



**Nursing Care Quality Assurance Commission (NCQAC)
Meeting Agenda
Friday, January 13, 2023
8:30 AM- 5:00 PM**

Zoom registration:

<https://us02web.zoom.us/join/zoom/register/tZUvfugsrjorE9HY4I7DE--K1ZdM38VuQ0vr>

This is a virtual meeting, if you would like to participate in the virtual meeting and you don't have computer or phone access you may attend at:

Labor & Industries: 7273 Linderson Wy SW, Tumwater, WA 98501, Room S117.

Masks are required for in person attendees.

Commission Members:

Yvonne Strader, RN, BSN, BSPA, MHA, Chair
Helen Myrick, Public Member, Vice-Chair
Adam Canary, LPN, Secretary/Treasurer
Jonathan Alvarado ARNP, CRNA
Quiana Daniels, GCertHealthSc, BS, LPN
Ella B. Guilford, MSN, M.Ed., BSN, RN
Judy Loveless-Morris, PhD, Public Member
Joan Madayag, LPN
Ajay Mendoza, CNM
Dawn Morrell, RN, BSN, CCRN
MaiKia Moua, RN, BSN, MPH
Sharon Ness, RN
Emerisse Shen, RN, ARNP
Kimberly Tucker PhD, RN, CNE

Assistant Attorney General:

Sierra McWilliams, Assistant Attorney General

Staff:

Paula R. Meyer, MSN, RN, FRE, Executive Director
Chris Archuleta, Director, Operations
Gerianne Babbo, Ed.D, MN, RN, Director, Education
Shad Bell, Assistant Director, Operations
Amber Bielaski, MPH, Assistant Director, Licensing
Debbie Carlson, MSN, RN, CPM, Director, Practice
Mary Sue Gorski, PhD, RN, Director, Advanced Practice, Research and Policy
Karl Hoehn, JD, FRE, Assistant Director, Discipline – Legal
Grant Hulteen, Assistant Director, Discipline – Investigations and WHPS
Bethany Mauden, Administrative Assistant
Kathy Moisio, PhD, RN, Director, Nursing Assistant Programs
Catherine Woodard, Director, Discipline and WHPS

If you have questions regarding the agenda, please call the Nursing Care Quality Assurance Commission (NCQAC) office at 360-236-4713. Agenda items may be presented in a different order. If you wish to attend the meeting for a single item, contact our office at the number listed above and request a specific time scheduled for that item. If you have limited English language expertise, call 360-236-4713 before January 6, 2023.

This meeting is accessible to persons with disabilities. Special aids and services can be made available upon advance request. Advance request for special aids and services must be made no later than January 6, 2023. If you need assistance with special needs and services, please leave a message with your request at 1-800-525-0127 or, if calling from outside Washington State, call 360-236-4052. TDD may also be accessed by calling the TDD relay service at 711. If you need assistance due to a speech disability, Speech-to-Speech provides human voicers for people with difficulty being understood. The Washington State Speech to Speech toll free access number is 1-877-833-6341.

This meeting will be digitally recorded to assist in the production of accurate minutes. All recordings are public record. The minutes of this meeting will be posted on our website after they have been approved at the March 10, 2023, NCQAC meeting. For a copy of the actual recording, please contact the Public Disclosure Records Center (PDRC) at PDRC@doh.wa.gov.

If attending remotely, please mute your connection to minimize background noise during the meeting.

Smoking and vaping are prohibited at this meeting.

I. 8:30 AM Opening – Yvonne Strader, Chair – DISCUSSION/ACTION

II. Call to Order

- A. Introductions** – Ajay Mendoza, new member
- B. Order of the Agenda**
- C. Land Acknowledgement** – Jonathan Alvarado
- D. Announcements**

III. 8:40 AM Consent Agenda – DISCUSSION/ACTION

Consent Agenda items are considered routine and are approved with one single motion

A. Approval of Minutes

- 1. NCQAC Business Meeting
 - a. November 18, 2022
- 2. Advanced Practice Subcommittee
 - a. October 19, 2022
- 3. Discipline Subcommittee
 - a. August 23, 2022
- 4. Consistent Standards of Practice Subcommittee
 - a. October 7, 2022
- 5. Licensing Subcommittee
 - a. No minutes to approve
- 6. Research Subcommittee
 - a. October 17, 2022
- 7. Education Subcommittee –
 - a. November 22, 2022

