



Ohio Board of Nursing

www.nursing.ohio.gov

17 S. High Street, Suite 660 • Columbus, Ohio 43215-3466 • 614-466-3947

STRATEGIC PLAN 2021 – 2022

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.

When the public needs nursing care they want to be assured that the nurse has a certain level of preparation, has met stringent criteria to practice, and will provide competent care. The public expects that safe nursing care will be delivered, and that unsafe or incompetent practice will be addressed.

The Ohio Board of Nursing (Board) provides these assurances by approving nursing education programs, issuing licenses and certificates to those who meet certain criteria, establishing and interpreting the Nurse Practice Act and administrative rules, and disciplining licensees and certificate holders who violate the law and rules. Further, the Board promotes patient safety by providing education and publishing information on the Nurse Practice Act and the administrative rules, maintaining a web site, working collaboratively with various groups for patient safety initiatives, and promoting measures to establish a workforce for safe patient care. Nursing practice, for the purposes of the Board, encompasses the practice of nursing, advanced practice registered nursing, dialysis technicians, certified community health workers, and medication aides.

The Strategic Plan sets forth Strategic Initiatives, Goals/Objectives, and Operational Outcomes as a means to measure how the Board fulfills its mission. It serves as a guideline and “road map” for the Board members and staff and may be altered or changed at any time based on the Board’s discretion.

STRATEGIC INITIATIVES

To promote public safety and the safe practice of nursing, the Board has established the following strategic initiatives.

1. Assure licensees meet regulatory requirements to practice in Ohio while maintaining an efficient and effective system to license applicants as quickly as possible to enter or remain in the workforce.
2. Efficiently handle complaints, investigations, and adjudications to safeguard the public and, in cases involving substance use disorder or practice issues, provide alternative to discipline programs, if determined appropriate.
3. Approve pre-licensure education programs to assure the programs maintain academic and clinical standards for the preparation of entry-level nurses.
4. Assure licensees maintain competency based on continuing education standards set forth in the Nurse Practice Act and administrative rules.
5. Address pertinent regulatory issues for licensees and provide greater clarity about the requirements to those regulated by the Board and to the public.
6. Implement technological systems and innovative regulatory programs to increase organizational efficiency and use of resources.

ORGANIZATIONAL GOALS/OBJECTIVES

The goals/objectives provide a means to implement the strategic initiatives. The Board has established the following goals/objectives

Objectives

Address pertinent issues and provide greater clarity to those regulated by the Board and the public by reviewing and proposing revisions to the Nurse Practice Act and administrative rules, as needed. Work with other boards to address issues that impact the work of licensees and certificate holders and establish Joint Board Statements, as needed.

Promote patient safety through collaboration with others.

Continue to work with the Ohio Department of Higher Education (ODHE) and legislators to maximize the use of the nurse educator component of the Nurse Education Assistance Program (NEALP) to combat the nursing/nurse faculty shortage.

Maximize the potential for grant awards through the Nurse Education Grant Program (NEGP) to increase the nursing student enrollment capacity of nursing education programs.

Continue the Patient Safety Initiative to address patient safety issues related to practice breakdown by using employer remediation, PIIP, TERCAP, and Just Culture.

Continue to collect workforce data and make the data available to the public.

OUTCOME MEASURES

The outcome measures provide a means to evaluate the daily operations of the Board. The Board has established the following outcome measures for each program/function of the Board.

Program/Function: Education

Outcome Measures

Survey visits will be conducted for 100% of all programs that do not have NCLEX pass rates at or above 95% of the national average for a period of three consecutive years.

95% of five-year re-approval survey visits will be conducted within 180 days of the survey due date.

100% of Survey Reports and/or the program responses to the Survey Reports resulting from pre-scheduled five-year approval surveys will be presented to the Board within 60 days of either the Board's submission of the Survey Report that indicates all rules were met, or the Board's receipt of the program response to the Survey Report, whichever is the later.

100% of programs and proposed programs will be informed of the opportunity to provide written feedback directly to the Board concerning the proposal review and/or the survey process.

