later than February 1, 2024, to appoint Advanced Practice Registered Nurses (APRNs) to review and assist with complaints and investigations related to alleged standard of care violations by APRNs. The APRN reviewer must practice within the same role and population focus and the report of the expert reviewer must be included with notice of informal proceedings. The Board approved proposed new rules related to standard of care violations by advanced practice registered nurses and report of the expert reviewer, on October 19, 2023. After publication in the Texas Register, comments were received and addressed with the new rules adopted at the January 25, 2024, quarterly Board meeting.

C. House Bill (HB) 4123, enacted during the 88th regular legislative session, in part, amended Sec. 411.125 of the Texas Government Code to clarify the Board's ability to obtain criminal history record information for applicants for, and holders of, vocational, registered, and advanced practice registered nurse licenses. The bill specifies that the Board can obtain this data for those accepted for enrollment in a nursing education program that prepares the person for licensure as a vocational, registered, or advanced practice registered nurse. The new statutory language elaborates the responsibility of the Board to maintain confidentiality of the criminal history records and explains applicable situations where disclosure is permitted.

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

During the 87th regular legislative session, HB 1434 created a new disciplinary cause of action for practitioners who conduct pelvic examinations on unconscious or anesthetized patients without proper informed consent, where the procedure is not within the standard scope of a scheduled procedure or diagnostic examination, where the examination is not necessary for the diagnosis or treatment of the patient's medical condition, or where the examination is not for the purpose of collecting evidence. As a result, the Board adopted amendments to 22 Texas Administrative Code §213.33, relating to Factors Considered for Imposition of Penalties/Sanctions and made consistent changes to the Board's Disciplinary Matrix.

Action Item 2:

A. The Texas Legislature passed HB 2950 during the 2017 regular legislative session, which amended Section 301.257 of the Occupations Code by adding new subsections (l) and (m). These new subsections require the Board to notify licensees that they may request a re-evaluation of their required participation in the Texas Peer Assistance Program for Nurses (TPAPN). The nurse may demonstrate ongoing sobriety and/or current fitness to practice by submitting a recent substance use disorder/chemical dependency evaluation, records of inpatient/outpatient treatment, support group attendance logs, random drug screen results, letters of recommendation, sponsor information, and/or letters from their treating physician, psychologist, and/or therapist indicating prognosis, recommendations for further treatment, and the nurse's ability to safely practice nursing.

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

Action Item 3:

In October 2013, the Board approved a two-year pilot program with the Texas A&M Rural and Community Health Institute (RCHI) and the College of Nursing (CON) to offer the Knowledge, Skills,

Training, Assessment and Research Nursing (KSTAR) Pilot Program as an option to nurses with practice violations that result in a disciplinary sanction of a warning and below. KSTAR is a comprehensive program that utilizes an individualized assessment of a nurse with practice breakdown issues and designs a personalized remedial education plan aimed at correcting any knowledge deficits that may exist. Based on successful outcomes, KSTAR Nursing was approved in 2017 as a permanent disciplinary option for nurses meeting eligibility criteria as set out in Board Rule 213.35. The concept of targeted assessment and individualized remediation of nursing practice errors has shown to be a promising alternative to conventional discipline and consistent with the just culture concept. As of March 2024, 324 nurses have successfully completed the KSTAR program.

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

During the COVID-19 disaster, Board Staff reviewed and approved proposals from remedial education providers to transition their courses to a virtual format. A total of 25 courses were approved to be offered virtually during the disaster. This innovation allowed nurses in need of practice remediation to avoid delays in completing disciplinary stipulations that have direct patient safety implications. The Board will continue to encourage and consider proposals for pilots aimed at providing individualized remediation. The Governor's waiver expired January 1, 2023, that allowed for virtual formats of the clinical components of the medication administration and physical assessment courses. The Texas nursing jurisprudence and ethics course, documentation course and the didactic portion of the medication administration and physical assessment courses are currently approved to be offered virtually. Clinical components of the physical assessment and medication administration courses are again required to be completed in direct patient care settings.

Action Item 4:

The Board engaged the dispute resolution option at the State Office of Administrative Hearings (SOAH) to resolve eligibility and disciplinary cases in a more efficient manner. The Board continues to find SOAH's mediation process works well toward meeting this goal. Because the Board is utilizing mediation to resolve more of its cases, it anticipates setting fewer cases for contested case hearings. The number of mediations has increased from 43 in FY2018 to 99 in FY2023, with a high of 171 mediations in FY2021. Additionally, Board staff has worked with SOAH to remove barriers to docketing cases in a timelier manner, and this has eased the Board's backlog of disciplinary cases needing resolution through the hearing process. Board staff is committed to exploring other options to encourage settlement of cases, including continuing its informal settlement conferences and meeting with individual parties when appropriate.

As part of its continual IT modernization efforts, the Board will be assessing its legacy systems as part of its forthcoming legislative appropriations request consistent with the technology initiatives identified in the Department of Information Resources (DIR) 2024-2028 State Strategic Plan for Information Resources Management.

Action Item 5:

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

The 86th Texas Legislature continued its efforts to combat the opioid crisis. HB 2174 established new requirements related to electronic prescribing of schedule II-controlled substances as well as requirements for waivers for electronic prescribing in certain situations. The Board participates in regular meetings of the interagency PMP work group that is hosted by the Texas State Board of Pharmacy. The bill limited prescriptions for controlled substances for the treatment of acute pain to a ten-day supply. Additionally, the bill required newly licensed prescribers to complete two hours of continuing education related to approved procedures for prescribing and monitoring controlled substances. Board Rules have been amended for this purpose.

BOARD OF NURSING OPERATIONAL GOAL AND ACTION PLAN

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

SPECIFIC ACTION ITEMS TO ACHIEVE YOUR GOAL

1. Ensure Minimum Licensure Standards for Applicants for Nurse Licensure: The action items accomplished by the Board are achievement of timely, cost-effective nurse licensure application processing, as well as operation of a reliable, accurate, and efficient licensure/credentialing system for all qualified nurse applicants. Currently, these action items are ongoing and being implemented.
2. Adopt rules to implement SB 422 related to relating to the authority of certain military service members to engage in a business or occupation in this state enacted during the 88th Regular Legislative Session, 2023 (done).
3. Leverage technology to increase licensure process efficiencies by 8/31/23 (done and ongoing).
4. Maintain active participation as a party state in the Nurse Licensure Compact (NLC) (ongoing).

DESCRIBE HOW YOUR GOAL OR ACTION ITEMS SUPPORTS EACH STATEWIDE OBJECTIVE

1. Accountable to tax and fee payers of Texas.

The Board demonstrates accountability to nurse licensure fee payers by adjustment of fees when fee changes are warranted, including reductions in nurse licensure and renewal fees. The Board reduced both the endorsement and examination fees by $25 on February 15, 2021, and February 14, 2022, respectively. No changes to licensure fees have been made since these decreases.

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

Waste of taxpayer dollars is minimized through utilization of strategies such as agency adoption of paperless operations wherever feasible. Implementation of the Optimal Regulatory Board System (ORBS) process on June 15, 2020, has reduced paper in the licensing process by 90%. Additional paper-reducing strategies have been implemented such as implementation of electronic faxing which will substantially reduce the costs associated with printing faxes.

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

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

4. Attentive to providing excellent customer service.

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

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

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

Efficiency Measures

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

Explanatory Measures

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

DESCRIBE ANY OTHER CONSIDERATIONS RELEVANT TO YOUR GOAL OR ACTION ITEM

Action Item 1:

The Board reduced both the endorsement and examination fees by $25 on February 15, 2021, and February 14, 2022, respectively. No changes to licensure fees have been made since these decreases. The Board will continue to strive to keep nurse licensure fees reasonable. Texas continues to experience a substantial increase in the number of APRN and RN licenses, while the number of LVN licenses has been decreasing slightly since 2020. The number of applications from internationally educated applicants continues to increase significantly. While the international applications add complexity to the licensing process, Board staff will continue to optimize the efficiencies of the online licensure system that was launched in June 2020.

Action Item 2:

Senate Bill (SB) 422 related to relating to the authority of certain military service members to engage in a business or occupation in this state was enacted during the 88th Regular Legislative Session, 2023. The Board adopted rules to implement these changes at the January 2024 quarterly Board meeting.

Action Items 3 & 4:

House Bill (HB) 2950 was enacted by the 85th Texas Legislature and became effective on September 1, 2017, allowing the Board to enact the Enhanced Nurse Licensure Compact (eNLC). The Compact currently includes 39 states and two jurisdictions. Texas was a member of the original Compact, which was enacted in 2000 and was codified as Texas Occupations Code Chapter 304. The most recently enacted eNLC replaced the original Nurse License Compact. The eNLC, now referred to again as the NLC, allows RNs and LVNs to utilize one multi-state license issued by the home state to practice in other states belonging to the compact, without the necessity of obtaining or maintaining separate licenses in each compact state.

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

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

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

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

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

Licensing system modernization and participation with NURSYS allows the Board to implement both objectives above. The Texas BON has experienced a reduction in the number of licensees by endorsement with the increase in the number of states joining the NLC, but it has not had a significant effect on agency revenue.

BOARD OF NURSING OPERATIONAL GOAL AND ACTION PLAN

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

SPECIFIC ACTION ITEMS TO ACHIEVE YOUR GOAL

1. The Board approves all pre-licensure Texas nursing education programs by ensuring the inclusion of the essential competencies of graduates in the educational curricula and ongoing compliance with all Board rules, including maintaining the required NCLEX pass rates (ongoing).
2. The Board collaborates with the Texas Higher Education Coordinating Board, the Texas Workforce Commission, and the Texas Education Agency to address nursing education program approval processes to prevent/reduce redundant processes by January 1, 2024 (done and ongoing).
3. The Board will adopt rules to implement SB 1429 relating to the use of standardized examinations enacted by the 88th Regular Legislative Session, 2023 (done).

DESCRIBE HOW YOUR GOAL OR ACTION ITEMS SUPPORTS EACH STATEWIDE OBJECTIVE

1. Accountable to tax and fee payers of Texas.

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

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

Waste of taxpayer dollars is minimized through added program requirements and/or board action, including program closure, for educational programs not meeting standards for passing the national examination for nurses known as the NCLEX examination. Additionally, Board staff has continued the practice initiated during the pandemic to conduct virtual education program survey visits for programs that are in full compliance with Board rules. This practice saves the costs associated with travel to in-person survey visits.

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

Effectiveness is demonstrated through Texas education program pass rates for the NCLEX examination. Texas pass rates for programs leading to licensure as LVNs and RNs exceed the national standards for the NCLEX-RN and NCLEX-PN exam for 2023.

4. Attentive to providing excellent customer service.

The Board's commitment to customer service includes conducting orientations for new deans and directors of nursing educational programs, on-site and virtual visits to programs to offer guidance for program improvement, and communication of Board Policy/Rules/updates through attendance at events for nursing educators and publication of a digital education newsletter at least biannually. The education team strives to be readily available to advise programs when needed.

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

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

Output Measures:

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

DESCRIBE ANY OTHER CONSIDERATIONS RELEVANT TO YOUR GOAL OR ACTION ITEM

Action Item 1:

Since 2006, the Board of Nursing has approved 106 new nursing education programs. Approximately 24% (25) of these programs have since closed due to an inability to achieve and/or maintain a licensing examination (NCLEX-RN or NCLEX-PN) pass rate at or above the required benchmark of 80% for first time test takers, an inability to comply with other rule requirements, or in one instance, a decision not to enroll

following initial approval. While the overall NCLEX-RN and NCLEX-PN pass rate averages for all Texas programs are consistently above the 80% benchmark and above the national averages, nine of the currently active programs approved since 2006 have an NCLEX pass rate below the required 80% benchmark. These findings have led Board Staff to review and make improvements to the new program proposal requirements and process, to carefully assess information provided in program self-study reports and gathered during site visits, and to identify risk factors for program success early on so that requirements and monitoring are implemented to address those risk factors.

NCLEX pass rates for all vocational and professional programs for 2023 with the inclusion of new nursing clinical judgment questions were well above the national averages. Board staff have followed program progress to ensure clinical rotations have resumed since pandemic disruptions and that programs with an NCLEX pass rate below 80% have conducted self-studies to identify additional improvement measures to prepare graduates for entry level, safe nursing practice. As new regulatory issues relevant to nursing education emerge, Board staff will seek input from education stakeholders such as the advisory committee on education.

Action Item 2:

Board staff meets regularly with staff of the other agencies who have a role in approving nursing education programs. Annually the group shares any updates to their approval processes to identify any duplicative requirements that need addressing to ensure the applicants for program approval are provided with an efficient and fair approval process.

Senate Bill 2118, passed during the 85th regular legislative session authorized the Texas Higher Education Coordinating Board (THECB) to approve certain public junior colleges to offer baccalaureate degrees in specified fields of study, including nursing. The new law requires that nursing baccalaureate program proposals meet all Board of Nursing requirements, regardless of whether the program is a pre or post licensure baccalaureate degree program. Board and THECB Staff have implemented a coordinated proposal application process that avoids duplication yet assures the required input of the Board's expertise specific to nursing education. By the end of FY 2023, a total of 16 public junior colleges have been approved to offer baccalaureate degrees in nursing. Board Staff will continue to work collaboratively with THECB to ensure a coordinated approval process.

