

ANNUAL REPORT

OHIO BOARD OF NURSING

July 1, 2004 through June 30, 2005



The mission of the Ohio Board of Nursing is to actively safeguard the health of the public through the effective regulation of nursing care.

Prepared for The Honorable Bob Taft, Governor



December 9, 2005

The Honorable Bob Taft
Governor, State of Ohio
77 South High Street, 30th Floor
Columbus, Ohio 43215

Dear Governor Taft:

On behalf of the Board of Nursing (Board) we are pleased to submit this annual report for fiscal year 2005, in accordance with Section 4723.06 of the Revised Code. The report highlights the work of the thirteen-member Board, supported by a staff of approximately fifty-six employees.

The Board continued to meet the obligations specified by Chapter 4723. of the Revised Code. All activities were directed towards fulfillment of the Board's mission, to actively safeguard the health of the public through the effective regulation of nursing care. Licenses and certificates were issued to qualified individuals and renewed according to the Board's schedule; pre-licensure nursing education programs were surveyed and approved; and licensees or certificate holders were disciplined and their practice was monitored when they violated the law or rules regulating nursing practice. In addition, the Board promulgated rules and began to certify community health workers and implemented a new on-line renewal process for the 145,000 registered nurses who renewed their licenses during this renewal period.

Thank you for your support as the Board administers and enforces sections 4723.01 through 4723.99 of the Revised Code.

Respectfully yours,

Handwritten signature of Yvonne M. Smith, MSN RN CNS.

Yvonne Smith, RN, MS, CNS
President

Handwritten signature of Betsy J. Houchen.

Betsy Houchen, RN, MS, JD
Executive Director

Mission

The mission of the Ohio Board of Nursing is to actively safeguard the health of the public through the effective regulation of nursing care.

Board Members

Name/Position	City	Term Expires
Yvonne Smith, MSN, RN, CNS President	Canton	12/31/05
Mary Jean Flossie, LPN, LNHA Vice President	Massillon	12/31/05
Kathy Driscoll, JD, MS, RN Chair Advisory Group on Nursing Practice & Education	West Chester	12/31/05
Lisa Klenke, RN, MBA Chair Advisory Group on Continuing Education	Coldwater	12/31/05
J. Jane McFee, LPN	Perrysburg	12/31/05
Bertha Lovelace, RN, BA, CRNA Supervising Board Member for Disciplinary Matters	Shaker Heights	12/31/06
Anne Barnett, BSN, RNC	Junction City	12/31/06
Judith Brachman, Consumer member	Columbus	12/31/07
Cynthia Krueger, RN, MSN	Napoleon	12/31/07
Teresa Williams, LPN Chair, Hospitality	West Union	12/31/07
Debra Broadnax, MSN, RN, CNS Chair Advisory Group on Dialysis	Columbus	12/31/08
Elizabeth Buschmann, LPN	Oregon	12/31/08
Kathleen O'Dell, RN, M.Ed., NCSN	Greenville	12/31/08

Overview of Board Meetings

The Board of Nursing (Board) met seven times during the year for a total of fifteen meeting days. Meetings were held at the Board offices, 17 South High Street, Suite 400, Columbus, Ohio.

Approximately 280 individuals attended the meetings with fourteen participating in the Open Forum provided during each meeting. Issues brought to the Board's attention through this public dialogue included the Health Professions Nursing Center; a nurse regarding the Hearing Officer's Report and Recommendations; a Nursing Center in a University Setting and Clinical Nurse Leader; Independent Care Providers and the ACCESS Center for Independent Living; the Nursing Education Assistance Loan program (NEALP); a survey of RNs regarding intent to retire, and the Drug Repository Program.

In addition to carrying out its powers and duties pursuant to Chapter 4723. of the Revised Code, the Board also addressed other issues such as strategic planning and goal setting, establishing protocols and policies for licensing, discipline, post-discipline monitoring, creation and release of an RFP and Metrics for the first Nursing Education Grant Program cycle, and on-line renewal.

Board members were also actively involved with the National Council of State Boards of Nursing. This participation enabled Ohio to work with other nursing regulatory boards across the country to enhance the effectiveness and expertise of the Board.