III. Consent Agenda – DISCUSSION/ACTION, continued

B. National Council of State Boards of Nursing (NCSBN)

1. Research Agenda
2. Letter from the president, Jay Douglas

C. Performance Measures

1. Investigations
2. Legal
3. Washington Health Professional Services (WHPS)
4. Nursing Assistant Program Approval Panel (NAPAP)
5. Nursing Program Approval Panel (NPAP)

D. Licensing Report to the Governor's Office

E. Washington Center for Nursing/NCQAC monthly meetings

1. November 29, 2022

F. Out of State Travel Reports

1. NCSBN Leadership and Public Policy Conference, Jessilyn Dagum, Yvonne Strader - November 2-4, St. Augustine, FL

IV. 8:45 AM – 9:00 AM NCQAC Panel Decisions – DISCUSSION

The NCQAC delegates the authority as provided by law for certain decision to a panel of at least three members. A member of the NCQAC must chair panels. Pro tem members of NCQAC may serve as panel members. The following decisions are provided for information.

A. Nursing Program Approval Panel (NPAP)

1. November 17, 2022
2. December 1, 2022
3. Dec 12, 2022
4. December 15, 2022
5. January 5, 2022

B. Nursing Assistant Program Approval Panel (NAPAP)

1. November 14, 2022
2. December 12, 2022

V. 9:00 AM – 9:30 AM Chair Report – Yvonne Strader – DISCUSSION/ACTION

A. Search Committee

B. Joint Operating Agreement

C. Recruitment for new NCQAC and pro tem members

D. NCSBN midyear meeting, Seattle, March 28-30, 2023

E. Nominations Committee

VI. 9:30 AM – 10:00 AM Executive Director Report – Paula Meyer – DISCUSSION/ACTION

A. Budget Report – Adam Canary, Chris Archuleta

B. Strategic Plan Update

VI. Executive Director Report – Paula Meyer – DISCUSSION/ACTION, Continued

C. Rules Update – Jessilyn Dagum

D. HELMS Update

E. Statement on Simulation in Nursing Education

F. Procedure Updates – Chris Archuleta

1. J10.03 Travel Reservation Requests
2. H03.04 In and Out of State Travel Approval

G. Recruiting New Pro Tem Members

10:00 AM – 10:15 AM Break

VII. 10:15 AM – 10:45 AM Sub-committee Report – DISCUSSION/ACTION

A. Advanced Practice – Jonathan Alvarado, Chair

1. No report

B. Consistent Standards of Practice – Sharon Ness, Chair

1. Nursing Assistant Training Requirements/Deadlines Update

C. Discipline – Adam Canary, Chair

1. No report

D. Licensing – Dawn Morrell, Chair

1. No report

E. Research – Sharon Ness, Chair

1. Student Engagement Report

F. Education – Kimberly Tucker, Chair

1. No report

VIII. 10:45 AM – 11:30 AM Education – Dr. Gerianne Babbo, Dr. Kathy Moisio - DISCUSSION/ACTION

A. Nursing Education

1. Out of state nursing program approval for nurse technician eligibility
2. Resources for nurse educators
3. Clinical placement updates
4. Nursing education Governor's budget
5. Preceptorship Grant update/webpage

B. Nursing Assistant Update:

1. Common Curriculum
2. Testing
3. Rules

11:30 AM – 12:00 PM Lunch

IX. 12:00 PM – 1:00 PM Education Session

Diversity, Equity, Inclusion, and Accessibility: American Indian People – Tammy Cooper-Woodrich - DISCUSSION/ACTION

Tammy Cooper-Woodrich is a member of the Nooksack Indian Tribe and Tribal storyteller. She served on the Tribal Council and is a vocational counselor at the North Intertribal Vocational Rehabilitation Program. The presentation will demonstrate the power of storytelling in promoting diversity, equity, inclusion, and accessibility with American Indian people.

X. 1:00 PM – 1:15 PM Public Comment

This time allows for members of the public to present comments to the NCQAC. If the public has issues regarding disciplinary cases, please call 360-236-4713.

XI. 1:15 PM – 1:45 PM Washington Center for Nursing – Sofia Aragon - DISCUSSION/ACTION

Ms. Aragon provides an update on deliverables and actions from the Washington Center for Nursing. The Center for Nursing is the nursing workforce center and provides research and reports related to nursing, nursing education, supply and demand.

1:45 PM – 2:00 PM Break

XII. 2:00 PM – 2:30 PM Prescription Monitoring Program – Carly Bartz-Overman - DISCUSSION/ACTION

Ms. Bartz-Overman provides an update on the Prescription Monitoring Program (PMP). The Department of Health developed the PMP to identify prescribing patterns and assist prescribers in analyzing patient patterns.