Action Item 3:

Senate Bill 1429 passed during the 88th regular legislative session, required the Board to adopt rules prohibiting the use of standardized examinations prepared by private entities as a graduation requirement for students enrolled in professional nursing education programs or vocational nursing education programs in Texas, or to deny those students an affidavit of graduation. Proposed rules were adopted in January 2024. The rules provide that a student's score on a standardized examination prepared by a private entity is not counted for more than 10 percent of a course grade in any course provided by a professional nursing education program or vocational nursing education program in this state. The rules must also prohibit a student enrolled in a professional nursing education program or vocational nursing education program who is identified as a student in need of academic remediation based on the student's score on a standardized examination, from being required by the program to attend a course offered by the private entity providing that standardized examination. Additionally, the Board rules authorize the use of standardized examinations prepared by a private entity to: (1) familiarize students with computerized testing; (2) assess students for purposes of admission or evaluate students for purposes of remediation; and (3) to assess the effectiveness of a professional education program or vocational nursing education program based on information obtained through the administration of the standardized examination. Board staff will continue

to monitor compliance with the new rules and for any unintended effects. To date, no negative effects on NCLEX pass rates have been observed. Conversely, the 2023 NCLEX pass rates for both professional and vocational nursing education programs in Texas have increased following these statutory and rule changes.

Redundancies and Impediments

Service, (Statute, Rule or Regulation Provide specific citation if possible)	Describe why the Service, Statute, Rule or Regulation is Resulting in Inefficient or Ineffective Agency Operations	Provide Agency Recommendation for Modification or Elimination	Describe the Estimated Cost Savings or Other Benefit Associated with Recommended Change
Texas Occupations Code §301.1581	This section requires the biennial dissemination of information to nursing licensees on prescribing and dispensing pain medications, with particular emphasis on Schedule II and Schedule III controlled substances; abusive and addictive behavior of certain persons who use prescription pain medications; common diversion strategies employed by certain persons who use prescription pain medications, including fraudulent prescription patterns; and the appropriate use of pain medications and the differences between addiction, pseudo-addiction, tolerance, and physical dependence. This information could be provided by other sources that may be able to provide more accurate and tailored information, such as the Texas Pharmacy Board or the Texas Medical Board. Further, some of the required information may not be relevant to nurses (such as dispensing information).	Elimination	
Texas Occupations Code §301.1582	This section requires the dissemination to nursing	Elimination	

	licensees of information relating to the services provided by poison control centers. This information could be provided by other sources, such as poison control centers, and would likely be more accurate and tailored if provided by another source.		
Texas Occupations Code §301.466/Texas Government Code Chapter 552	Requestors routinely seek documents from the Board's investigative file(s) and related materials, including complaints, under the Public Information Act. Although this information is confidential, the Board is still required to submit a request for an opinion from the Attorney General's Office when this information is requested through an open records request (no prior determination has been issued by the Attorney General's Office for this category of information).	Statutory exemption in Chapter 552 or §301.466 that makes clear that the Board does not have to seek an opinion from the Attorney General's Office when an open records request seeks documents from the Board's investigative file(s) or related material, including a copy of the complaint.	In 2023, the Board received 1,862 open records requests. The Board filed 47 requests for opinions with the Attorney General's Office. 37 of these 47 requests for opinions, or 78.7%, involved requests for Board investigatory material and/or complaints.
Texas Occupations Code §301.459(a-1)	This section provides that subsequent to a contested case proceeding before the State Office of Administrative Hearings, the Board must accept the Administrative Law Judge's (ALJ) findings of fact and conclusions of law without modification. This section allows the ALJ to adopt conclusions of law or ultimate findings which may be contrary to compliance with the Board's statutory standards which are	Elimination	Elimination of Texas Occupations Code §301.459(a-1) would allow the Board to retain, inherent with its enabling legislation, the statutory authority to modify those ultimate findings made by the ALJ that do not properly interpret or apply the applicable agency law, rules and policies. It would also allow the Board to modify any technical error in a finding.

	properly committed to the discretion of the agency. This provision allows for the substitution of the ALJ's individual lay opinion to replace or ignore unrefuted subject matter expert opinion and/or the minimum standards adopted by the Board pursuant to its statutory mandate. The section's provision allowing recourse for the Board to appeal any error pursuant to 2001.058(d)(5) appears procedurally unfeasible or unworkable.		

Information Resources Planning

The Texas Department of Information Resources (DIR) is the state's information technology and telecommunications agency coordinating, planning, and delivering technology in the following areas: IT planning and guidance, shared technology services (data center services, managed security services, Texas.gov, Texas Open Data Portal), cooperative IT contracts, communications technology services, cybersecurity, data management and data center. In line with DIR's technology services and initiatives, the board assesses its IT effectiveness and continual system modernization in accordance with the 2024-2028 State Strategic Plan for Information Resources Management. DIR has identified the following top ten Technology Initiatives for the next five years: 1. Cybersecurity, 2. Data Governance, 3. Cloud Strategy, 4. Accelerated Legacy Modernization, 5. Identity and Access Management, 6. Continuity of Operations, 7. IT Planning and Governance, 8. AI and Emerging Tech Governance, 9. IT Workforce Development and 10. Digital Transformation.

The Board's IT department follows the framework and standards established by DIR for its information technology services, planning, policies and practices, procurement, and funding requests. Notable and central in this effort, the board biennially completes the Information Resources Deployment Review (IRDR) which is comprised of the following four parts: Part 1. Agency Environment, Part 2. Compliance with State Standards, Part 3. Alignment with State Technology Goals and Part 4. IT Inventory. This self-assessment tool identifies an agency's strengths and weaknesses and examines how each information resources deployment has supported the agency's mission, goals, and objectives. For those items in need of remediation, board IT staff submit an Information Resources Corrective Action Plan (IR-CAP) and further consult with DIR to achieve compliance. With regard to cybersecurity, the following five planning components are completed and reported to DIR: 1. Information Security Plan, 2. Information Security Assessment, 3. Network and Web application Vulnerability Report, 4. Executive Acknowledgment of Risk and 5. Data Security Plan for Online and Mobile Applications. With regard to infrastructure services, the board takes an initiative on technology refreshments on both hardware and software, distributed information technology infrastructure models and business continuity/disaster recovery and paperless model.

These efforts are led by the board's Information Resources Manager (IRM) and supported by additional staff in the following positions: Systems Administrator, Systems Analyst, Programmer, Database Administrator and Network Specialist. IT procurement is facilitated through the board's accounting and legal departments by staff who are trained and certified in contracting and purchasing. Furthermore, in accordance with Texas Occupations Code Chapter 101, the board is a member of the Texas Health Professions Council (HPC). HPC provides sharing of member agency IT knowledge, resources and training to stay at the forefront of technological advancements and DIR requirements. The board and HPC member agencies are co-located in the George HW Bush State Office Building.
Board executive management are kept informed by the IRM of technology progress/needs/challenges of all agency business areas in alignment with the framework set forth by DIR and will pursue necessary resources during the legislative appropriations request process for identified solutions.

Contract Manager Training

The Comptroller of Public Accounts' Statewide Procurement Division (SPD) administers a training, continuing education, and certification program for Texas public procurement professionals. The term "public procurement professional" refers to any agency employee that conducts purchasing, contract development, or contract management activities (*State of Texas Procurement and Contract Management Guide* Version 3.0, page 3). Contract management is defined in the Guide as: "actions taken following contract execution, including the assessment of risk, verification of contractor performance, monitoring compliance with deliverable and reporting requirements, enforcement of contract terms, monitoring and reporting of vendor performance, and ensuring that contract performance and practices are consistent with applicable rules, laws and the State of Texas Procurement and Contract Management Guide." All public procurement professionals must receive training and continuing education to the extent required by SPD. An agency employee who is required to receive the training may not participate in purchases by the employing agency unless the employee has received the required training.

The SPD offers certification for Certified Texas Contract Developers and Certified Texas Contract Managers. Certified Texas Contract Developers and Managers working in Texas state government must attend mandatory courses and pass an exam to become certified. SPD also provides continuing education required for public procurement professionals to maintain certification. A licensed attorney employed by an agency performing procurement or contract management functions, however, is not required to be certified as a Certified Texas Contract Developer or Certified Texas Contract Manager as specified in 34 Tex. Admin. Code § 20.133(c)(5).

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

Supplemental Schedules

Schedules A-I

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

The Board of Nursing, in conjunction with the Legislative Budget Board and the Governor's Office of Budget and Planning, has identified the following goals for the 2024/2025 biennium. This section is organized with the objectives, strategies, and outcome, output, efficiency, and explanatory measures aligned with each goal.

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

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

Outcome Measures:

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

Strategy A.1.1: Licensing - Operate Efficient System of Nursing Licensure, Examination and Credential Verification.

Output Measures:

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

Efficiency Measures:

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

Explanatory Measures:

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

Strategy A.1.2: Texas.Gov – Texas.Gov Estimated and Nontransferable

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

Outcome Measures:
- **Percentage of Nursing Programs in Compliance with Rules (RN)**
- **Percentage of Nursing Programs in Compliance with Rules (LVN)**

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

Output Measures:
- **Total Number of Programs Approved (RN)**
- **Total Number of Programs Approved (LVN)**
- **Total Number of Programs Surveyed (LVN)**
- **Total Number of Programs Sanctioned (LVN)**
- **Total Number of Programs Surveyed (RN)**
- **Total Number of Programs Sanctioned (RN)**

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

Objective B.1: Investigate and Resolve Complaints - Investigate and resolve complaints about violations of the Nursing Practice Act - Continue to guarantee that 100 percent of written complaints received annually regarding Nursing practice or non-compliance with the Board of Nursing's rules are investigated and resolved in accordance with the NPA and APTRA or are appropriately referred to other regulatory agencies.

Outcome Measures:
- **Percent of Complaints Resolved Resulting in Discipline (RN)**
- **Recidivism Rate for those Disciplined (RN)**
- **Percent of Complaints Resolved in Six Months (RN)**
- **Percent of Complaints Resolved Resulting in Discipline (LVN)**
- **Recidivism Rate for those Disciplined (LVN)**
- **Percent of Complaints Resolved in Six Months (LVN)**
- **Percent of Complaints Resolved Resulting in Discipline (APRN)**

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

Output Measures:
- **Number of Complaints Resolved (RN)**
- **Number of Complaints Resolved (LVN)**
- **Number of Complaints Resolved (APRN)**

Efficiency Measures:
- **Average Time for Complaint Resolution (RN)**
- **Average Time for Complaint Resolution (LVN)**
- **Average Time for Complaint Resolution (APRN)**

Explanatory Measures:
Number of Jurisdictional Complaints Received (RN)
Number of Jurisdictional Complaints Received (LVN)
Number of Jurisdictional Complaints Received (APRN)

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

Outcome Measures:
Recidivism Rate for RNs Enrolled in TPAPN
One Year Completion Rate for RNs Enrolled in TPAPN
Recidivism Rate for LVNs Enrolled in TPAPN
One Year Completion Rate for LVNs Enrolled in TPAPN

Output Measures:
Number of Licensed Individuals Participating in a Peer Assistance Program (RN)
Number of Licensed Individuals Participating in a Peer Assistance Program (LVN)
Number of Licensed Individuals Participating in a Peer Assistance Program (APRN)

Goal C: Indirect Administration

Objective C.1: Indirect Administration

Strategy C.1.1: Indirect Administration for Licensing Programs.

Strategy C.1.2: Indirect Administration for Enforcement and Adjudication Programs.

Goal D: Salary Adjustments

Objective D.1: Salary Adjustments

Strategy D.1.1: Salary Adjustments

Goal E: Regulatory Response - Provides additional resources for the regulation of licensed vocational nurses, registered nurses, and advanced practice nurses if given approval by the LBB and the Office of the Governor.

Objective E.1: Regulatory Response

Strategy E.1.1: Regulatory Response

Schedule B. Measure Definitions

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

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

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

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

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

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

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

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

Data Limitations
None

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Data Source
Agency software program captures the number of total licensed advanced practice registered nurses and the number of disciplined advance practice registered nurses. Our Information Systems Department compiles the statistics by which the Operations Director

compiles the final percentage and reports the information on a quarterly basis to the Board and the appropriate State oversight agencies. The Operations Director is responsible for this data.

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

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

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

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

Data Limitations
None

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Data Limitations
Integrity of outside information.

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Data Limitations
None

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Data Limitations
None
Data Source
The agency discipline software captures the initial date of the LVN complaint and calculates the number of days that elapse between date of entry to the date of resolution. The Director of Enforcement is responsible for this data.

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Goal No. 1 Accredit, Examine, and License Nurse Education & Practice
Objective No. 1 Ensure Minimum Licensure Standards for Applicants
Strategy No. 1 Operate Efficient System of Nursing Credential Verification
Measure Type EF
Measure No. 1 Percentage of New Individual Licenses Issued within Ten Days (RN)

Definition
The percentage of initial RN license applications that were processed during the reporting period within 10 business days measured from the time in days elapsed from receipt of the completed application until the date the license is mailed.