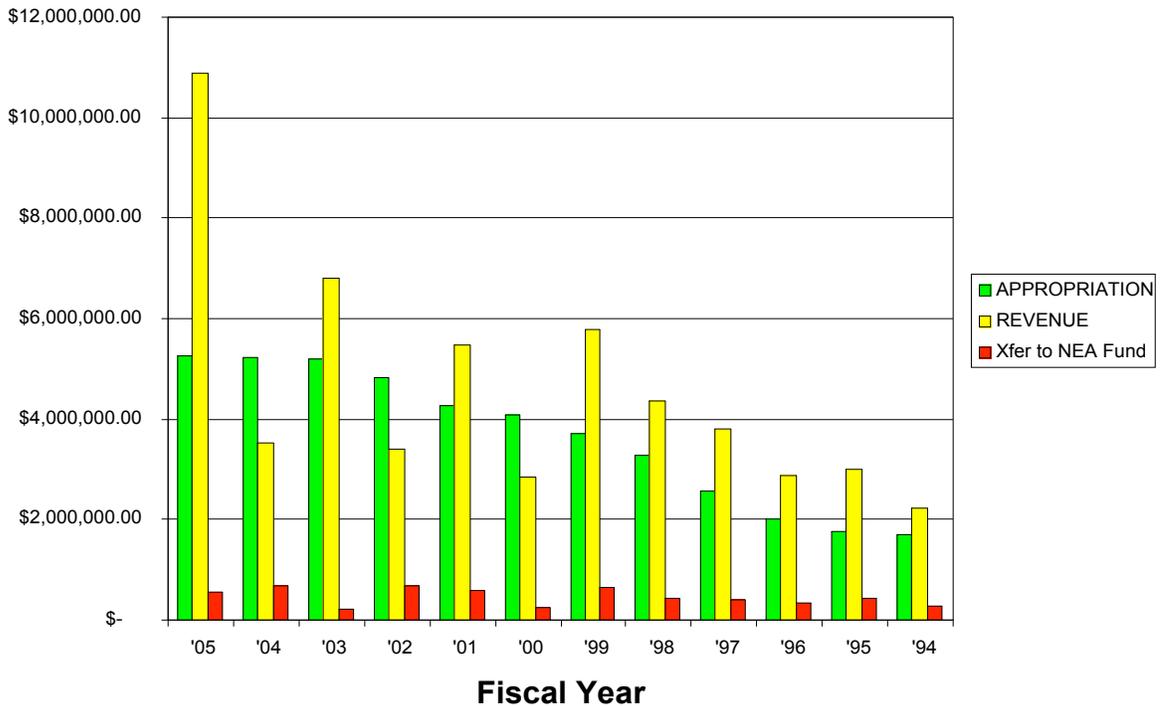
ADMINISTRATION

The strategic initiative of the Administrative Unit is to support the Board’s mission to actively safeguard the health of the public through the effective regulation of nursing care by maintaining effective and efficient administrative services for operational support. The Administrative Unit includes overall daily operations, such as fiscal, personnel, legislative and regulatory matters, information technology, and communications.

Fiscal Operations

The chart below depicts the variation from year to year in the income collected by the Board from licensing and other fees. The majority of RN license renewals occur on odd-numbered fiscal years while LPN renewals occur on even-numbered fiscal years. Due to the disproportionate number of RNs to LPNs in the state of Ohio, the Board experiences an irregular flow of income. Therefore, Board budgeted appropriations are based on two-year income projections because it is possible for the Board to expend more than it takes in during one year and have a surplus in the next year. The Board expects continued increases in its operational costs due to the addition of new programs and staff, expansion of automated services, and inflation.

Comparison of Revenue to Expenditures



**Ohio Board of Nursing
4K9 Fund—SFY 2003**

REVENUE

Endorsement	217,650.00
Examination	744,900.00
Certificates of Authority (all fees)*	725,930.00
Renewal (all other)	9,045,165.00
Dialysis Certification	65,930.00
CNE Approvers	900.00
Verification	6,395.00
Fines	22,540.00
Publications	5,348.00
Miscellaneous (all other fees)	38,925.00
<i>Donations to Special Issues Fund</i>	-
Total	\$10,873,683.00

*Includes some RN renewals paid as one transaction.

Transferred to Nurse Education Assistance Fund: \$193,305.00

Transferred to Nurse Education Grant Program: \$376,660.00

***Less Transfer: \$10,303,718.00**

OPERATIONAL COSTS

Payroll Account	Actual
Payroll and Fringe Benefits	3,765,845.89
Training, Registrations, Etc.	3,429.60
Court Reporting Services	10,029.80
Hearing Officer Services	36,506.25
Other Personal Services	117,473.50
Nursing Ed. Consultants	26,800.00
Advisory Group Travel	6,650.36
<i>Original Allotment +/- Adjustments</i>	<i>4,155,270.00</i>
Total Expended	\$3,966,735.40

Maintenance Account	Actual
Attorney General Services	68,743.07
Equipment Maintenance, Rental & Repairs	22,859.29
Supplies & Small Equipment	33,256.66
Postage & Shipping	142,080.04
Printing	20,753.05
Telephone Charges	51,779.66

Travel Staff & Board	47,112.48
Computer Services, Charges & Maintenance	61,786.53
Office Space Rent, Repairs & Improvements	236,888.97
Bank Lockbox Service	15,673.41
All other costs	56,735.12
<i>Original Allotment +/- Adjustments</i>	912,206.00
Total Expended	757,668.28

Equipment Account	Actual
Computer Equipment	35,268.64
Other Equipment	28,785.45
<i>Original Allotment +/- Adjustments</i>	6,4600.00
Total Expended	64,054.09

Refund Account	Actual
Refunds	1,130.00
<i>Original Allotment +/- Adjustments</i>	5,000
Total Refunded	1,130.00

SUMMARY

Encumbered Funds Pending	\$ 388,502.63
Expended Funds at EOY	\$ 4,789,587.77
Total Operational Expenses	\$ 5,178,090.40
SFY 2003 Appropriation	\$ 5,257,576.00
Amount Returned to 4K9	\$ 79,485.60

Nursing Special Issues Fund

Transaction Type	Balance
Yearly Legislative Allocation	\$5,000.00
Donations (Brought Forward)	50,250.00
Donations / CE	\$2,700.00
<i>Encumbrances & Expenditures</i>	<i>\$0.00</i>
Ending Balance*	\$57,950.00

* Unlike operational funding, the "Special Issues" funds are a separate line item and do not lapse with the fiscal year.