100% of Survey Reports will be submitted to the program no later than 20 business days from last day of the corresponding visit.

Communicate with nursing education programs to provide updates and pertinent information.

95% of nursing education and training program proposals and applications will be acknowledged by email within 2 business days of proposal/application receipt.

90% of nursing education program proposals will be reviewed and completed within 45 days of receipt.

90% of training program applications will be reviewed and completed within 45 days of receipt.

Program/Function: Licensure

Outcome Measures

95% of RN/LPN exam eligible applicants will be made exam eligible within 7-10 business days upon receipt of a completed application and required documents; applications in "in review" status will be reviewed every 7-10 business days to determine if requested documents were submitted in order to make the applicant exam eligible.

95% of APRN applicants for initial licensure will be licensed within 7-10 business days upon receipt of a completed application and required documents; applications in "in review" status will be reviewed every 7-10 business days to determine if requested documents were submitted in order to issue the license. National re-certifications will be processed within 3-5 business days of receipt.

95% of RN/LPN/APRN applicants for reciprocity will be issued a temporary permit within 3-5 business days of receipt of verification of active, unrestricted license in another jurisdiction and issued a reciprocity license within 7-10 business days upon receipt of a completed application and required documents. Applications in "in review" status will be reviewed every 7-10 business days to determine if the criminal records checks were submitted in order to issue the license.

95% of RN/LPN/APRN applicants for reinstatement or reactivation will be reinstated within 5-7 business days upon receipt of a completed application and required documents; applications in "in review" status will be reviewed every 7-10 business days to determine if the criminal records checks were submitted in order to issue the license.

95% of DT, CHW, and Medication Aide applicants will be issued a certificate within 5-7 business days from receipt of a completed application and required documents; applications in "in review" status will be reviewed every 7-10 business days to determine if requested documents have been submitted in order to issue the certificate

95% of the Service Requests will be completed within 5 business days of the service request and 5-7 business days during peak licensure months.

CE Audits: Determine the most efficient and effective manner of conducting CE audits.

Calls & Emails: 95% of calls and emails will be responded to within 3 business days and 5 business days during peak licensure months.

Renewal Planning: Establish annual timeline and communication plan and continue to communications via direct email to licensees regarding issues involving various aspects of renewal.

Military Applications: Monitor receipt of applications daily to prioritize licensure and certification processes for veterans, service members, and spouses.

Continue to re-architect licensing processes completed through the Ohio eLicense system to improve the efficiency and quality of ongoing license services.

Review administrative rules to identify modifications for efficiency while maintaining public protection.

Continue to implement messaging to applicants and licensees.

Program/Function: Practice

Outcome Measures
Develop Interpretive Guidelines (IGs) based on frequently asked questions or significant issues as directed by the Board.
Provide additional guidance to licensees and certificate holders through each <i>Momentum</i> and the development of written information for Frequently Asked Questions (FAQs).
Respond to 85% of the questions regarding the applicable law and rules within 4 business days of receipt.

Program/Function: Complaints and Investigations

(For purposes of the Strategic Plan, processed means evaluated, prioritized, letters issued, and data entered into the database. Disposition means ready for Board action.)

Outcome Measures
95% of complaints will be triaged within one business day from receipt and 100% will be triaged within 2 business days from receipt.
75% of complaints will be processed for disposition within 9 months from receipt.
95% of Priority I complaints will be assigned within 1 business day from receipt.
90% of Priority II complaints will be processed within 5 business days from receipt.
90% of Priority III and IV complaints will be processed with 10 business days from receipt.
85% of the complaints based upon a licensure application will be processed within 5 business days from receipt.
95% of Priority I complaints will have a completed investigation within 5 business days from receipt of subpoenaed patient or other records necessary to conduct the investigation.
90% of Priority II complaints with evidence that continued practice is a danger to the public will have contact initiated with the licensee within 2 business days.
90% of eligible Priority III complaints will have a PVR letter issued within 120 days of assignment.
95% of Priority IV complaints will be investigated and submitted for case review or closed within 120 days from receipt.
95% of advisory letters will be issued within 5 business days of assignment.
75% of eligible complaints will have a completed TERCAP form.
95% of completed applications that require a compliance review are processed within 3-5 business days of receipt or 5-10 business days during peak licensure months.
A written summary is provided to the Supervising Member for case review within 7 business days of receipt of all information for 95% of license application cases.