XIII. 2:30 PM – 3:00 PM Disciplinary Timelines – Catherine Woodard, Karl Hoehn - DISCUSSION/ACTION

The disciplinary process is defined and enforced in the Uniform Disciplinary Act. Washington Administrative Code (WAC) defines the timelines for the phases of the process in WAC 246-14. Ms. Woodard and Mr. Hoehn describe the phases and time allowed per phase.

XIV. 3:15 PM – 3:45 PM Legislative Panel – Helen Myrick - DISCUSSION/ACTION

Ms. Myrick provides a report from the legislative panel on the NCQAC decision packages, bills filed and other legislative work.

A. Joint Letter to Sen. Patty Murray on Long Term Care funding

XV. 3:45 PM – 4:00 PM Meeting Evaluation

XVI. 4:00 PM Closing



**Nursing Care Quality Assurance Commission (NCQAC)
Meeting Minutes
November 18, 2022
8:30 AM- 5:00 PM**

**The meeting was held by Zoom. The recording can be accessed at
<https://us02web.zoom.us/join/join?secret=7273LindersonWySW,Tumwater,WA98501>**

**This was a virtual meeting. People could participate in the virtual meeting if they did not have computer
or phone access at:**

Labor & Industries: [7273 Linderson Wy SW, Tumwater, WA 98501](#), Room S117.

Commission Members:

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Joan Madayag, LPN
Judy Loveless-Morris, Public Member
Dawn Morrell, RN, BSN, CCRN
MaiKia Moua, RN, BSN, MPH
Sharon Ness, RN
Emerisse Shen, RN, ARNP

Excused:

Kimberly Tucker PhD, RN, CNE

Assistant Attorney General:

Sierra McWilliams, Assistant Attorney General

Staff:

Paula R. Meyer, MSN, RN, FRE, Executive Director
Chris Archuleta, Director, Operations and Finance
Gerianne Babbo, Ed.D, MN, RN, Director, Education
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Kathy Moisio, PhD, RN, Director, Nursing Assistant Programs
Catherine Woodard, Director, Discipline and WHPS

I. 8:30 AM Opening – Yvonne Strader, Chair – DISCUSSION/ACTION

II. Call to Order

A. Introductions

B. Order of the Agenda

C. Land Acknowledgement – Yvonne Strader

D. Announcements

1. NCSBN Item Review Subcommittee for the NCLEX examination
 - a. Dr. Sarah Bear as nursing faculty
 - b. MaiKia Moua as a manager of new graduates.
2. Dr. Mary Baroni and Dr. Gerianne Babbo will appear in NCSBN Nurse Leaders newsletter
3. Dr. Kimberly Mozingo, DNP, MBA, HM, BSN, RN, CNOR was a student with Dr. John Furman. Dr. Mozingo received the Journal of Addiction Nursing's Christine Vourakis Social Impact Award
4. Dr. John Furman appointed to the Washington State Public Health Association board of directors

III. Consent Agenda – DISCUSSION/ACTION

Consent Agenda items are considered routine and are approved with one single motion.

ACTION: Ms. Ness moved to approve the consent agenda. Ms. Guilford seconded the motion. The motion passed.

A. Approval of Minutes

1. NCQAC Business Meeting
 - a. September 8, 2022
 - b. September 9, 2022
2. Advanced Practice Subcommittee
 - a. August 17, 2022
 - b. September 21, 2022
3. Discipline Subcommittee
 - a. No minutes to review
4. Consistent Standards of Practice Subcommittee
 - a. August 5, 2022
5. Education Subcommittee
 - a. October 3, 2022
6. Licensing Subcommittee
 - a. August 9, 2022
 - b. September 2022 – No meeting
7. Research Subcommittee
 - a. July 18, 2022

B. Letter from NCSBN President Jay Douglas

1. October 10, 2022
2. October 12, 2022

III. Consent Agenda, continued

C. Performance Measures

3. Investigations
 - a. August 2022
 - b. September 2022
 - c. October 2022
4. Legal
 - a. August 2022
 - b. September 2022
 - c. October 2022
5. Washington Health Professional Services (WHPS)
 - a. August 2022
 - b. September 2022
 - c. October 2022
6. Nursing Assistant Program Approval Panel (NAPAP)
7. Nursing Program Approval Panel (NPAP)