Data Limitations
None.

Data Source
Agency licensing software program calculates the number of days that lapse between receiving the results of the RN examination to issuing a license. Furthermore, the agency software program also calculates the days that elapse between receiving the final verification from other jurisdictions to issuing the license by endorsement. The Operations Director is responsible for this data.

Methodology
This information is tabulated as the RN examination results and final RN endorsement verification is received in our office. Once each RN application has been verified for licensure, the Data Processing Department enters the date stamp of receipt of examination results and final endorsement verification and the date of printing the license. The number of initial RN licenses which were mailed in 10 calendar days or less from the date of receiving the exam results or final endorsement verification divided by the total number of RN licenses mailed during the reporting period. The resulting number is multiplied by 100 to convert to a percent.

Purpose
This measure is intended to show how cost-effectively the agency processes new and renewal license applications for RNs.

Goal No. 1 Accredit, Examine, and License Nurse Education & Practice
Objective No. 1 Ensure Minimum Licensure Standards for Applicants
Strategy No. 1 Operate Efficient System of Nursing Credential Verification
Measure Type EF
Measure No. 2 Percentage of Individual License Renewals within Seven Days (RN)

Definition
The percentage of RN license renewal applications that were processed during the reporting period within 7 business days of receipt, measured from the time lapsed from receipt of the RN renewal application until the date the renewal license is mailed.

Data Limitations
None.

Data Source
Agency licensing software tracks the data and number of RN renewals being received in the office through the date of RN license being printed and mailed. The Operations Director is responsible for this data.

Methodology
The agency licensing software calculates the number of RN renewals processed in the reporting period and the business days that have lapsed from receipt of the renewal in the office to the date of printing and mailing. The total number of RN renewed licenses that meet the criterion is then divided by the total number of RN renewals mailed during the reporting period. This number is then multiplied by 100 and expressed as a percentage.

Purpose
This measures the ability of the agency to process RN renewal applications in a timely manner and its responsiveness to a primary constituent group.

Goal No. 1 Accredit, Examine, and License Nurse Education & Practice
Objective No. 1 Ensure Minimum Licensure Standards for Applicants
Strategy No. 1 Operate Efficient System of Nursing Credential Verification
Measure Type EF
Measure No. 3 Percentage of New Individual Licenses Issued within Ten Days (LVN)

Definition
The percentage of initial LVN license applications that were processed during the reporting period within 10 business days measured from the time in days elapsed from receipt of the completed application until the date the LVN license is mailed.

Data Limitations
None.

Data Source
Agency licensing software program calculates the number of days that lapse between receiving the results of the LVN examination to issuing a license. Furthermore, the agency software program also calculates the days that elapse between receiving the final verification from other jurisdictions to issuing the LVN license by endorsement. The Operations Director is responsible for this data.

Methodology
This information is tabulated as the LVN examination results and final LVN endorsement verification is received in our office. Once each LVN application has been verified for licensure, the Data Processing Department enters the date stamp of receipt of examination results and final endorsement verification and the date of printing the LVN license. The number of initial LVN licenses which were mailed in 10 calendar days or less from the date of receiving the exam results or final endorsement verification divided by the total number of licenses mailed during the reporting period. The resulting number is multiplied by 100 to convert to a percentage.

Purpose
This measures the ability of the agency to process LVN applications by examination and endorsement in a timely manner and its responsiveness to a primary constituent group.

Goal No. 1 Accredit, Examine, and License Nurse Education & Practice
Objective No. 1 Ensure Minimum Licensure Standards for Applicants
Strategy No. 1 Operate Efficient System of Nursing Credential Verification
Measure Type EF
Measure No. 4 Percentage of Individual License Renewals within Seven Days (LVN)

Definition
The percentage of LVN license renewal applications that were processed during the reporting period within 7 business days of receipt, measured from the time lapsed from receipt of the renewal application until the date the renewal LVN license is mailed.

Data Limitations
None.

Data Source
Agency licensing software tracks the date and number of LVN renewals being received in the office through the date of LVN license being printed and mailed. The Operations Director is responsible for this data.

Methodology
The agency licensing software calculates the number of LVN renewals processed in the reporting period and the business days that have lapsed from receipt of the renewal in the office to the date of printing and mailing. The total number of renewed LVN licenses that meet the criterion is then divided by the total number of renewals mailed during the reporting period. This number is then multiplied by 100 and expressed as a percentage.

Purpose
This measures the ability of the agency to process renewal applications in a timely manner and its responsiveness to a primary constituent group.

Goal No. 1 Accredit, Examine, and License Nurse Education & Practice
Objective No. 1 Ensure Minimum Licensure Standards for Applicants
Strategy No. 1 Operate Efficient System of Nursing Credential Verification
Measure Type EX
Measure No. 1 Total Number of Individuals Licensed (RN)

Definition
Total number of RNs licensed at the end of the reporting period.

Data Limitations
This is explanatory and is a workload measure. The agency has little control over this measure.

Data Source
Agency licensing software program tabulates the total number of RNs licensed on the final day of each reporting period. The Operations Director is responsible for this data.

Methodology
The total includes unduplicated number of RNs licensed that is stored in the licensing database by the agency at the end of the reporting period. This number only includes those RNs who hold an active or current license.

Purpose
This measure shows the total number of individual RN licenses currently issued which indicates the size of one of the agency's primary constituencies.

Goal No. 1 Accredit, Examine, and License Nurse Education & Practice
Objective No. 1 Ensure Minimum Licensure Standards for Applicants
Strategy No. 1 Operate Efficient System of Nursing Credential Verification
Measure Type EX
Measure No. 2 Total Number of Individuals Licensed (LVN)

Definition
Total number of LVNs licensed at the end of the reporting period.

Data Limitations
This is explanatory and is a workload measure. The agency has little control over this measure.

Data Source
Agency licensing software program tabulates the total number of LVNs licensed on the final day of each reporting period. The Operations Director is responsible for this data.

Methodology
The total includes unduplicated number of LVNs licensed that is stored in the licensing database by the agency at the end of the reporting period. This number only includes those LVNs who hold an active or current license.

Purpose
This measure shows the total number of individual LVN licenses currently issued which indicates the size of one of the agency's primary constituencies.

Goal No. 1 Accredit, Examine, and License Nurse Education & Practice
Objective No. 1 Ensure Minimum Licensure Standards for Applicants
Strategy No. 1 Operate Efficient System of Nursing Credential Verification
Measure Type OP
Measure No. 1 Number of New Licenses Issued to Individuals (RN)

Definition
The number of RN licenses issued to previously unlicensed individuals by examination and endorsement during the reporting period.

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

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

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

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

Goal No. 1 Accredit, Examine, and License Nurse Education & Practice
Objective No. 1 Ensure Minimum Licensure Standards for Applicants
Strategy No. 1 Operate Efficient System of Nursing Credential Verification
Measure Type OP
Measure No. 2 Number of Individual Licenses Renewed (RN)

Definition
The number of licensed RNs who held licenses previously and renewed their license during the current reporting period.

Data Limitations
This information is explanatory and provides a workload measure. The agency has limited control over this measure.

Data Source
Agency computer software program captures the number of RN licenses issued by renewal during the reporting period. The Operations Director is responsible for this data.

Methodology
The measure is calculated by querying the agency licensing database to produce the total number of RN licenses issued to previously RN licensed individuals during the reporting period.

Purpose
Licensure renewal is intended to ensure that persons who want to continue to practice registered nursing satisfy current minimum legal standards established by statute and rule for professional education and practice. This measure is intended to show the number of licenses that were renewed during the reporting period.

Goal No. 1 Accredit, Examine, and License Nurse Education & Practice
Objective No. 1 Ensure Minimum Licensure Standards for Applicants
Strategy No. 1 Operate Efficient System of Nursing Credential Verification
Measure Type OP
Measure No. 3 Number of New Licenses Issued to Individuals (LVN)

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

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

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

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

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

Goal No. 1 Accredit, Examine, and License Nurse Education & Practice
Objective No. 1 Ensure Minimum Licensure Standards for Applicants
Strategy No. 1 Operate Efficient System of Nursing Credential Verification
Measure Type OP
Measure No. 4 Number of Individual Licenses Renewed (LVN)

Definition
The number of licensed LVNs who held licenses previously and renewed their license during the current reporting period.

Data Limitations
This information is explanatory and provides a workload measure. The agency has limited control over this measure.

Data Source
Agency computer software program captures the number of LVN licenses issued by renewal during the reporting period. The Operations Director is responsible for this data.

Methodology
The measure is calculated by querying the agency licensing database to produce the total number of LVN licenses issued to previously licensed LVNs during the reporting period.

Purpose
Licensure renewal is intended to ensure that persons who want to continue to practice registered nursing satisfy current minimum legal standards established by statute and rule for vocational education and practice. This measure is intended to show the number of LVN licenses that were renewed during the reporting period.

Goal No. 1 Accredit, Examine, and License Nurse Education & Practice
Objective No. 1 Ensure Minimum Licensure Standards for Applicants
Strategy No. 1 Operate Efficient System of Nursing Credential Verification
Measure Type OP
Measure No. 5 Number of New Licenses Issued to Individuals (APRN)

Definition
The number of APRN licenses issued to previously unlicensed individuals during the reporting period.

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

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

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

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

Goal No. 1 Accredit, Examine, and License Nurse Education & Practice
Objective No. 1 Ensure Minimum Licensure Standards for Applicants
Strategy No. 1 Operate Efficient System of Nursing Credential Verification
Measure Type OP
Measure No. 6 Number of Individual Licenses Renewed (APRN)

Definition
The number of licensed APRNs who held licenses previously and renewed their license during the current reporting period.

Data Limitations
This information is explanatory and provides a workload measure. The agency has limited control over this measure.

Data Source
Agency computer software program captures the number of APRN licenses issued by renewal during the reporting period. The Operations Director is responsible for this data.

Methodology
The measure is calculated by querying the agency licensing database to produce the total number of APRN licenses issued to previously APRN licensed individuals during the reporting period.

Purpose
Licensure renewal is intended to ensure that persons who want to continue to practice as advanced practice registered nurses satisfy current minimum legal standards established by statute and rule for professional education and practice. This measure is intended to show the number of licenses that were renewed during the reporting period.

Goal No. 1 Accredit, Examine, and License Nurse Education & Practice
Objective No. 1 Ensure Nursing Programs are in Compliance with the Rules
Strategy No. 1 Accredit Programs that Include Essential Competencies Curricula
Measure Type OP
Measure No. 1 Total Number of Nursing Programs or Schools Approved (RN)

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

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

Data Source
This information is tabulated by the Department of Nursing according to new program requests, ongoing annual reports, and Board minutes. The Director of Professional Nursing is responsible for this data.

Methodology
This number is derived by counting the number of ongoing programs approved by the Board and adding the number of new programs that have met the Board's requirements at the end of the reporting period.

Purpose
This measure is the number of RN programs that have met the requirements for accreditation by the Board of Nursing. By meeting the Board's criteria, the programs offer courses that allow students to meet minimum competency as registered nurses and take the RN examination.

Goal No. 1 Accredit, Examine, and License Nurse Education & Practice
Objective No. 1 Ensure Nursing Programs are in Compliance with the Rules
Strategy No. 1 Accredit Programs that Include Essential Competencies Curricula
Measure Type OP
Measure No. 2 Total Number of Nursing Programs Licensed (LVN)

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

Data Limitations
None.

Data Source
The number of schools licensed is maintained by the Education Consultants. Schools are added or subtracted on a quarterly basis according to the number of schools opened or closed. The information comes from the schools or Board actions.

Methodology
The unduplicated number of schools/programs are counted. A school that holds more than one approval is counted once.

Purpose
The measure represents the number of vocational nursing programs approved by the Board plus new programs approved during the reporting period minus the number of programs closed or approvals withdrawn. The list of approved school/programs are maintained by the Education Nurse Consultants.

Goal No. 1 Accredit, Examine, and License Nurse Education & Practice
Objective No. 1 Ensure Nursing Programs are in Compliance with the Rules
Strategy No. 1 Accredit Programs that Include Essential Competencies Curricula
Measure Type OP
Measure No. 3 Number of Nursing Programs Surveyed (LVN)

Definition
The number of LVN programs visited by Board staff and reviewed to determine all standards and requirements are met for Board approval.

Data Limitations
None.

Data Source
The individuals complete a report of each survey they perform. This information is compiled into a monthly report by the administrative staff in that division and information is provided for quarterly reports.

Methodology
The number is derived by manually summing the total number of programs surveys conducted within the reporting period and the monthly performance report produced by the Education Nurse Consultants.

Purpose
This measure shows the number of vocational nurse programs in compliance with board standards.

Goal No. 1 Accredit, Examine, and License Nurse Education & Practice
Objective No. 1 Ensure Nursing Programs are in Compliance with the Rules
Strategy No. 1 Accredit Programs that Include Essential Competencies Curricula
Measure Type OP
Measure No. 4 Number of Programs Sanctioned (LVN)

Definition
The number of LVN programs not in compliance with requirements for full approval by the board. Pass rates below 80% on NCLEX-PN examination or non-compliance with rules and regulations.

Data Limitations
None.