Information Technology (IT)

The Board works diligently to keep pace with the changing needs presented, and advantages offered through technological innovation.

- Field investigators have transitioned to using laptop computers to maximize their productivity and resource utilization. They now minimize downtime while waiting for court appearances and decrease paperwork by documenting information during interviews with licensees.
- Board staff continues to work with the web-based licensure database, CAVU. Staff are completing the transition of adding all licensees and certificate holders on the system and continuing to work out issues to make the system effective for staff and the public to access licensure and certificate holder status information. Advanced practice nurse data is now included in the CAVU system.
- On-line renewal was implemented for the RN renewal period of 2005-2007. Approximately 40% of the 145,000 licensees renewed on-line which enabled the licensees to renew their licenses in a matter of minutes.

Personnel

- The Board maintained a staff of fifty-six employees during this fiscal year, with 3 separations, 3 internal reassignments, and 6 new hires/transfers from other state agencies.
- Two administrative support positions (one vacant and one filled) were transferred from the Administrative Unit to the Operational Units to facilitate more efficient use of existing resources. The vacant position was reclassified into an Adjudication Coordinator position within the Disciplinary Unit to allow that unit to manage the increasing number of disciplinary actions imposed by the Board. The filled position, along with an additional administrative support person from the Disciplinary Unit, was transferred to the Nurse Education, Licensure, and Nurse Practice Unit to address the increased workload in that area. (See Appendix A for a roster of Board employees and their positions.)

Communications

Throughout the year, the Board worked to inform the public, licensees, certificate holders, and other interested parties of the laws and rules governing practice, changes to these laws and rules, and other issues regulating nursing practice. The Board also provided information to employers regarding regulations, standards, and disciplinary actions. The Board relies on personal interaction; written materials, *Momentum*, and the use of technologies such as e-mail, a web page, and a list serve news service. All Board publications are available on the Board web site at www.nursing.ohio.gov.

- Board members and staff participated in a number of continuing education sessions. Topics included law and rule updates, advanced practice, impairment, discipline monitoring, Alternative Program for Chemical Dependency, and the Practice Intervention & Improvement Program.
- The Board issued *Momentum*, its official publication, on a quarterly basis to holders of active licenses or certificates, as well as major employers, approximately 190,000 individuals.

- A new brochure was developed, Scopes of Practice for RNs and LPNs.
- The following brochures and booklets were updated:
 - Facts About the Ohio Board of Nursing
 - Continuing Education Requirements for Licensed Nurses & Ohio Certified Dialysis Technicians
 - The Board of Nursing & The Rule Making Process
 - Standards of Practice for Dialysis Technicians
 - Practice Intervention & Improvement Program: An Alternative Approach to Disciplinary Action
 - The Alternative Program for Chemical Dependency
 - Nursing Law and Rule booklets
- The Board website was updated regularly and contains all written materials published by the Board. These updates include current electronic versions of brochures, disciplinary actions, Board Meeting materials, upcoming events, FAQs, downloadable forms, and proposed rule changes.
- The Board used an electronic mailing service to send out news and time sensitive email announcements that relate to licensees and certificate holders. There are currently around 5,700 subscribers to this e-mail list-serve.
- The Board maintained an ongoing liaison and/or working relationship with multiple state agencies, nursing groups, and other health care stakeholders. These relationships helped foster information sharing.
- The Board responded to an average of 35 public record requests each month with the majority of those requests being for information about licensees or certificate holders.

Regulatory and Legislative Action

Rule Review

The Board promulgated two new chapters of administrative rules that were effective on February 1, 2005. Both chapters respond to legislative initiatives that were included in the fiscal year 2004-2005 budget legislation (125 HB 95). The first chapter, 4723-25 includes rules adopted to govern the Nurse Education Grant Program. Under this program, the Board is authorized to make grants to nurse education programs that partner with health care facilities and others to develop proposals that expand the student capacity of the nurse education program. The second new chapter, 4723-26, contains rules relating to the Board's responsibility to certify community health workers. These individuals provide a range of services within the community, including the performance of limited nursing tasks and activities. In accordance with these rules, the Board is in the early stages of issuing certificates to these individuals, as well as approving community health worker training programs.

The Board also engaged in five-year review of several chapters of administrative rules, as required by section 119.032 of the Revised Code. The rules that were reviewed during the past fiscal year are Chapter 4723-16, Procedures for Adjudication; Chapter 4723-17, Role of Licensed Practical Nurse in Intravenous Therapy; Chapter 4723-21, Delegation in MR/DD County Board Facilities; and Chapter 4723-22, Delegation of Authority to Give

Oral and/or Topical Medications in ICFs/MR with Fifteen or Fewer Residents. This review was conducted both internally and with considerable input from the public. The review resulted in various changes and revisions in Chapters 4723-16 and 4723-17. Chapter 4723-21 and 4723-22 were both rescinded in their entirety as the subject of these rules is now addressed in rules adopted by the Department of MR/DD.

Legislative Action

The Board was active on several issues under consideration in the General Assembly that impacted the practice of nursing and/or operations of the Board. The most significant legislative involvement was in the context of the biennial budget bill, House Bill 66. This legislation contained two initiatives on which Board input was sought. The first issue relates to a change in the Nurse Education Assistance Loan Program, which is funded with Board licensee fees, and administered by the Board of Regents. Constituency groups sought changes in this program to expand the types of nursing students who would qualify for educational assistance.