D. Licensing Report to the Governor's Office

E. Washington Center for Nursing/NCQAC monthly meetings

1. September 6, 2022
2. October 25, 2022

F. Out of State Travel Reports

1. Summit on Well Being and Resilience in Health Care, John Furman, September 28 – September 30, Columbus OH
2. Federated Association of Regulatory Boards, Karl Hoehn, Miranda Bayne, Jeff Lippert, Bethany Mauden, September 29 – October 1, Reston VA
3. National Association of Drug Diversion Investigators, Barb Justice, Kristl Pohl, Rashelle Beal, October 4-7, Indianapolis IN
4. Tri Regulator Meeting, Paula Meyer, October 13, Alexandria VA
5. Advanced Practice in Primary Care National Conference, Mary Sue Gorski, Emerisse Shen, October 27, Seattle WA

IV. NCQAC Panel Decisions – DISCUSSION

The NCQAC delegated the authority as provided by law for certain decision to a panel of at least three members. A member of the NCQAC must chair panels. Pro tem members of NCQAC may serve as panel members. The following decisions are provided for information.

A. Nursing Program Approval Panel (NPAP)

1. September 1, 2022
2. September 15, 2022
3. October 6, 2022
4. October 27, 2022
5. November 3, 2022

V. NCQAC Panel Decisions – DISCUSSION, continued

B. Nursing Assistant Program Approval Panel (NAPAP)

1. September 12, 2022
2. October 10, 2022

VI. Chair Report – Yvonne Strader – DISCUSSION/ACTION

A. Search Committee

The search committee scheduled eight candidates to interview on November 28 & 29. Top three candidates will be invited to present and meet in March.

B. Joint Operating Agreement

The Joint Operating Agreement revisions and negotiations were delegated to the officers and plan to meet with DOH, meeting is pending DOH's response.

C. Dates and location of NCQAC meetings through December 2023

ACTION: Mr. Canary moved to approve the dates and locations of NCQAC meetings through December 2023. Ms. Childress seconded the motion. The motion passed.

D. NCQAC Annual Evaluation summary

The survey went live by the date of the meeting and was emailed to NCQAC members and pro tem members. Deadline for completion is December 5. NCQAC strives for 100% participation.

E. Nominations committee – appoint members

The committee selects members of NCQAC to serve in leadership roles, and for staff/NCQAC awards. Ms. Morrell and Ms. Ness volunteered. One more member is needed.

VII. Executive Director Report – Paula Meyer – DISCUSSION/ACTION

A. Budget Report – Adam Canary, Chris Archuleta

Anticipated revenues continue to exceed projections with the new fee increase being implemented on December 1, 2022. Additionally, savings with indirects is expected to continue through the remainder of the biennium. Direct expenditures and service units will accelerate as more staff are onboarded and as travel is reinstated. However, we do not anticipate reaching full expenditure by the end of the biennium.

As a result, the revenue balance will rebound and exceed recommended levels for the remainder of FY23. The final HELMS withdrawal, \$2.4M, scheduled for end of June 2023. the HELMS payment will return the revenue balance below the recommended reserve once again.

B. Strategic Plan Update

1. Academic Progression

Goals: Evaluate the demand for licensed practical nurses and registered nurses in the state. Continue the discussion of the appropriate degree preparation for LPNs.

2. Communications

Mr. Bell presented a data dashboard. The data dashboard will include interactive information from nursing education, nursing assistant training programs, and licensing. The data will be updated occasionally but not real time until HELMS is activated.

B. Strategic Plan Update Continued

3. Nursing Assistants

Goal: Streamline nursing assistant training and testing processes, expand capacity through use of technology, and support progression into nursing as evidenced by the outcomes on page 92 of the packet.

4. WHPS

Goal: Increase the number of nurses enrolled in the Washington Health Professional Services (WHPS) program voluntarily and in lieu of discipline (with an emphasis on in lieu of discipline) by 25% every two years through education, early identification, referral to treatment, and advocacy. NCQAC and WHPS staff do this by promoting the just culture model and employment retention. Focus on in-lieu-of-discipline enrollment per September 2022 NCQAC decision.

C. Rules Update – Jessilyn Dagum

Ms. Dagum reported on rules, reference to upcoming rule work on pages 98-103 of the packet.

Dr. Loveless-Morris and Ms. Moua will be assisting a review of all nursing rules for equity. The Washington Center for Nursing (WCN) will name two people to assist in this work. Sofia Aragon and Paula Meyer will guide the group. This work to begin in Spring 2023.

D. HELMS Update

Ms. Meyer updated on HELMS. Demographic/Supply data questions were added to new applications and renewals rather than use the NCSBN's NurSYS data collection tool. WCN assisted NCQAC with the formation of these questions. There are expected delays due to turnover at one of the tech companies pushing the go live dates to October 2023. Ms. Meyer thanked the staff for their work on HELMS.