Data Source
Board minutes indicate when a LVN program is sanctioned by the Board.

Methodology
Manual count reported by Board staff.

Purpose
To monitor compliance with board rules and regulations.

Goal No. 1 Accredit, Examine, and License Nurse Education & Practice
Objective No. 1 Ensure Nursing Programs are in Compliance with the Rules
Strategy No. 1 Accredit Programs that Include Essential Competencies Curricula
Measure Type OP
Measure No. 5 Number of Programs Surveyed (RN)

Definition
The number of professional RN programs visited and reviewed by Board staff to determine that all education standards, requirements, and rules are met for Board approval.

Data Limitations
None.

Data Source
Board staff complete a report of each survey they perform. This information is compiled into a monthly report and provided to the Board on a quarterly basis.

Methodology
The number of professional RN schools surveyed is derived by staff manually adding the total number of program survey visits conducted within the reporting period.

Purpose
This measure provides documentation to the Board as to the number of professional nurse programs in compliance and noncompliance with Board education rules.

Goal No. 1 Accredit, Examine, and License Nurse Education & Practice
Objective No. 1 Ensure Nursing Programs are in Compliance with the Rules
Strategy No. 1 Accredit Programs that Include Essential Competencies Curricula
Measure Type OP
Measure No. 6 Number of Programs Sanctioned (RN)

Definition
The number of professional RN programs not in compliance with requirements for full approval by the Board. Pass rates below 80% on the RN examination or noncompliance with rules and regulations affect a programs approval status.

Data Limitations
None.

Data Source
Board minutes indicate when a RN program is sanctioned by the Board.

Methodology
Manual count reported by Board staff.

Purpose
To monitor compliance with board rules and regulations.

Goal No. 2 Protect Public and Enforce Nursing Practice Act
Objective No. 1 Investigate and Resolve Complaints about Violations of the Act
Strategy No. 1 Administer System of Enforcement and Adjudication
Measure Type EF
Measure No. 1 Average Time for Complaint Resolution (RN)

Definition
The average length of time to resolve a RN complaint, for all complaints resolved during the reporting period.

Data Limitations
None.

Data Source
The agency discipline software module captures the date of RN complaints received, and the number of disciplinary actions taken by the Board as entered by the Enforcement staff. The Director of Enforcement is responsible for this data.

Methodology
The total number of calendar days per RN complaint resolved, summed for all RN complaints resolved during the reporting period, that lapsed from receipt of a request for agency intervention to the date upon which final action on the complaint was taken by the Board, divided by the number of complaints resolved during the reporting period. The calculation excludes complaints determined to be non-jurisdictional of the agency's statutory responsibilities.

Purpose
The measure shows the agency's efficiency in resolving complaints.

Goal No. 2 Protect Public and Enforce Nursing Practice Act
Objective No. 1 Investigate and Resolve Complaints about Violations of the Act
Strategy No. 1 Administer System of Enforcement and Adjudication
Measure Type EF
Measure No. 2 Average Time for Complaint Resolution (LVN)

Definition
The average length of time to resolve a LVN complaint, for all LVN complaints resolved during the reporting period.

Data Limitations
None.

Data Source
The agency discipline software module captures the date of LVN complaints received, number of disciplinary actions taken by the Board as entered by the Enforcement staff. The Director of Enforcement is responsible for this data.

Methodology
The total number of calendar days per LVN complaint resolved, summed for all LVN complaints resolved during the reporting period, that lapsed from receipt of a request for agency intervention to the date upon which final action on the LVN complaint was taken by the Board, divided by the number of LVN complaints resolved during the reporting period. The calculation excludes LVN complaints determined to be non-jurisdictional of the agency's statutory responsibilities.

Purpose
The measure shows the agency's efficiency in resolving complaints.

Goal No. 2 Protect Public and Enforce Nursing Practice Act
Objective No. 1 Investigate and Resolve Complaints about Violations of the Act
Strategy No. 1 Administer System of Enforcement and Adjudication
Measure Type EF
Measure No. 3 Average Time for Complaint Resolution (APRN)

Definition
The average length of time to resolve an APRN complaint, for all complaints resolved during the reporting period.

Data Limitations
None.

Data Source
The agency discipline software module captures the date of APRN complaints received, number of disciplinary actions taken by the Board as entered by the Enforcement staff. The Director of Enforcement is responsible for this data.

Methodology
The total number of calendar days per APRN complaint resolved, summed for all APRN complaints resolved during the reporting period, that lapsed from receipt of a request for agency intervention to the date upon which final action on the complaint was taken by the Board, divided by the number of complaints resolved during the reporting period. The calculation excludes complaints determined to be non-jurisdictional of the agency's statutory responsibilities.

Purpose
The measure shows the agency's efficiency in resolving complaints.

Goal No. 2 Protect Public and Enforce Nursing Practice Act
Objective No. 1 Investigate and Resolve Complaints about Violations of the Act
Strategy No. 1 Administer System of Enforcement and Adjudication
Measure Type EX
Measure No. 1 Number of Jurisdictional Complaints Received (RN)

Definition
The total number of RN complaints received during the reporting period which are within the agency's jurisdiction of statutory responsibility.

Data Limitations
This is explanatory and a workload measure. The agency has very limited control over this measure.

Data Source
This number is derived from agency discipline software module as the RN complaints are logged in by the Enforcement Support Staff. The Director of Enforcement is responsible for this data.

Methodology
The agency sums the total number of RN complaints received only relative to agency jurisdiction.

Purpose
The measure shows the number of RN jurisdictional complaints which helps determine agency workload.

Goal No. 2 Protect Public and Enforce Nursing Practice Act
Objective No. 1 Investigate and Resolve Complaints about Violations of the Act
Strategy No. 1 Administer System of Enforcement and Adjudication
Measure Type EX
Measure No. 2 Number of Jurisdictional Complaints Received (LVN)

Definition
The total number of LVN complaints received during the reporting period which are within the agency's jurisdiction of statutory responsibility.

Data Limitations
This is explanatory and a workload measure. The agency has very limited control over this measure.

Data Source
This number is derived from agency discipline software module as the LVN complaints are logged in by the Enforcement Support Staff. The Director of Enforcement is responsible for this data.

Methodology
The agency sums the total number of LVN complaints received only relative to agency jurisdiction.

Purpose
The measure shows the number of LVN jurisdictional complaints which helps determine agency workload.

Goal No. 2 Protect Public and Enforce Nursing Practice Act
Objective No. 1 Investigate and Resolve Complaints about Violations of the Act
Strategy No. 1 Administer System of Enforcement and Adjudication
Measure Type EX
Measure No. 3 Number of Jurisdictional Complaints Received (APRN)

Definition
The total number of APRN complaints received during the reporting period which are within the agency's jurisdiction of statutory responsibility.

Data Limitations
This is explanatory and a workload measure. The agency has very limited control over this measure.

Data Source
This number is derived from agency discipline software module as the APRN complaints are logged in by the Enforcement Support Staff. The Director of Enforcement is responsible for this data.

Methodology
The agency sums the total number of APRN complaints received only relative to agency jurisdiction.

Purpose
The measure shows the number of APRN jurisdictional complaints which helps determine agency workload.

Goal No. 2 Protect Public and Enforce Nursing Practice Act
Objective No. 1 Investigate and Resolve Complaints about Violations of the Act
Strategy No. 1 Administer System of Enforcement and Adjudication
Measure Type OP
Measure No. 1 Number of Complaints Resolved (RN)

Definition
The total number of RN complaints resolved during the reporting period.

Data Limitations
None.

Data Source
The agency discipline software module captures the total number of RN complaints resolved within the reporting period. The Director of Enforcement is responsible for this data.

Methodology
The total number of RN complaints during the reporting period upon which final action was taken by the Board for which a determination is made that a violation did occur. A RN complaint that, after preliminary investigation, is determined to be non-jurisdictional is not a resolved complaint.

Purpose
The measure shows the workload associated with resolving RN complaints.

Goal No. 2 Protect Public and Enforce Nursing Practice Act
Objective No. 1 Investigate and Resolve Complaints about Violations of the Act
Strategy No. 1 Administer System of Enforcement and Adjudication
Measure Type OP
Measure No. 2 Number of Complaints Resolved (LVN)

Definition
The total number of LVN complaints resolved during the reporting period.

Data Limitations
None.

Data Source
The agency discipline software module captures the total number of LVN complaints resolved within the reporting period. The Director of Enforcement is responsible for this data.

Methodology
The total number of LVN complaints during the reporting period upon which final action was taken by the Board for which a determination is made that a violation did occur. A LVN complaint that, after preliminary investigation, is determined to be non-jurisdictional is not a resolved complaint.

Purpose
The measure shows the workload associated with resolving LVN complaints.

Goal No. 2 Protect Public and Enforce Nursing Practice Act
Objective No. 1 Investigate and Resolve Complaints about Violations of the Act
Strategy No. 1 Administer System of Enforcement and Adjudication
Measure Type OP
Measure No. 3 Number of Complaints Resolved (APRN)

Definition
The total number of APRN complaints resolved during the reporting period.

Data Limitations
None.

Data Source
The agency discipline software module captures the total number of APRN complaints resolved within the reporting period. The Director of Enforcement is responsible for this data.

Methodology
The total number of APRN complaints during the reporting period upon which final action was taken by the Board for which a determination is made that a violation did occur. An APRN complaint that, after preliminary investigation, is determined to be non-jurisdictional is not a resolved complaint.

Purpose
The measure shows the workload associated with resolving APRN complaints.

Goal No. 2 Protect Public and Enforce Nursing Practice Act
Objective No. 1 Investigate and Resolve Complaints about Violations of the Act
Strategy No. 2 Identify, Refer and Assist Those Nurses Whose Practice is Impaired
Measure Type OP
Measure No. 1 Number of Licensed Individuals in a Peer Assistance Program (RN)

Definition
The number of licensed RNs who participated in a peer assistance program sponsored by the agency during the reporting period.

Data Limitations
The agency has no control over this measure as it is operated by a third party.

Data Source
This data is provided by the Texas Peer Assistance Program for Nurses. The Operations Director is responsible for this data.

Methodology
The first quarter's report includes all licensed RNs participating in a peer assistance program carried forward from the prior fiscal year plus those individuals who have had disciplinary orders entered requiring the individual to participate in the peer assistance program/signed contract with the peer assistance program during the quarter. Reports for second, third, and fourth quarters will include only the number of licensed RNs who have had disciplinary orders entered/signed contracts during the respective quarter for the cumulative year-to-date number to be the total number of licensed individuals who participated in the peer assistance program during the current fiscal year.

Purpose
The measure shows the number of licensed RNs who continue to practice in their respective field who are participating in a peer assistance program.

Goal No. 2 Protect Public and Enforce Nursing Practice Act
Objective No. 1 Investigate and Resolve Complaints about Violations of the Act
Strategy No. 2 Identify, Refer and Assist Those Nurses Whose Practice is Impaired
Measure Type OP
Measure No. 2 Number of Licensed Individuals in a Peer Assistance Program (LVN)

Definition
The number of licensed LVNs who participated in a peer assistance program sponsored by the agency during the reporting period.

Data Limitations
The agency has no control over this measure as it is operated by a third party.

Data Source
This data is provided by the Texas Peer Assistance Program for Nurses. The Operations Director is responsible for this data.

Methodology
The first quarter's report includes all licensed LVNs participating in a peer assistance program carried forward from the prior fiscal year plus those individuals who have had disciplinary orders entered requiring the individual to participate in the peer assistance program/signed contract with the peer assistance program during the quarter. Reports for second, third, and fourth quarters will include only the number of licensed LVNs who have had disciplinary orders entered/signed contracts during the respective quarter for the cumulative year-to-date number to be the total number of licensed individuals who participated in the peer assistance program during the current fiscal year.

Purpose
The measure shows the number of licensed LVNs who continue to practice in their respective field who are participating in a peer assistance program.

Goal No. 2 Protect Public and Enforce Nursing Practice Act
Objective No. 1 Investigate and Resolve Complaints about Violations of the Act
Strategy No. 2 Identify, Refer and Assist Those Nurses Whose Practice is Impaired
Measure Type OP
Measure No. 3 Number of Licensed Individuals in a Peer Assistance Program (APRN)

Definition
The number of licensed APRNs who participated in a peer assistance program sponsored by the agency during the reporting period.

Data Limitations
The agency has no control over this measure as it is operated by a third party.

Data Source
This data is provided by the Texas Peer Assistance Program for Nurses. The Operations Director is responsible for this data.

Methodology
The first quarter's report includes all licensed APRNs participating in a peer assistance program carried forward from the prior fiscal year plus those individuals who have had disciplinary orders entered requiring the individual to participate in the peer assistance program/signed contract with the peer assistance program during the quarter. Reports for second, third, and fourth quarters will include only the number of licensed APRNs who have had disciplinary orders entered/signed contracts during the respective quarter for the cumulative year-to-date number to be the total number of licensed individuals who participated in the peer assistance program during the current fiscal year.

Purpose
The measure shows the number of licensed APRNs who continue to practice in their respective field who are participating in a peer assistance program.