The second issue incorporated in the budget legislation was the creation of a pilot program for the certification of medication aides. The Board is charged with developing and operating a fourteen-month pilot program utilizing these workers in nursing homes and residential care facilities. The statute assumes the program will expand statewide at the conclusion of the pilot program. Lastly, during budget deliberations, the Board was called upon to address the proposal to consolidate state regulatory boards.

Other bills on which the Board was active include Senate Bill 80 (125th GA), in which the term "advanced practice nurse" is added to section 4723.01 of the Revised Code and defined to mean a certified registered nurse anesthetist, clinical nurse specialist, certified nurse-midwife, and certified nurse practitioner. The Board also participated in discussions relating to Senate Bill 147 (125th GA), which would have afforded limited prescriptive authority to physician assistants and made other changes in their licensure and regulation. A final measure followed by the Board in the previous General Assembly was House Bill 188. This bill would make changes to the Ohio Dietetics Board. Both of these latter measures have been re-introduced in the 126th General Assembly and remain of interest to the Board of Nursing.

NURSING PRACTICE AND EDUCATION

Nursing Practice

The strategic initiative of the nursing practice area is to promote public safety according to established regulatory standards by responding to questions regarding the practice of nursing based on relevant law and rules governing the practice of nursing, providing public information and education, and assisting in the development of legislation and regulation. Nursing practice, for the purposes of the Board, encompasses the practice of registered and practical nurses, dialysis technicians, advanced practice nursing, and community health workers.

- The Advisory Group on Nursing Practice provides input to the Board regarding nursing education and practice issues as they have an impact on the law and rules regulating the practice of nursing. These issues include differentiated practice,

congruence between nursing education and practice, and articulation within the various nursing education programs. The group continued to review proposed curriculum changes and proposals for new nursing education programs to determine compliance with Board rules.

- Board staff answered over 4,500 telephone calls and responded to approximately 1,000 e-mails dealing with nursing and dialysis practice. Practice issues brought to the attention of the Board centered around the clarification of the role of the LPN in performing intravenous therapy, patient assessment, the role of the RN in directing care provided by the LPN, and the delegation of nursing tasks to unlicensed assistive personnel.

Nursing Education

The strategic initiative of the nursing education area is that to promote public safety and the safe practice of nursing, pre-licensure education program approval processes are implemented in a timely and effective manner to assure that new and established nursing education programs preparing beginning level nurses meet and maintain academic and clinical practice standards.

- The Board granted Conditional Approval (new program approval status) to the following new nursing education programs:
 - Columbiana County Career & Technical Center School of Practical Nursing, Lisbon, July 2004
 - Aultman College of Nursing & Health Sciences, Associate Degree Nursing Program, Canton, September 2004
 - Robert T. White School of Practical Nursing, Alliance, September 2004
 - Xavier University Masters in Nursing: Direct Entry as a Second Degree, Cincinnati, March, 2005
- Sixty-four (64) registered nursing programs, and fifty-three (53) practical nursing education programs exist in Ohio. A list of all approved pre-licensure nursing education programs is available on the Board web site.
- Eighteen (18) proposed new nursing education programs are in the application process.
- The Board regularly surveys pre-licensure nursing education programs and approves those that comply with standards set forth in OAC Chapter 4723-5. Programs are scheduled for visits every five years, with a portion visited each year. Of the 117 nursing education programs in Ohio, twenty-five (25) were visited in this state fiscal year by a Board representative with the results of the survey visit used by Board members to determine the programs' approval status.
- The Board reviewed the performance of students on the licensure examination by educational program. Eight programs reported a 100% pass rate for the calendar year 2004. Board standards require that a program must have a passing rate that is at or above 95% of the national pass rate for that year. Eighty percent of Ohio programs met or exceeded the national standard. Those programs that do not meet the standard must address the passing rate in writing. If the passing rate for the program does not meet the standard for a second consecutive year, a plan for

corrective action must be submitted to the Board, and if a third poor year occurs, a focused survey visit by a Board representative is conducted. One program was visited for consecutive years of poor passing rates, however, that program has made a remarkable improvement and now exceeds the benchmark standard. Ohio's passing percentage rates were significantly better than those of the other 50 states and U.S. Territories. A comparison chart is found below:

National and State NCLEX® Passing Percentage for First Time Candidates 2004 and Ohio “95% of National Average” Benchmark

Registered Nurses		Practical Nurses	
Ohio:	88.87%	Ohio:	94.11%
National:	85.26%	National:	89.36%
95% of Nat Avg:	81.0%	95% of Nat. Avg:	84.9%

- Annual reports were received from all the nursing education programs regulated by the Board. In these reports, programs document continued compliance with Board standards and also report enrollment statistics. The data collected is from all programs on Full or Provisional Approval. Programs on Conditional Approval status, that is, programs that are new and have not yet graduated their first class, are not included in this report.