Program/Function: Board Actions and Adjudications

Outcome Measures
If the evidence warrants a summary suspension, the summary suspension will be prepared for review within five business days of the evidence being reviewed by the Compliance Manager/Chief Legal Counsel and the Notice will be issued within one business day after approval of the action by the President and Executive Director, and review by the AAG.
95% of Priority II applicant, renewal, and reinstatement complaints assigned for Consent Agreement prior to the first day of the month of the scheduled Board meeting will have an offer of a Consent Agreement (CA) mailed prior to the next Board meeting.
95% of Priority II complaints with a completed criminal matter received prior to the first day of the month of the scheduled Board meeting will have a Notice issued at the next Board meeting. (Completed means certified documents have been received.)
95% of Priority II completed practice complaints will have a Notice issued within ninety days of assignment.
75% of eligible post-notice cases will have an offer of a Consent Agreement within 180 days from the time that the Notice is issued.
Meet periodically with AAG staff to review hearing processes and collaboration for preparation and management of hearing cases to assure hearing cases are heard in a timely manner.
Continue to analyze the Compliance Unit and disciplinary processes to assure appropriate distribution of responsibilities, timeliness of work, and efficient use of staff.
Streamline legal drafting and reduce human error by identifying and implementing technology that will perform automated modifications when drafting compliance documents.
Maintain compliance with the federal reporting requirements to the National Practitioner Data Bank (NPDB).
Provide training, including specialized programs in identifying and handling cases involving sexual assault and human trafficking victims as needed, for Compliance Unit investigators and monitoring agents.

Program/Function: Post-Discipline Monitoring

Outcome Measures
Within one month of receipt of evidence that licensees or certificate holders are noncompliant, 95% of the cases will be presented for monitoring case review.
95% of those meeting requirements for reinstatement prior to the first day of the month of the scheduled Board meeting will be assigned for proposed action prior to the next Board meeting.
Develop and implement processes to remain effective in monitoring licensees, while streamlining daily operations.

Program/Function: Alternative Programs

Outcome Measures
Eligibility will be determined within 30 days following the receipt of the completed application for 95% of the applicants for the Alternative Program for Substance Use Disorder (AP).
Conduct an annual audit of AP, including evaluation of outcomes.
Eligibility will be determined within 60 days for 100% of the applicants recommended for the Practice Intervention and Improvement Program (PIIP).
Conduct an annual audit of PIIP, including evaluation of outcomes.

Program/Function: Administrative Support

Outcome Measures
Monitor budgetary expenditures to fall between 95-100% of the total annual budget.
Maintain fiscal processes consistent with OBM/OAKS and Treasurer of State.
Direct all public record requests to the appropriate records custodian or legal counsel within one business day and provide a response for 100% of routine requests within 3 business days.
Post approved information to eNews and the website and send via social media within 1 business day of receipt by the IT staff, or immediately if necessary.
Each fiscal year establish a list of contracts and purchase orders to identify vendors, services rendered, associated costs, and for legal counsel review to assure the Board is meeting the requirements of new state directives.
Implement a yearly staff training schedule for ethics, workplace safety, EEO, public records, requests, etc.
Maintain 100% compliance in completing timely performance evaluations. Provide employee development resources for supervisors to discuss with employees during review conferences.
Maintain standards for responding to employee questions related to payroll, benefits, and other Human Resources issues.
Maintain Employee Committee (CARE) for employee morale, and to organize charitable activities.
Meet or exceed the annual 15% set-aside (approximately \$35,000) MBE vendor requirement by identifying the availability of MBE vendors for each purchase and continue to meet or exceed the 5% goal for EDGE.
Revise staff policies annually, or as needed and provide for staff review.
Annually re-organize and purge records for records management and retention and maintain an effective records management system.
Continue to work with NCSBN bringing forth new thoughts and ideas to excel in regulatory excellence