Schedule C: Texas Board of Nursing Historically Underutilized Business Plan

34 Texas Administrative Code §20.284(a) requires that each state agency make a good faith effort to award procurement opportunities to businesses certified as historically underutilized. The goal of this good faith effort is to ensure that a fair share of state business is awarded to Historically Underutilized Businesses (HUBs).

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

HUB Mission Statement

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

HUB Goals

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

HUB Program Strategy

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

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

Schedule F: Board of Nursing Fiscal Year 2024-2028 Workforce Plan

I. Agency Overview

The Board of Nursing (BON) has one of the largest licensee databases in the State of Texas. The Board regulates over 540,000 nurses and over 200 schools of nursing. The Board of Nursing issues licenses to more than 27,000 nurses per year by examination to new graduates and by endorsement to licensees from other states seeking a Texas license.

The Agency is mission-driven and has a strict governance code which spells out the duties of the Board, the Executive Director, and the agency staff. All rules and policies are reviewed within the framework of protecting the public. The agency has the appropriations approval to hire 141.7 full time equivalents (FTEs) in FY24, and 138.7 FTEs in FY25. The agency has 50 FTEs in the Enforcement Division, 51.5 FTEs in the Operations Division, 23 FTEs in the Nursing Division and 17 FTEs in General Counsel and Administration. The majority of staff are located in the Austin area. The Board has 15 members from throughout the State of Texas. Board members are appointed by the Governor with the advice and consent of the Senate.

A. Agency Mission

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

B. Agency Strategic Goals and Objectives

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

C. Business Functions

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

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

No changes to the agency's mission are anticipated in the next five years.

E. Additional Considerations

Key Economic and Environmental Factors
Per the Texas Comptroller's Capital Region 2024 Regional Report:

From 2012 to 2022, regional employment increased by 46 percent, which is double the statewide growth rate and three times the national rate. The rapid growth of the Capital Region leads to a highly competitive hiring environment.

According to the Texas Housing Affordability Index, the family median income earned in the Capital Region is not enough to afford the median-priced home in the region. This problem has gotten progressively worse since 2017, which puts pressure on employees to afford housing near work. To afford housing, workers often must either limit other spending, or move to less expensive communities to afford housing. Living in these less-expensive communities often requires employees to accept long commutes to work.

Challenges to Providing Competitive Salaries

The Texas Board of Nursing recently received the results of its 2023 Survey of Employee Engagement. Two key areas of concern identified are pay and benefits. Scores on the pay and benefits constructs indicate that BON staff perceive their salaries and benefits as not comparable to that offered by other employers.

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

Agency Workload

Several factors have contributed to an increased workload for the Board of Nursing agency staff. These include:

Increase In Number of Licensees - The number of nurses holding current licenses in the State of Texas has been steadily increasing. For Fiscal Years 2019-2023, the average annual growth in RN Licensure was 5.69%. At the same time, APRN licensure average annual growth was 14%, and LVN licensure declined slightly, with an average annual decline of 0.53%. From FY 19 to FY 23, the total number of nurses holding licenses in the State of Texas increased by 77,387. The additional licensees create additional work demand for our Licensing teams in both the Operations and Nursing Departments.

Increasing Cases for Investigations - In Fiscal Year 21, the Board of Nursing closed 16,120 cases. This increased to 19,269 cases closed in FY 22, and 19,930 cases closed in FY 23. Despite this increase in the number of cases closed per year, the percentage of cases closed within six months has declined. In FY 21, 89.9% of cases were closed within six months. By FY 23, this had declined to 74.9%.

This decline in the percentage of cases closed within six months can be attributed to the increasing caseload of our investigators. In FY 19, our agency had an average of 91 cases open per investigator. By FY 23, the average number of cases open per investigator had increased to 158.

II. CURRENT WORKFORCE PROFILE (SUPPLY ANALYSIS)

A. Agency Demographics

Gender: Female 72.8%
Male 27.2%

Race: African American 11.2%
Hispanic 24.8%
Asian 3.2%
Caucasian 60.8%

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

Job Categories	State Civilian Workforce					
2023 Data	African American		Hispanic American		Female	
	BON %	State %	BON %	State %	BON %	State %
Officials, Administration	20.0	12.8	0.0	20.9	40.0	54.5
Professionals	0.0	16.7	18.0	25.3	72.2	61.3
Paraprofessionals	36.6	34.0	22.5	31.2	83.1	72.5
Technicians	0.0	19.2	0.0	35.6	0.0	51.5
Administrative Support	15.0	20.2	28.6	34.2	80.7	83.2

B. Employee Turnover

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

Agency Turnover Percentages: 2019-2023

Fiscal Year	Headcount	Terminations Including Interagency Transfers	Turnover Rate Including Interagency Transfers	Terminations Excluding Interagency Transfers	Turnover Rate Excluding Interagency Transfers
2019	118.5	20	16.9%	16	13.5%
2020	115.25	17	15.6%	13	11.3%
2021	115.25	12	10.4%	9	7.8%
2022	119.75	15	12.5%	14	11.7%
2023	121	20	16.5%	17	14.0%

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

Nurses - The agency requires associate degree prepared nurses for Enforcement and master's prepared nurses for consulting. All nurses need to be proficient in using computer software programs since they will be processing their cases from receiving the complaint to filing formal charges, drafting orders, and writing reports on school survey visits.

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

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

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

D. Projected Employee Attrition Rate over the Next Five Years

Fiscal Year 2022 - 16%
Fiscal Year 2023 - 16%
Fiscal Year 2024 - 16%
Fiscal Year 2025- 16%
Fiscal Year 2026- 16%

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

III. FUTURE WORKFORCE PROFILE (DEMAND ANALYSIS)

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

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

B. Future Workforce Skills Needed

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

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

IV. GAP ANALYSIS

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

Currently, 30 positions require a registered nurse license. The agency anticipates the need for additional RNs by the end of the next five-year cycle. They will be needed in the Enforcement Department to investigate alleged violations of the law and rules, and will be needed in the Nursing Department to interpret complex practice issues and serve as an expert witness on cases.

Recently updated supply and demand projections published by the Texas Center for Nursing Workforce Studies predict that the deficit of available RNs will increase steadily through the year 2036. They anticipate that through 2036, RNs will experience a larger growth in the deficit between supply and demand than any other nurse type. By 2036, they predict a statewide deficit of 56,370 RNs. These deficits of available RNs will make recruitment and retention of RNs more competitive in the future.

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

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

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

V. STRATEGY DEVELOPMENT

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

Goal 1	Recruit and retain a competent workforce
Rationale:	To establish a consistent, productive business atmosphere, the BON needs a well-trained and stable workforce to protect the public. This includes the ongoing internal training of current staff to fill open positions and possibly consolidate some work processes to enhance staff compensation with current or available funds.
Action Steps:	1. Request additional operating funds in the next legislative session to enhance employee compensation especially in the recruitment and retention of nurses. 2. Develop and revise agency policy and procedures to be consistent and detailed. 3. Develop mandatory training components for recognized agency sub-par skill sets. 4. Complete a succession plan which incorporates timelines and minimal skill sets. 5. Assess agency risk of potential knowledge loss due to departing key staff. 6. Establish and implement a career ladder for agency departments as needed.
Goal 2	Establish an agency culture of change enhancements to business processes
Rationale:	In an environment of limited resources, a culture of innovation is imperative to achieving more effective and efficient business operations. When staff are encouraged to provide input and share ideas for improvement, then engagement and ownership increase, ultimately benefitting agency customers.
Action Steps:	1. Develop an ongoing mandatory training module on change enhancements. 2. Add the skill of change enhancements and change management to the minimal core of essential job functions. 3. Reorganize agency structure around processes.

Texas Board of Nursing

Report on Customer Service for Fiscal Years 2025-2029

Submitted: June 1, 2024

I. Inventory of Customers Served by the BON

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

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

- The Public (citizens of Texas) - The mission of the BON is to protect and promote the welfare of the people of Texas by ensuring that each person holding a license as a nurse in the State of Texas is competent to practice safely.

- Nurses - The Board has a responsibility to assist nurses in the safe practice of nursing by keeping them informed of rules and regulations applicable to their practice. The BON does this through the agency website, the *Texas Board of Nursing Bulletin*, the BON Facebook page, written, phone and electronic communication.

- Health Care Organizations - The Board is responsible for providing information to health care organizations concerning the licensure or disciplinary action status of nurses they may employ or utilize.

- The Legislature - The Legislature, in its capacity of protecting the public and acting in the interest of its constituents, must be kept informed of issues involving the safe practice of nursing where legislative action may be the best course of action in ensuring safe nursing practice.

- Professional Associations - Professional associations seek data and information that may assist them in their efforts to advocate on behalf of the profession of nursing. Professional associations can assist the BON in researching issues impacting the safe practice of nursing.

- Schools of Nursing - The Board approves 128 RN Nursing Programs and 91 LVN Nursing Programs in Texas. The BON works with schools to ensure nursing students receive satisfactory preparation and that the schools understand the Board's requirements.

- Nursing Students - As customers, the Board provides students with the information needed to choose a Texas nursing education program and assists students in registering and taking the exams needed for licensure.

- Respondents - The Enforcement Department of the BON must afford respondents due process while investigating complaints.

II. Information-Gathering Methods

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

- Survey data from the 2024 BON Stakeholder Focused Feedback Survey conducted from December 22, 2023, to January 20, 2024; and
- Data from the 2024 BON Customer Service Survey conducted from April 1, 2024, to April 21, 2024, utilized the survey questions set forth in the *Instructions for Preparing and Submitting Agency Strategic Plans for Fiscal Years 2025 to 2029* issued by the Legislative Budget Board in February 2024.

The **2024 BON Customer Service Survey** received 61 responses during the two-week period during which the survey, hosted by *Survey Monkey*, was linked from the home page of the BON website. The survey announcements appeared: on the cover of the January and April 2024 issues of the *Board of Nursing Bulletin*, on the BON website home page, and on the BON Facebook page.

The **2024 BON Stakeholder Focused Feedback Survey**, hosted by Survey Monkey, following email invitations sent to 320 stakeholders, including educators, professional organizations, and advisory committee members received 60 responses in a 30-day period and gathered perceptions of: issues, conditions, or problems related to the practice of nursing; the most significant needs and demands of the Board's stakeholders; strengths, weaknesses, opportunities, or obstacles affecting the BONs relationship with its stakeholders; to what extent stakeholders are satisfied with the services the Board provides; and what progress has been made by the BON toward achieving the Board's objectives and desired outcomes.

III. Inventory of External Customers by Strategy

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

Strategy: Licensing

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

Strategy: Accreditation

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

Strategy: Adjudicate Violations

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

Strategy: Peer Assistance

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

IV. Analysis of Findings

A. 2024 Board of Nursing Customer Service Survey

The Board conducted an online survey in 2024, hosted by Survey Monkey, which was linked through the BON's website home page.

Methodology

The BON posted a link to the Customer Service Survey on the Board website in April 2024. The survey was also announced in the January and April 2024 issues of the BON *Bulletin* which were sent electronically to all currently licensed nurses in Texas, as well as all to non-nurse subscribers of the *Bulletin*. The total number of stakeholders electronically notified in April 2024 was 453,646. The survey, which consisted of 8 questions, solicited feedback concerning: the agency's facility, including the customer's ability to access the agency, the office location, signs, and cleanliness; staff, including employee courtesy, friendliness, and knowledgeability, and whether staff adequately identify themselves to customers by name, including the use of name plates or tags for accountability; communications, including toll-free telephone access, the average time a customer spends on hold, call transfers, access to live staff, letters, electronic mail, and any applicable text messaging or mobile applications; internet site, including the ease of use of the site, mobile access to the site, information on the location of the site and the agency, and information accessible through the site such as a listing of services and programs and whom to contact for further information or complaints; complaint handling process, including whether it is easy to file a complaint and whether responses are timely; ability to timely serve customers, including the amount of time a customer waits for service in person, by phone, by letter, or on a website; and brochures or other printed information, including the accuracy of that information. The survey was posted on the BON website from April 1, 2024, until April 21, 2024. Survey results are provided below.

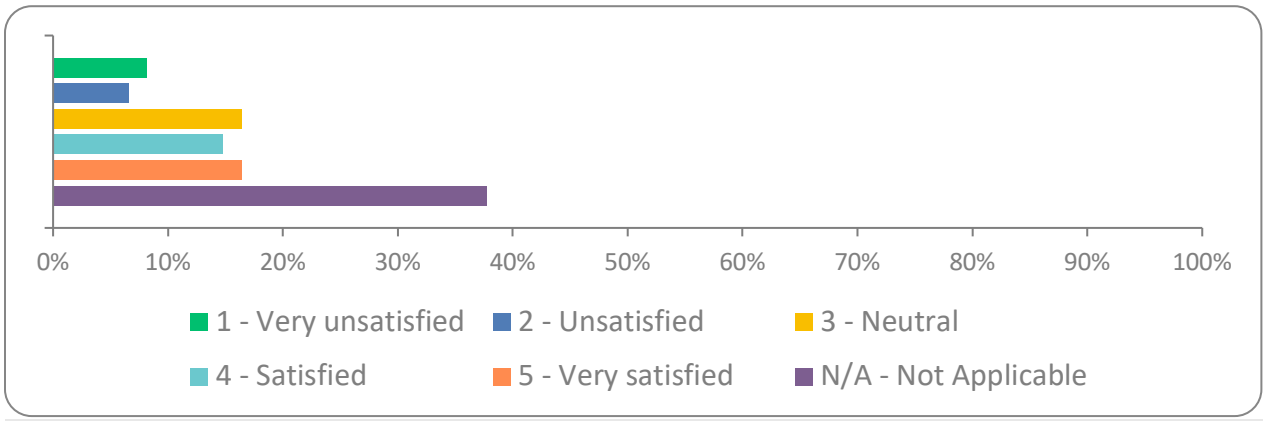
The BON Customer Service Survey was taken a total of 61 times, which is a low response rate for more than 453,000 licensees reached (.013 percent of those contacted). Survey numbers may have been higher if the survey had run for a longer duration, but the number of responses received may reflect caution by stakeholders towards online activities such as surveys hosted through a third-party site.