Table 1. Nursing Education Program, Enrollment, and Graduation

Nursing Education Program Types	Nursing Education Program Enrollment Statistics	Program Graduates
Certificate in Professional Nursing 2002 . . . 1 2003 . . . 1 2004 . . . 1	Certificate in Professional Nursing 1995 . . . 94 2002 . . . 48 2003 . . . 56 2004 . . . 96	Certificate in Professional Nursing 2002 . . . 27 2003 . . . 19 2004 . . . 34
Baccalaureate 2002 . . . 23 2003 . . . 23 2004 . . . 23	Baccalaureate 1995 . . . 7,201 2002 . . . 4,681 2003 . . . 4,536 2004 . . . 6,500	Baccalaureate 2002 . . . 1411 2003 . . . 1333 2004 . . . 1688
Diploma 2002 . . . 8 2003 . . . 6 2004 . . . 6	Diploma 1995 . . . 1,691 2002 . . . 756 2003 . . . 796 2004 . . . 1,035	Diploma 2002 . . . 174 2003 . . . 236 2004 . . . 320
Associate Degree 2002 . . . 29 2003 . . . 29 2004 . . . 29	Associate Degree 1995 . . . 5,945 2002 . . . 4,445 2003 . . . 5,301 2004 . . . 6,184	Associate Degree 2002 . . . 1752 2003 . . . 1861 2004 . . . 2,216
Practical – High School 2002 . . . 4 2003 . . . 4	Practical – High School 1995 . . . 128 2002 . . . 123	Practical – High School 2002 . . . 47 2003 . . . 57

	2003 . . . 132 2004 . . . 339	2004 . . . 147
Practical – Adult 2002 . . . 43 2003 . . . 45 2004 . . . 47	Practical – Adult 1995 . . . 2186 2002 . . . 3023 2003 . . . 3340 2004 . . . 3815	Practical – Adult 2002 . . . 1751 2003 . . . 2115 2004 . . . 2406

Additional Annual Report Data

In the interest of serving a public need to collect data related to the supply-side of the nursing shortage in Ohio, additional data was collected for the 2003 and 2004 academic year regarding program capacity and intent to expand, or verification that the program had accomplished an expansion. Challenges faced by programs increasing capacity primarily involve adequate numbers of qualified faculty, and student placement in clinical facilities, with many programs competing for placement space. A summary of significant data follows:

Program Capacity: Ninety-seven percent of all available “seats” in Ohio RN programs are filled, which is an increase from 94% filled in 2003. This is an accommodation of an additional 534 students. Ninety-eight percent of all available “seats” in Ohio LPN programs are filled, which is also an increase from 2003, and an accommodation of an additional 103 students.

Expansion of Program Capacity with Existing Resources: Sixteen RN programs, or 27%, indicated they would be able to increase the numbers of students in their programs with existing resources and plan to do so. Forty-four programs, or 80%, indicated they have already expanded. Nine PN programs, or 19%, indicated they would be able to increase the numbers of students in their programs with existing resources.

Expansion Accomplished: Forty-four (44) RN programs, or 80%, indicated they had already expanded their programs, while the remaining eleven (11), or 20%, had not done so. Of the programs that had already expanded, the following needs and challenges were faced:

- 82% required additional faculty;
- 71% faced challenges identifying the additional clinical placements;
- 66% required additional preceptors; and
- 41% required additional space and/or equipment.

These RN programs indicated they expanded their programs by a total of 1,242 seats as follows: Associate Degree - 589; Diploma – 39; BSN – 614.

Thirty PN programs, or 63%, indicated they had already expanded their programs, by a total of 967 seats. The remaining 18, or 38%, had not done so. Of the programs that had already expanded, the following needs and challenges were faced:

- 94% required additional faculty;
- 66% required additional space and/or equipment;

- 57% required additional preceptors; and
- 45% faced challenges identifying the additional clinical placements for students.

The following points are summarized from the 2003-2004 Annual Report data:

Professional (Registered Nursing) Programs

- Professional nursing education programs are, for practical purposes, “full” to capacity. Statewide, only 3% of the available seats are vacant. It should be noted that enrollment numbers are usually fluid, because of the numbers of students entering and leaving at any given time.
- This year, baccalaureate programs were as “full” as other types of programs, to 98.6% of capacity.
- The largest numbers of applicants denied admission due to space constraints occurred in both larger cities and programs and in rural areas and smaller programs. The most dramatic space constraints compared to the number of individuals seeking entrance were at public schools versus private.
- Eighty percent of RN programs have already expanded their programs, by a total of 1,242 seats. This figure is likely to include those seats increased over the past academic year as well.
- Challenges faced during expansion, in order, included the need for additional faculty, additional clinical placements, and finally, additional preceptors. This pattern is the same as that which appeared in 2003 for RN programs.
- RN programs lost a total of sixty (60) faculty during the 2003-2004 academic year.
- It is anticipated that 133 faculty in RN programs will retire in the next five years.
- The spread in the numbers of clinical clock hours between those programs with the fewest and those programs with the greatest is 1,105 hours. The program with the fewest hours reported 533 hours in one diploma program; the program with the greatest number of hours was a baccalaureate degree program reporting 1,638 hours.
- Both associate degree and BSN programs are exploring distance-learning methodologies.
- Six programs reported operating accelerated tracks for individuals with baccalaureate degrees in other fields.

Practical Nursing Programs

- Practical nursing education programs are also, for practical purposes, “full” to capacity. Statewide, only 2% of the available seats are vacant. Again, it should be noted that enrollment numbers are usually fluid, because of the numbers of students entering and leaving at any given time.
- The largest numbers of applicants denied admission due to space constraints occurred in programs that were generally larger, regardless of the size of the city, and were public institutions versus private.
- Sixty-three percent of PN programs have already expanded their programs, by a total of 967 seats.
- Challenges faced during expansion, in order, included the need for additional space and/or equipment, additional faculty, and additional preceptors. Finally, finding clinical placements was a challenge faced by fewer than half the programs expanding (45%).

- PN programs lost thirty-six (36) faculty during the 2003-2004 academic year.
- It is anticipated that forty-one (41) faculty in PN programs will retire in the next 5 years.
- The spread in the numbers of clinical hours between those programs with the fewest and those programs with the greatest is 997 hours. The program with the fewest hours reported 273 hours; the program with the greatest number of hours reported 1,270 hours.
- Three (3) PN programs are exploring distance-learning methodologies.

Continuing Education

The strategic initiative for the continuing education area is to promote public safety and the safe practice of nursing by assuring nurses, dialysis technicians, certified community health workers maintain competency based on continuing education standards set forth in the nursing law and rules.

- The auditing process was changed to be closer to the actual licensing period. Consequently, licensed practical nurses were audited for the time frame of September 1, 2000 through August 31, 2002 and registered nurses were audited for the licensing period of September 1, 2001 and August 31, 2003 during this fiscal year. Additionally, licensed practical nurses were audited for the time frame of September 1, 2002 through August 31, 2004 in the fall after the renewal of their licenses.
- To assure compliance with the continuing education requirements, all licensed practical nurses (nearly 45,000) were expected to provide verification of completion of these requirements. A total of 3,141 licensed practical nurses were actually audited for the licensing period of September 1, 2000 through August 31, 2002, prior to the renewal of their license. At the end of the renewal period, 132 licensed practical nurses had not completed their audit and were ineligible to renew. Because of a shortage of health care workers, every effort was made to contact these nurses.
- A total of 3,962 registered nurses were actually audited as well for the licensing period of September 1, 2001 through August 31, 2003 in the late autumn following renewal of their license in 2003. This audit done directly after the license renewal timeframe to allow the nurse time to “make up” the continuing education if she or he did not have the hours completed. There are 228 who have yet to complete that audit and, as a result, they did not receive renewal applications for this current renewal time.
- A total of 4,729 licensed practical nurses are in the current audit for the licensure period of September 1, 2002 through August 31, 2004. (This audit continues since the next renewal of LPN licenses is not until Spring of 2006.)
- On-line renewal allows for concurrent auditing of continuing education. We have begun auditing for the licensing period of September 1, 2003 through August 31, 2005.
- The Ohio Board of Nursing (OBN) Approvers of Continuing Education are reviewed by the Advisory Group on Continuing Education to determine

adherence to the OAC Chapter 14 and are ultimately approved or re-approved by the Board. Two OBN Approvers were re-approved and the one new Approver who was added and approved by the Board last year became inactive. A list of the Approvers is available on the Board's website.

- OBN-011-93 College of Nursing, University of Cincinnati - re-approved through February 2007
- OBN-008-92 Northwest State Community College – re-approved through February 2007

Licensure

The strategic initiative for this area is to promote public safety and the safe practice of nursing by assuring applicants are appropriately credentialed to practice and by providing an efficient and effective licensing and renewal process so that applicants are licensed as quickly as possible to enter or remain in the workforce.

Licensure Statistics the State Fiscal Year

Category of licensee or certificate holder	Number as of July 1, 2004	Number as of June 30, 2005
Registered nurse	146,623	151,136
Licensed practical nurse	42,092	44,790
Certificate of authority holders	6,208	6692
Certificates to prescribe	3,215	3748
RNs licensed by examination		4226
LPNs licensed by examination		2655
RNs licensed by endorsement		1953
LPNs licensed by endorsement		350

- The Board, by phone or computer, provides verification of licensure in good standing. The original date of licensure was added to the verification system to better serve those seeking to verify licenses.
- Licensure information for Ohio licensees was submitted to the National Council of State Boards of Nursing database (NURSYS). Nurses who leave Ohio and seek licensure elsewhere have their Ohio licenses verified through NURSYS.
- The Board implemented Criminal Record Checks for applicants who enter a pre-licensure nursing education program on or after June 1, 2003.
- The renewal unit assumed partial responsibility for renewal of dialysis technician certificates and Certificate of Authority licenses.

**CERTIFICATION:
ADVANCED PRACTICE, DIALYSIS TECHNICIANS, AND COMMUNITY
HEALTH WORKERS**

The strategic initiative of this area is to promote public safety by assuring advanced practice nurses, advanced practice nurses with certificates to prescribe, dialysis technicians, and community health workers meet statutory and regulatory requirements to be certified to practice in Ohio,

Advanced Practice

The Board issues and renews certificates of authority to practice nursing as a certified registered nurse anesthetist, clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner and approves national certifying organizations for examination and certification of these nurses. The Board also issues and renews certificates to prescribe to qualified advanced practice nurses.