Findings of the 2024 Board of Nursing Customer Service Survey

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

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

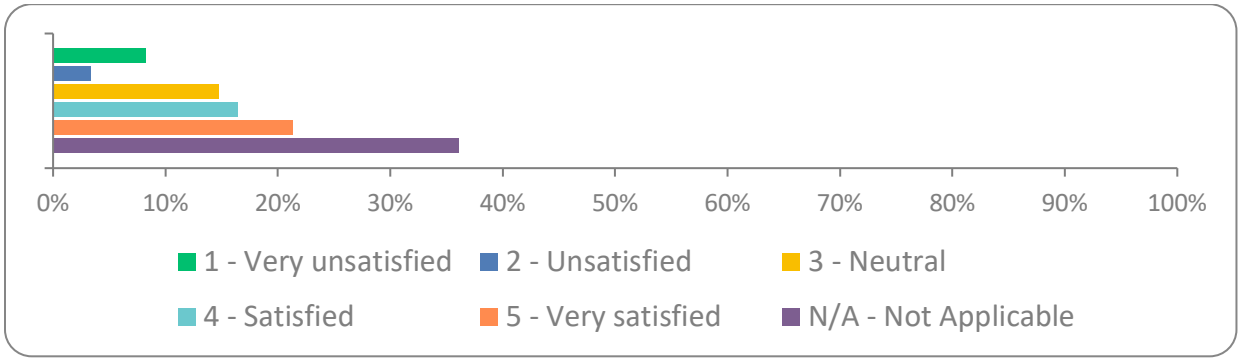
Q1: How satisfied are you with the agency's facilities, including your ability to access the agency, the office location, signs, and cleanliness?



1 - VERY UNSATISFIED	2 - UNSATISFIED	3 - NEUTRAL	4 - SATISFIED	5 - VERY SATISFIED	N/A - NOT APPLICABLE	TOTAL	WEIGHTED AVERAGE
	6.56% 4	16.39% 10	14.75% 9	16.39% 10	37.70% 23	61	3.39

Responses to the first survey question indicated that stakeholders were satisfied with the office for the BON with more than 30 percent of respondents answering that they were satisfied (14.75%) or very satisfied (16.39%) with the Board's office. The largest number of responses received was from stakeholders who felt that the BON's offices were not applicable (37.7 percent). The Board moved all licensing functions online for candidates for nurse licensure and for nurses renewing their licenses in June 2020. Survey responses seem to reflect this licensing transition.

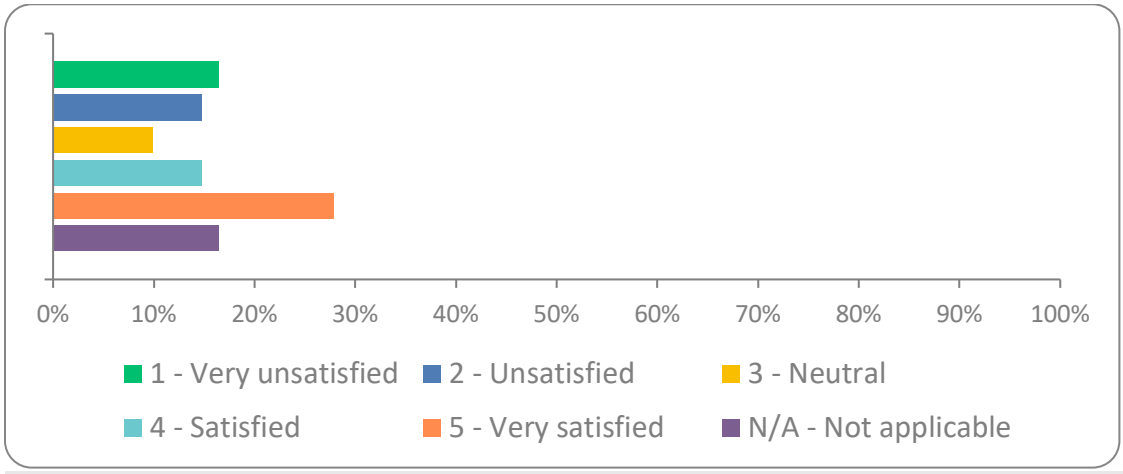
Q2: How satisfied are you with agency staff, including employee courtesy, friendliness, and knowledgeability, and whether staff members adequately identify themselves to customers by name, including the use of name plates or tags for accountability?



	1 - VERY UNSATISFIED	2 - UNSATISFIED	3 - NEUTRAL	4 - SATISFIED	5 - VERY SATISFIED	N/A - NOT APPLICABLE	TOTAL	WEIGHTED AVERAGE
	8.20% 5	3.28% 2	14.75% 9	16.39% 10	21.31% 13	36.07% 22	61	3.62

Responses to the second survey question closely resembled responses to the first survey question. Excluding responses from survey takers who responded that the question was not applicable (36.07%), more than 37 percent (37.38%) indicated that they were satisfied (16.39%) or very satisfied (21.31%) with the employee courtesy, friendliness, and knowledgeability of BON staff encountered at the Board's office.

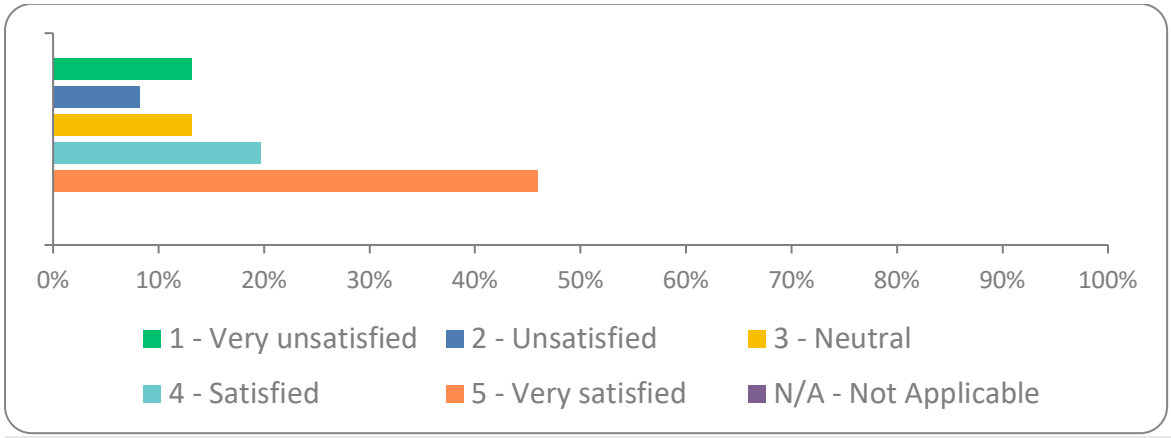
Q3: How satisfied are you with agency communications, including toll-free telephone access, the average time you spend on hold, call transfers, access to a live person, letters, electronic mail, and any applicable text messaging or mobile applications?



	1 - VERY UNSATISFIED	2 - UNSATISFIED	3 - NEUTRAL	4 - SATISFIED	5 - VERY SATISFIED	N/A - NOT APPLICABLE	TOTAL	WEIGHTED AVERAGE
	16.39% 10	14.75% 9	9.84% 6	14.75% 9	27.87% 17	16.39% 10	61	3.27

Survey takers expressed their dissatisfaction with phone access, hold time, and access to a live person when responding to the third question on the survey. More than 31 percent of respondents were very unsatisfied (16.39%) or unsatisfied (14.75%) with their access to BON staff through the phone system. The Board, like other state agencies in the capital complex, continues to face challenges in hiring and retaining customer service representatives. In FY 22, there were three vacancies in the Customer Service Group with 11 agency vacancies. In FY 23, agency vacancies rose to 13 including two vacancies in Customer Service. During FY 23, the BON Customer Service Group received 96,893 calls, responded to 63,597 Webmaster emails, replied to 2,926 speed memos from other boards of nursing, and responded to 99,148 ORBS message center messages. At the present time, the agency has three vacant customer service positions. The reduced staff numbers, coupled with the volume of calls received by the Customer Service Group, likely influenced the responses received to the third survey question.

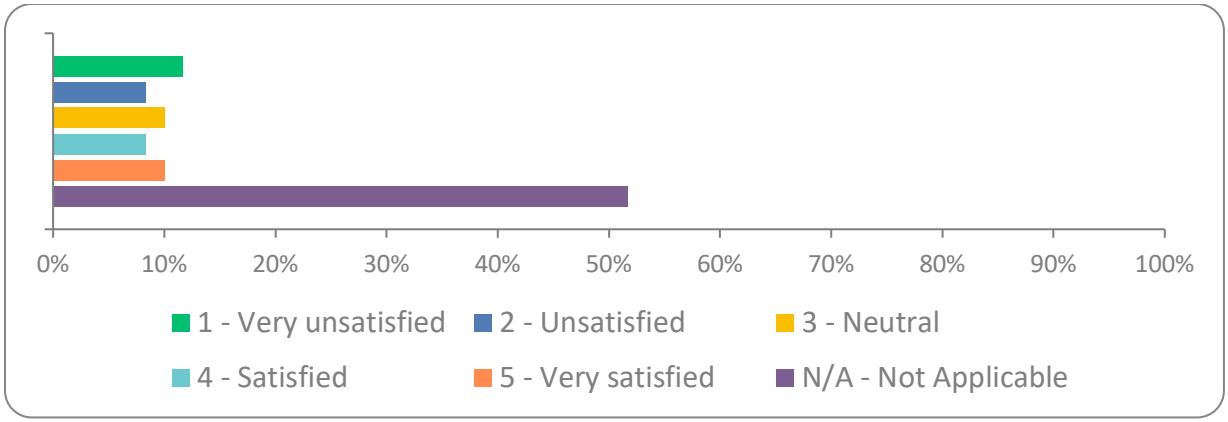
Q4: How satisfied are you with the agency's Internet site, including the ease of use of the site, mobile access to the site, information on the location of the site and the agency, and information accessible through the site such as a listing of services and programs and whom to contact for further information or to complain?



1 - VERY UNSATISFIED	2 - UNSATISFIED	3 - NEUTRAL	4 - SATISFIED	5 - VERY SATISFIED	N/A - NOT APPLICABLE	TOTAL	WEIGHTED AVERAGE
13.11% 8	8.20% 5	13.11% 8	19.67% 12	45.90% 28	0% 0	61	3.77

Survey takers expressed their satisfaction with the agency website in their responses to the fourth survey question. More than 65 percent of respondents were very satisfied (45.90%) or satisfied (19.67%) with the agency website. More than twenty percent of respondents were very unsatisfied (13.11%) or unsatisfied (8.20%) with the website. The Board is currently looking at ways to improve the website in the next biennium.

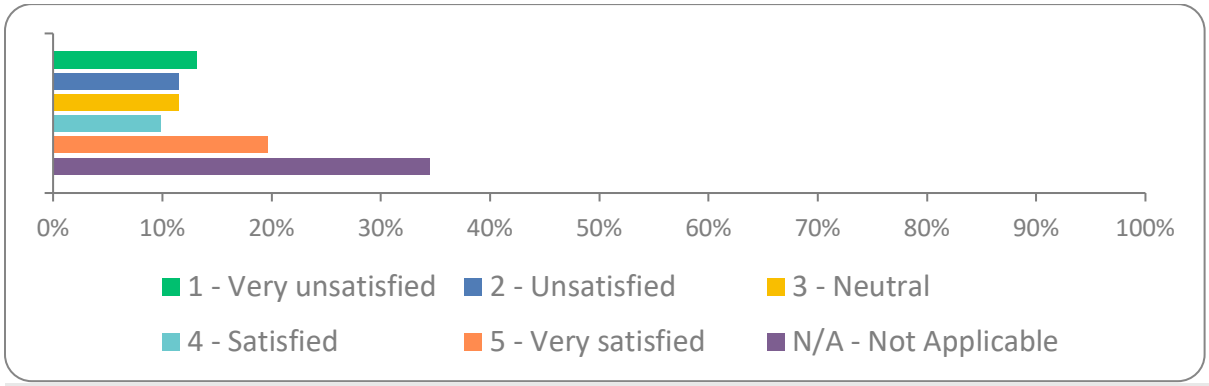
Q5: How satisfied are you with the agency's complaint handling process, including whether it is easy to file a complaint and whether responses are timely?