- The Board continued to issue certificates to prescribe or externship certificates to qualified applicants. The Board certifies 2,666 prescribers.
- As part of the process for issuing certificates of authority, the Board re-approved eight national certifying organizations for purposes of approving nurses in advanced practice. A list of organizations that meet Board criteria can be found on the Board web site.
- The Committee on Prescriptive Governance, made up of three nurses in advanced practice, three physicians, a clinical pharmacist, and representatives from the boards of nursing, medicine, and pharmacy, met regularly to review and refine the formulary used by nurses with certificates to prescribe.
- The formulary for prescribers in advanced practice is available on the Board website.
- Responses were provided to numerous questions concerning prescriptive authority for advanced practice nurses. Education and consultation was provided to APNs, physicians, pharmacists, government entities such as the State Medical Board and State Board of Pharmacy, employers, consumers, and others.
- Board staff worked collaboratively with the Ohio State Medical Board and the Ohio Board of Pharmacy regarding advanced practice and prescribing issues, and with the Department of Jobs and Family Services and Department of Mental Health regarding advanced practice nursing and reimbursement issues.
- The liaison role with statewide advanced practice association was continued with Board staff serving as a resource regarding law, rules, practice requirements, and other relevant advanced practice information.

Dialysis Technicians

The Board is authorized to issue certificates to qualified dialysis technicians and to adopt rules setting forth approval processes for dialysis technician training programs and testing organizations. Individuals providing dialysis care as defined in statute were required to hold a certificate to practice issued by the Board.

STATISTICS—As of June 30, 2004

Type of certificate (Current)	Number of certificate holders
Ohio certified dialysis technicians	1,087
Temporary certificate 1	313
Temporary certificate 2	42
Temporary certificate 3	2

- In Ohio, there are twenty-seven (27) Board approved dialysis technician training programs that are re-approved every two years. A list of all approved programs is available on the Board web site.
- The Board re-approved two national testing organizations that provide certification for dialysis technicians.
- The Advisory Group on Dialysis is comprised of four dialysis technicians, a registered nurse who cares for patients receiving dialysis, a physician who specializes in nephrology, an administrator of a dialysis center, a dialysis patient, a representative from the Ohio Hospital Association, and a representative from the End Stage Renal Disease network. The group is scheduled to meet five times per year. The group reviewed the rules for dialysis technicians and made recommendations to the Board for revisions to OAC Chapter 4723-23 as part of the five-year rule review process. The group continues to discuss issues related to the practice of the dialysis technician, as well as the RN and the LPN who work in dialysis.

Community Health Workers

The law regulating the practice of the Board Certified Community Health Worker became effective February 1, 2005. The Board issued eight certificates to qualified applicants between February 1, 2005 and June 30, 2005. There were no training programs approved by the Board prior to July 1, 2005.

DISCIPLINARY UNIT

The strategic initiative of the Disciplinary Unit is to promote public safety and the safe practice of nursing by providing timely and effective investigatory and adjudication processes while preserving the individual's right of due process under the law.

- A staff of eight enforcement agents investigated all complaints. A staff of six adjudication coordinators was responsible for complaint intake review, review of investigations, and disciplinary actions.
- During the time frame covered by this report, the Board received over 3,700 complaints. This is an increase from the over 2,500 received in 2004.
- The number of disciplinary actions also increased. During fiscal year 2003, the Board entered into 237 Consent Agreements, and held 65 Adjudications. During fiscal year 2004, the Board entered into 270 Consent Agreements, and held 98 Adjudications. For this fiscal year, the Board entered into 437 Consent Agreements, and held 100 Adjudications.
- All Board actions were reported to the two national disciplinary databanks and a federal agency.
- Other accomplishments to streamline the disciplinary processes were:
 - Revised the complaint protocol and case priority system;
 - Developed and implemented a disciplinary protocol system;
 - Developed a brochure regarding the new HIPPA legislation;
 - Revised templates for Consent Agreements and developed templates for Board Orders; and
 - Networked with law enforcement and other agencies throughout the state.

Disciplinary Statistics for SFY 2005

Complaints

Type of complaint	Received '04	Received '05
Action Taken in Another State / Jurisdiction	119	135
APN Practice Issues	1	15
Community Health Worker	0	4
Criminal	145	176
Default / Child Support	8	17
Dialysis Applicant	16	31
Drugs / Alcohol	661	798
Endorsement Applicant	167	195
Fraud (Medicare/Medicaid)	25	27
Imposter / Never Licensed	23	34
Invalid License (lapsed / inactive)	80	159
Miscellaneous	192	304
NCLEX® Applicant	173	518
Noncompliance	169	186
Patient Abuse	84	141
Practice	609	783
Renewal Applicant	108	178
TOTAL	2,580	3,701

Adjudications

Type of action taken	Actions '04	Actions '05
Adjudications	98	100
Adjudications/Perm Voluntary Surrender	59	48
Consent Agreement	270	437
Notice of Opportunity	125	142
Immediate suspension	76	102
Immediate and Automatic	0	1
Summary suspension	6	14
Automatic suspension	43	38
Suspension without stay	56	131
Stayed suspension	52	239
Revocation	1	1
Permanent revocation	125	99
Reprimand/ Fine	34	57
Permanent withdrawal of NCLEX Application	4	1
Permanent withdrawal of Endorsement Application	12	4
Permanent withdrawal of Dialysis Certificate	2	0
Non-Permanent withdrawal of NCLEX Application	4	5
Non-Permanent withdrawal of Endorse Application	7	4
Non-Permanent withdrawal of Dialysis Certification Application	1	0
Default Child Support	2	9

MONITORING

The strategic initiative of the Monitoring Unit is to promote public protection by providing alternative chemical dependency and practice programs in lieu of discipline and by providing efficient and effective monitoring to determine post-discipline and alternative chemical dependency and practice program compliance,

Post -Disciplinary Monitoring

Monitoring has continued to increase significantly because of the increased numbers of disciplinary actions taken by the Board.

	2005	2004
Active Monitoring Cases as of 6/30/05	644	310
Cases added in FY 2005 resulting from consent agreements	435	255
Cases added in FY 2005 resulting from Board adjudication orders	44	26
Cases in which monitoring ceased in FY 2005, resulting from the issuance of an Automatic Suspension and Notice of Opportunity for Hearing	39	34
Cases in which monitoring ceased in FY 2005, resulting from the Board's release of the licensee/ certificate holder from the terms and conditions of their Board adjudication order/ consent agreement	65	14
Cases in which monitoring ceased in FY 2005, resulting from individual permanent licensure surrenders	17	7
Modifications in consent agreement authorized by the Board	6	7

Alternative Program for Chemical Dependency (AP)

Monitoring Agents monitor participants' compliance with their Alternative Program agreements, which sets minimum requirements necessary for the Board to determine actively recovering individuals' abilities to practice nursing in accordance with the statutes and rules regulating nursing practice.

Alternative Program For Chemical Dependency Statistics

Case description	Number
Applications mailed	133
Applications returned	75
Cases active as of 6-30-05	140
Admissions in FY 2005	43
Successful completions	56
Ineligible for admission	39
Terminations	7 (3 temporary suspensions)

Practice Intervention & Improvement Program (PIIP)

Monitoring Agents monitor participants' compliance with their Participatory Agreement, which sets minimum requirements for practice remediation, including both education and worksite monitoring.

Practice Intervention & Improvement Program Statistics

Case description	Number
Referrals	31
Cases admitted	11
Cases active as of 6-30-05	24
Successful completions	24
Refused admission/ineligible	6
Failed to complete terms of program agreement	1

APPENDIX A

BOARD of NURSING STAFF

(As of June 30, 2005)

ADMINISTRATION UNIT

Executive Director	John Brion, RN, MS
Associate Executive Director	Betsy Houchen, RN, MS, JD
Executive Assistant/Supervisor	Diana Hisle
Customer Service/Program Assistant	Alta Mowbray
Customer Service/Program Assistant	Carol Polanski
Human Resources Manager	Stacy Thacker
Legislative/Regulatory Specialist	Cynthia Snyder, JD
Operations/IT Manager	Eric Mays
Network Administrator	Cary Dachtyl
Fiscal Manager	Rosemary Booker
Fiscal Lead Worker	Kathy King
Account Clerk	Katha Bloomer
Account Clerk	Ella Vinson

EDUCATION, LICENSURE AND NURSING PRACTICE UNIT

Unit Manager	Norma Selders, RN, MS
APN Program Consultant	Susan Milne, RN, MSN, JD
Practice/Dialysis Technician Consultant	Nancy Manns, RN, MS
Nursing Education Consultant	Jackie Loversidge, RNC, MS
Unit Secretary	Ebony Turner
Unit Secretary	Rose Ferguson
Unit Administrative Assistant	Toni Nottturniano
Unit Administrative Assistant	Erica Davis
Unit Administrative Assistant	Rosa Smith
Examination Supervisor	Karen Scott
Licensure Clerk	Renata Harris
Licensure Clerk	Cindi Stine
Licensure Clerk	Angela White
Renewal Supervisor	Brenda Murphy
Licensure Clerk	Jai Carrillo
Licensure Clerk	Cheryl Johnson

DISCIPLINARY UNIT

Unit Manager	Lisa Ferguson-Ramos, RN, JD
Administrative Assistant/Supervisor	Debbie Fulk
Unit Secretary	Peggy Carrier
Unit Secretary	Tiffany Swartz
Adjudication Coordinator	Emily Brown, JD
Adjudication Coordinator	Jodi Crowe, JD
Adjudication Coordinator	Tom Dilling, JD
Adjudication Coordinator	Holly R. Fischer, JD
Adjudication Coordinator	Terry Tran, JD, RN
Adjudication Coordinator	Phalyn Williams, JD, MPA
Enforcement Agent	Timothy Fulk
Compliance Agent	Dennis Corrigan, RN
Compliance Agent	Diane Helferich, RN, MHSA
Compliance Agent	Bette Horst, RN, MHSA
Compliance Agent	Melissa Knauss, BSN
Compliance Agent	Tursia Lee Knowles, BSN, MSA
Compliance Agent	Amy Sala, BSN
Compliance Agent	Brian Torrence, RN

MONITORING UNIT

Unit Manager	Lisa Emrich, RN, MSN
Unit Secretary	Senita Feagin
Unit Administrative Assistant	Melissa Malone
Monitoring Agent	Susan Mann-Orahood, RN
Alternative Program Case Manager	Susan Daum, RN, MSN
Alternative Program Case Manager	Diana Harris, BSN, CD
Monitoring Agent	Monique Holokai-Kane, RN
Monitoring Agent	Marion Wilson, RN
Monitoring Agent	Richard Young, RN, MBA