	1 - VERY UNSATISFIED	2 - UNSATISFIED	3 - NEUTRAL	4 - SATISFIED	5 - VERY SATISFIED	N/A - NOT APPLICABLE	TOTAL	WEIGHTED AVERAGE
	11.67% 7	8.33% 5	10.0% 6	8.33% 5	10.0% 6	51.67% 31	60	2.93

Results for the fifth question seem to indicate that many respondents had no experience with the agency's complaint handling process with more than 51 percent of survey takers (51.67%) responding with not applicable. Among the other responses received, numbers were evenly divided between those who were satisfied with the complaint handling process and those who were dissatisfied. Current discipline affects a very small population of nurses – only 0.28% of Registered Nurses, 0.60% of Licensed Vocational Nurses and 0.27% of Advanced Practice Registered Nurses have current discipline as of the end of FY 2023.

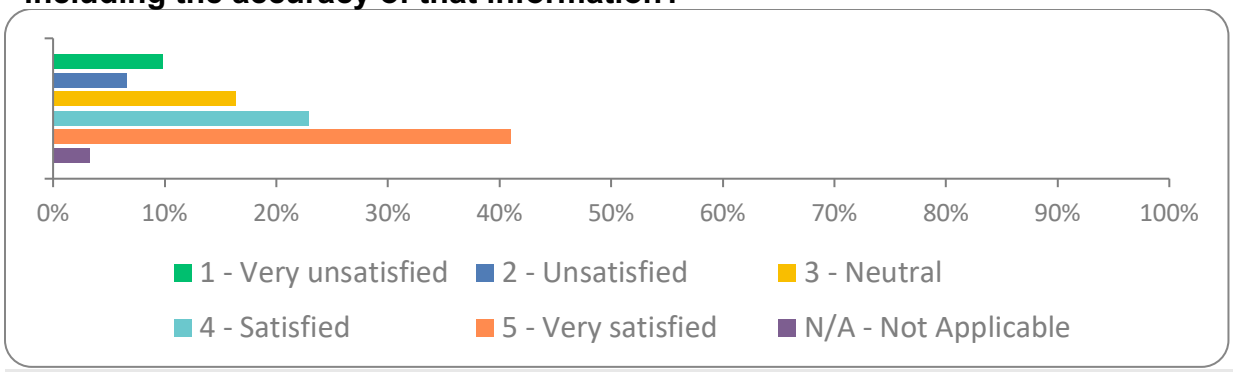
Q6: How satisfied are you with the agency's ability to timely serve you, including the amount of time you wait for service in person?



	1 - VERY UNSATISFIED	2 - UNSATISFIED	3 - NEUTRAL	4 - SATISFIED	5 - VERY SATISFIED	N/A - NOT APPLICABLE	TOTAL	WEIGHTED AVERAGE
	13.11% 8	11.48% 7	11.48% 7	9.84% 6	19.67% 12	34.43% 21	61	3.18

Excluding responses which indicated that Question Six is not applicable (34.43%), the largest number of responses (19.67%) came from respondents who indicated that they were very satisfied with the Board's ability to timely serve them. Approximately 25 percent of survey takers indicated that they were very unsatisfied (13.11%) or unsatisfied (11.48%). This is likely related to the reduced number of staff in Customer Service due to agency inability to staff positions in this area.

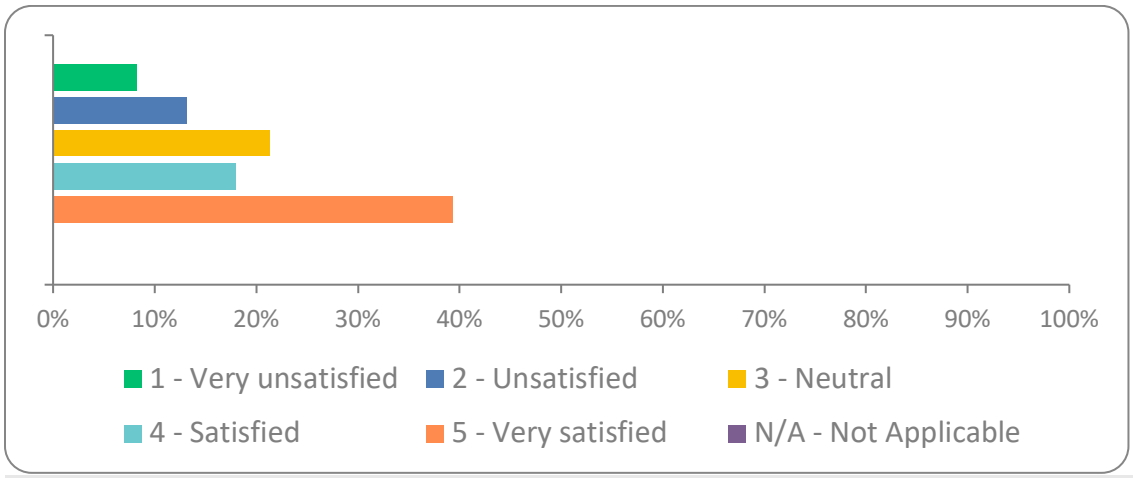
Q7: How satisfied are you with any agency brochures or other printed information, including the accuracy of that information?



	1 - VERY UNSATISFIED	2 - UNSATISFIED	3 - NEUTRAL	4 - SATISFIED	5 - VERY SATISFIED	N/A - NOT APPLICABLE	TOTAL	WEIGHTED AVERAGE
	9.84% 6	6.56% 4	16.39% 10	22.95% 14	40.98% 25	3.28% 2	61	3.81

Survey takers expressed their highest levels of satisfaction with agency brochures and printed information. More than 63 percent of respondents were very satisfied (40.98%) or satisfied (22.95%) with the BON's printed information.

Q8: Please rate your overall satisfaction with the agency.



	1 - VERY UNSATISFIED	2 - UNSATISFIED	3 - NEUTRAL	4 - SATISFIED	5 - VERY SATISFIED	N/A - NOT APPLICABLE	TOTAL	WEIGHTED AVERAGE
	8.20% 5	13.11% 8	21.31% 13	18.03% 11	39.34% 24	0% 0	61	3.67

Responses to Question Eight were like responses to the previous question. Nearly 58 percent of survey takers were very satisfied (39.34%) or satisfied (18.03%) overall with the agency.

2024 Board of Nursing Customer Service Survey Data Analysis – LBB Questions

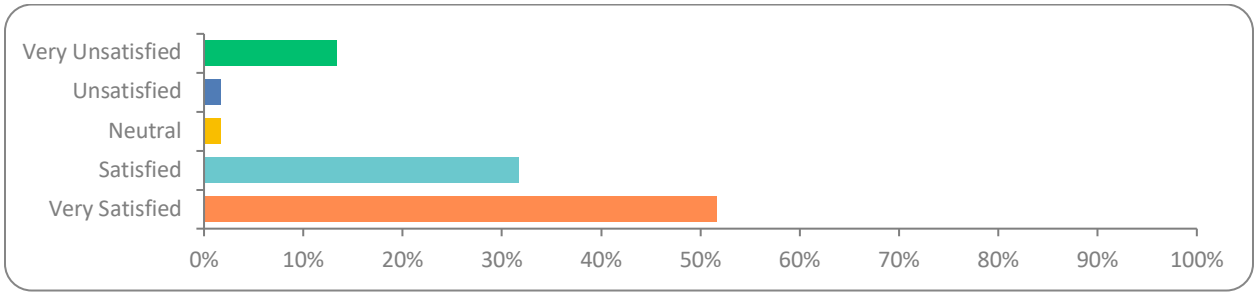
Feedback received from respondents to the 2024 BON survey (Questions 3 and 6) illuminated the difficulties the agency is experiencing in hiring and retaining adequate staff in the Customer Service area. At the same time, responses received to questions 7 and 8 seem to reflect an understanding on the part of stakeholders that the agency is doing the best it can with the workforce that it has. Several of the LBB questions were more applicable while the agency was still processing licensure forms in paper format which sometimes required visits to the office of the Board to submit forms and fees. This was reflected in the number of Not Applicable responses received to survey questions. The agency will consider all feedback received to identify ways to make improvements or changes in those areas in which negative feedback was received.

B. 2024 BON Stakeholder Focused Feedback Survey

In December 2023, 320 Board of Nursing (BON or Board) stakeholders were contacted and invited to take the BON Focused Feedback Survey hosted by Survey Monkey. Stakeholders included professional organizations, correctional health, disability groups, BON advisory committee members, state agencies involved with Nursing care in Texas, and Deans and Directors of all Board approved nursing education programs. The survey ended on January 20, 2024. Sixty stakeholders (18.75 percent) completed the survey and provided feedback to the Board.

The BON Focused Feedback Survey consisted of five questions with opportunities to provide comments following each question. Below are responses received to the survey, a summary of the comments provided to each question, as well as the unedited comments.

Q1: The Board of Nursing is committed to accountability to its stakeholders, which include the public, the Texas Legislature, accrediting bodies, nurses, and nursing education programs. Are you satisfied with the accountability of the agency with regard to its stakeholders?



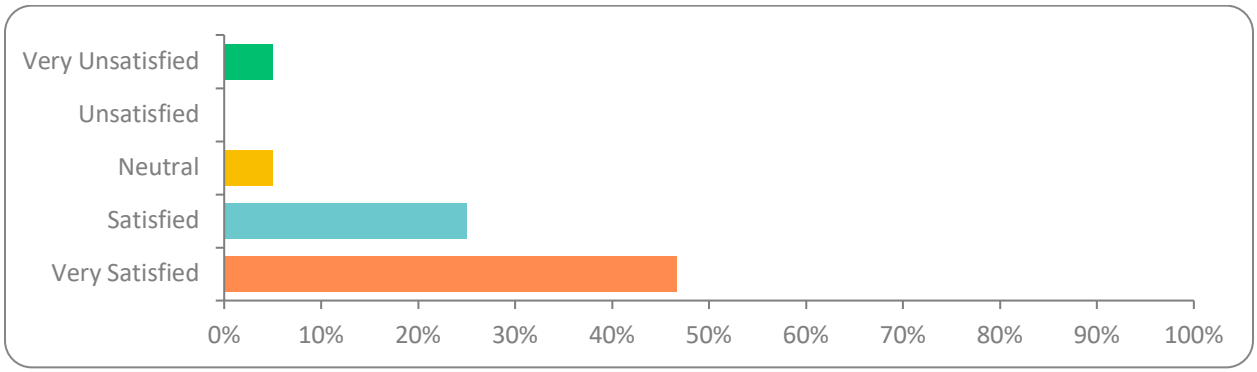
More than eighty-three percent of individuals (83.34%) polled indicated that they were very satisfied (51.67%) or satisfied (31.67%) with the accountability of the BON to its stakeholders. Responses to the survey for Questions 1 and 4 of the Survey also indicate dissatisfaction with the accountability of the agency to stakeholders as well as the quality of customer service provided by the agency. Written comments received reflect that stakeholders would like to see additional staff to respond to phone and email inquiries. Survey takers were also asked what change(s) would you recommend improving the accountability of the Board of Nursing to stakeholders?

Sixteen comments were received from survey takers. Suggestions included:

- Additional support for school nurses;

- Additional staff members to respond to both email and phone inquiries from student nurses;
- More Customer Service staff to assist with phone inquiries;
- New online educational offerings to better nurse understanding of laws and regulations;
- New website resources, such as a dashboard, with updates on board activities, policy changes, and board decisions;
- Increased receptiveness towards waivers for nursing faculty or clinical instructors;
- Consideration of doing a study relating to lowering the pass rates for education programs to 70 percent;
- Generic website improvements; and
- Seven survey takers commented that no changes are needed.

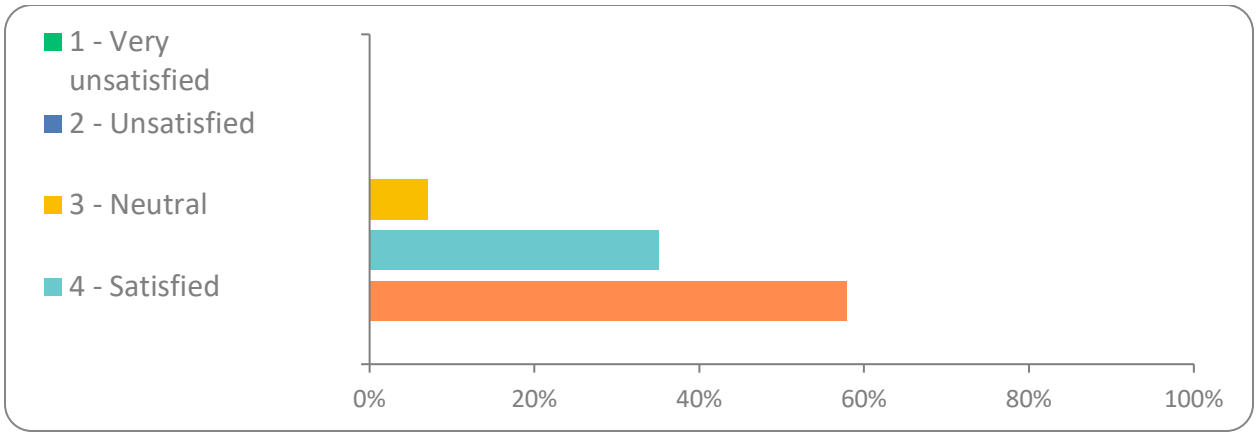
Q2: The Board of Nursing (BON) strives for efficiency through elimination of functions that are redundant and/or not cost effective. Examples include the transition to paperless licensure and communication to stakeholders through a paperless newsletter. Are you satisfied with the efforts of the BON to operate efficiently?



More than seventy-one percent of survey takers (71.67%) indicated that they were very satisfied (46.67%) or satisfied (25%) with the efficiency with which the agency operates. Survey respondents were also asked if they have any suggestions to improve efficiency of BON agency operations. Nine comments/suggestions were received to this question.

- Four comments were received suggesting that the agency move criminal background check notifications to the Nurse Portal,
- One commenter suggested that student rosters be submitted to the Nurse Portal instead of through an Excel spreadsheet,
- Another commenter suggested that the agency speed up the review of APRN complaints,
- Another suggestion was to add the ability to print the entire list of graduates at one time instead of one page at a time,
- One respondent applauded the transition to Nursys for nurse notifications concerning licensure, and
- Three survey takers indicated that no changes were needed.

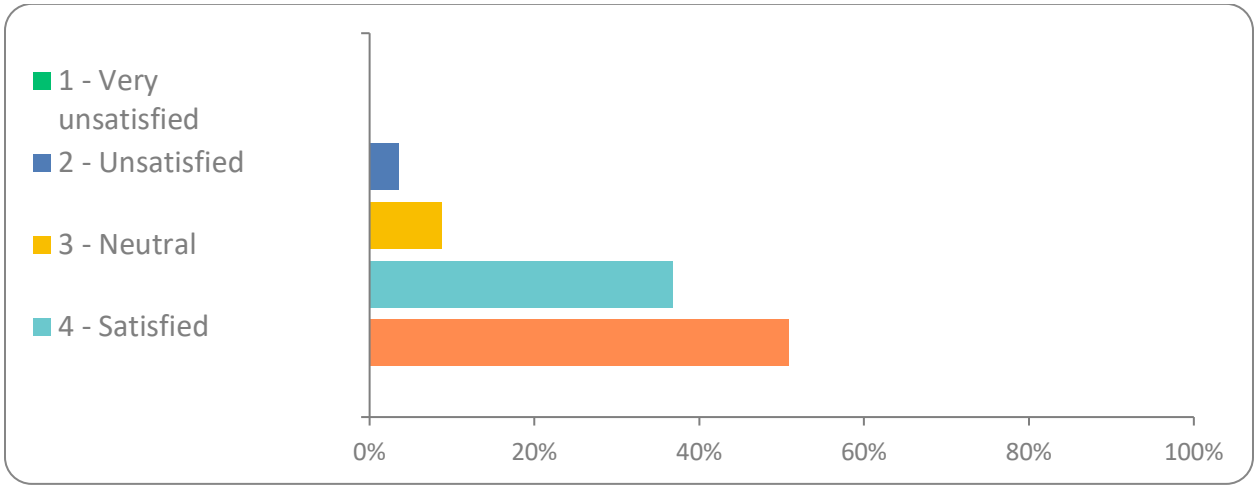
Q3: Are you satisfied with how the BON performs its core functions?



Survey results revealed that almost ninety-three percent (92.98%) of respondents were very satisfied (57.89%) or satisfied (35.09%) with BON performance of its core functions. Survey takers were also asked if they had suggestions on how the BON can better perform its core functions. Among the comments were:

- One respondent commented that they would support funding for hiring of additional nursing consultant,
- Another commenter suggested that the Board reconsider using first-time test takers in determining nursing education program pass rates, and
- Three survey takers indicated that no changes were needed.

Q4: The Board of Nursing (BON) is committed to providing excellent customer service to its stakeholders. How would you rate the customer service provided by the BON?

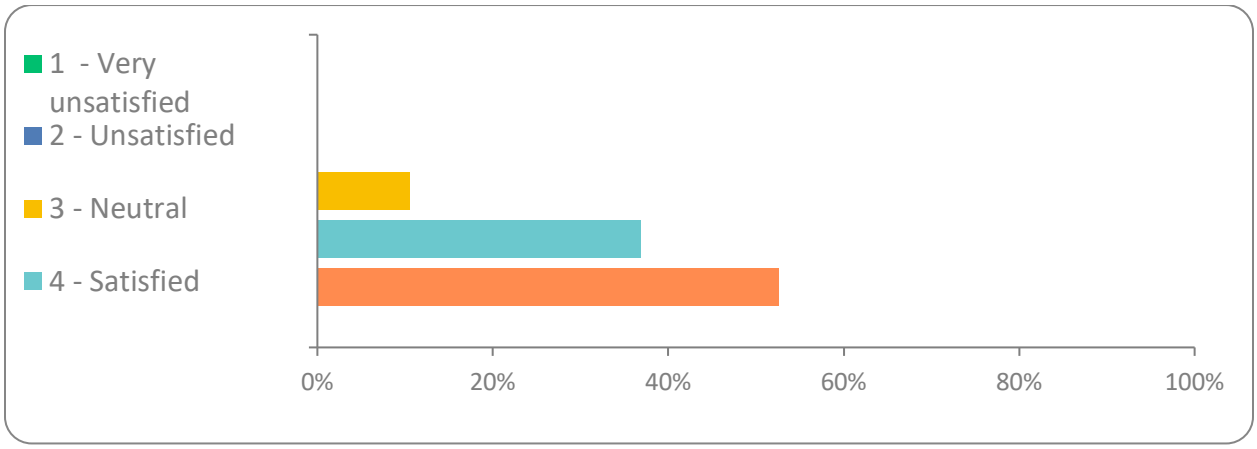


More than twelve percent of survey takers indicated they were neutral (3.51%) or unsatisfied with the customer made indicate that stakeholders may think that customer care provided by the BON should be improved. Survey takers were also asked for suggestions to improve the quality of customer service provided by the Board of Nursing. Of the 13 suggestions received, six suggestions were related to customer service provided to nurses and nursing students:

- More direct answers when nurses have practice questions (2),

- More staff to answer phone calls,
- Faster response time needed people contact the BON,
- Utilize artificial intelligence or other technology to assist with calls and direct the calls to appropriate locations,
- Provide clear answers to inquiries,
- Provide email addresses of Board staff for all topic areas,
- Provide more information concerning secondary nursing education programs,
- The message center on the Nurse Portal is an efficient tool for communication,
- Direct access to Nursing Education Consultants by nursing education programs is appreciated, and
- No changes needed (2).

Q5: Transparency in actions undertaken by the agency is paramount to good government. The Board of Nursing (BON) strives for transparency in the actions that it takes. Are you satisfied with the transparency of the BON?



Transparency is paramount to public trust in state government and almost ninety percent (89.47%) of survey takers indicated that they were very satisfied (52.63%) or satisfied (36.84%) with the transparency of actions taken by the BON. Two suggestions were offered by survey takers to improve the transparency of the BON in its actions:

- In depth guidance was requested for recently passed legislation relating to nursing, and
- Provide alerts to nursing education programs concerning changes made to legislation prior to final passage (This response indicates that the Board needs to continue educating nurses on the differences between professional organizations and the Board of Nursing), and
- Two responses indicated that no changes are needed.
- Two responses indicated that no changes are needed.

Note: The survey data were used in development of the 2025-2029 Board of Nursing Strategic Plan. Feedback from stakeholders in this survey was helpful in identifying problem areas, improving the customer service provided by the agency, and determining whether additional resources should be requested from the Texas Legislature to better serve BON stakeholders.

Customer Service Measures

Outcome Measures

FY24 (Focused Feedback Survey)	FY24 (BON/LBB Survey)	
90.52%	74.79%	Percentage of Surveyed Respondents expressing Overall Satisfaction with Services Received
40%	n/a*	Percentage of Surveyed Customer Respondents Identifying Ways to Improve Service Delivery

Output Measures

320 (FY 24 Survey)	n/a*	Number of Customers Surveyed
564,023	564,023	Number of Customers Served

Efficiency Measures

0	0	Cost Per Customer Surveyed

Explanatory Measures

564,023	564,023 **	Number of Customers Served
8	8	Number of Customer Groups Inventoried

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

*** *This number does not reflect third and fourth quarter data for FY 24.**

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

Outcome Measures

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

Short Definition:	**Total number of surveyed customer respondents who expressed an overall satisfaction with BON services, divided by the total number of surveyed customer respondents (during a specific reporting period).**
Purpose/Importance:	**This measure is one mechanism to determine the percentage of BON customers that are satisfied with the agency's customer service.**
Source/Collection of Data:	**BON develops a survey to agency Customers. BON tabulates survey data from those who responded to the survey.**
Method of Calculation:	**For FY24, BON Stakeholder weighted average responses from Focused Feedback Survey (Questions 3, and 4), and responses to Questions 2 and 8 from the 2024 Customer Service Survey. For calculation of the Focused Feedback Survey score of 90.52, the score was calculated by adding the number of responses expressing satisfaction and very satisfied for Questions 3 and 4, added together and divided by two. For calculation of the Customer Service Survey Score, Not Applicable and Neutral responses were removed from scoring, then the number of Satisfied and Very Satisfied responses were divided by total number of responses received, then the two scores were added together for Questions 2 and 8. The scores for Questions 2 and 8 were added together and divided by two, producing a score of 74.79.**
Data Limitation:	**The agency has no control over how many BON customers will respond to the survey.** **It is the agency's intention to gather survey data either through external or internal surveys.**
Calculation Type:	**Non-cumulative**

New Measure: **No**

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

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

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

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

Sources of Data: **The BON posted a focused feedback survey online from December 21, 2023, to January 20, 2024. BON tabulates survey data from those who respond to the surveys. The Focused Feedback Survey invitation was sent by email to 320 stakeholders. Stakeholders were to respond to the survey no later than January 20, 2024.**

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

DENOMINATOR - Total number of survey takers who completed the survey. This performance measure is calculated by dividing the numerator by the denominator and multiplying by 100 to achieve a percentage.

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

Calculation Type: **Non-cumulative**

New Measure: **No**

Desired Performance: **Based upon the assumption that more suggestions indicate poorer customer service,**

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

Output Measures

(1) Number of Customers Surveyed

Short Definition:	**Total number of BON customers surveyed in a reporting period.**
Purpose/Importance:	**This measure is an indication of the agency's efforts to collect information from stakeholders about the agency's customer service.**
Source of Data:	**The Board of Nursing develops an online survey which is hosted on Survey Monkey website and linked through BON home website page. Notification was sent to BON licensees and subscribers by emails sent to licensees and subscribers.**
Method of Calculation:	**Quantity of April 2024 *Bulletin* notifications sent by email using Mail Chimp for email delivery.**
Data Limitation:	**Not every BON customer is surveyed (e.g., BON has no control over nurses who change email addresses and forget to notify the Board of the change in a timely manner). BON also has no control over the number of customers who will want BON services (e.g., number of people who want to obtain a nursing license, or who want to obtain information that do not have a valid email address on file).** **This performance measure does not lend itself to a quarterly or annual report.**
Calculation Type:	**Non-cumulative**
New Measure:	**No**
Desired Performance:	**Actual performance that is higher than targeted performance is desirable.**

(2) Number of Customers Served

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

Efficiency Measures

1) Cost Per Customer Surveyed

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

Explanatory Measures

(1) *Number of Customers Identified* — **This explanatory measure is the same as the Output entitled Number of Customers Served.**

(2) *Number of Customer Groups Inventoried*

Short Definition: **Total number of customer groups identified in a reporting period.**

Purpose/Importance: **This measure reflects the diversity of agency customers and gives an indication of the agency's workload.**

Source/Collection of Data: **The number of customer groups is determined by reviewing the external customer groups that might exist within each budget strategy listed in the agency Strategic Plan.**

Method of Calculation: **BON keeps a manual inventory (manual list) of its customer groups.**

Data Limitation: **The types and groups of customers are somewhat specific (targeted) as a result of the agency's enabling legislation.**

It is the agency's intention to conduct two surveys on customer service in each biennium. This performance measure does not lend itself to a quarterly or annual report.

Calculation Type: **Non-cumulative**

New Measure: **No**

Desired Performance: **Actual performance that is higher than targeted performance is desirable, provided that the agency has sufficient staff to handle the increased workload that results from having additional groups of customers to serve**

Schedule I: Certification of Compliance with Cybersecurity Training

CERTIFICATE

Texas Board of Nursing

Pursuant to the Texas Government Code, Section 2056.002(b)(12), this is to certify that the agency has complied with the cybersecurity training required pursuant to the Texas Government Code, Sections 2054.5191 and 2054.5192.

Chief Executive Officer or Presiding Judge	**Board or Commission Chair**
Kristin K. Benton, DNP, RN	Kathleen Shipp
Signature	Signature
Kristin K. Benton, DNP, RN	Kathleen Shipp, MSN, APRN, FNP
Printed Name	Printed Name
Executive Director	President
Title	Title
May 13, 2024	May 13, 2024
Date	Date