E. Decision packages

Ms. Meyer reported on two decision packages presented to the Governor's office in September.

1. Student Nurse Preceptor Grant technical correction to the state budget.
2. Licensing staffing – increasing staff for operations, licensing, discipline, and education.

Pending adoption in the Governor's budget.

VIII. Sub-committee Report – DISCUSSION/ACTION

A. Advanced Practice – Jonathan Alvarado, Chair

1. Legislative Decision Package – APRN Title Protection

Washington state is one of the few states that does not use the title “APRN” for advanced practice nurse practitioners.

ACTION: Mr. Alvarado moved with a second from the Advanced Practice Subcommittee to explore a legislative change for the 2024 legislative year adding APRN as a protected title. The motion passed.

B. Consistent Standards of Practice – Sharon Ness, Chair

1. SB 5183 Forensic Nurse Examiner Training Summary Report to Legislature – Shana Johnny

VII. Sub-committee Report, continued

B. Consistent Standards of Practice – Continued - Sharon Ness, Chair

In 2021, the Legislature passed Second Substitute Senate Bill 5183, which concerned forensic nurse examiners (FNE) and the medical response to nonfatal strangulation assault. A report conducted in 2019 revealed that nine counties in Washington have no hospitals that provide FNE services. The report findings may be found on page 131 of the packet.

2. Advisory Opinion Request: Endoscopy Procedures: Licensed Practical Nurse Scope of Practice – Sharon Ness

ACTION: Ms. Ness moved, with a second from the Consistent Standards of Practice subcommittee, to develop an Advisory Opinion to clarify the LPN roles and scope of practice in performance of endoscopy procedures. The motion passed.

C. Discipline – Adam Canary, Chair

1. No report

D. Licensing – Dawn Morrell, Chair

1. No report

E. Research – Sharon Ness, Chair

1. Ms. Ness introduced new employees joining the research team, Emma Cozart and Lohitvenkatesh Oswal.

F. Education – Kimberly Tucker, Chair

1. Dr. Gerianne Babbo presented defining quality simulation criteria.

IX. Education Session

Dr. Katie Haerling, PhD, RN, CHSE, Professor, University of Washington Tacoma School of Nursing and Healthcare Leadership, Pro Tem Member Nursing Care Quality Assurance Commission, presented preliminary findings of her work titled; “Informing evidence-based regulation of simulation in nursing education”.

X. 1:00 PM – 1:15 PM Public Comment

This time allowed for members of the public to present comments to the NCQAC.

There were no public comments made, and no one made themselves known.

XI. Education – Dr. Gerianne Babbo, Dr. Kathy Moisio - DISCUSSION/ACTION

A. Student Nurse Preceptor Grant Program – Dr. Victoria Hayward

Dr. Babbo recognized the preceptor grant program team, Dr. Hayward, Helen Budde, Judy Soeum.

Dr. Hayward reported the program launched a website FAQ page at <https://nursing.wa.gov/education/student-nurse-preceptor>. The team received several submissions already for the grant funds.

X. Education – Dr. Gerianne Babbo, Dr. Kathy Moisio, continued

B. Clinical Placement Updates

Dr. Babbo reported:

- There have been no reports of cancellations of clinical placements.
- “MyClinicalExchange” is going to be used by some facilities for clinicals.
- Washington State Hospital Association (WSHA) became an affiliate member of CNEWS.

C. Updates on the Nursing Assistant Curriculum, Rules, and Testing

Dr. Moisio reported:

- Introductions of staff hired to support the Nursing Assistant Program:
 - Amy Murray, Christine Tran, and Dennis Gunnarsson
- The Nursing Assistant Program began offering the new curriculum in July. The program presented eleven, two-hour information sessions. Before the end of the year, the program scheduled three additional sessions.
- Continuing testing challenges with scheduling the examination.

D. LPN Registered Apprenticeship

Ms. Galiano reported on the progress of the LPN Registered Apprenticeship program. Work began in mid-September on the curriculum. There may be 36 students ready to begin in January 2023.

XII. State Auditor Office, Prescription Monitoring Program audit results – Paula Meyer – DISCUSSION/ACTION

The State Auditor Office (SAO) performed an audit of the Prescription Monitoring Program (PMP). The audit report and a summary are included on page 133 of the packet. Ms. Meyer provided an overview of the PMP, the results of the audit, and potential actions. Ms. Carly Bartz-Overman is the PMP manager and attended the meeting to address questions. Ms. Bartz-Overman will share updates in January.

XIII. Long Term Care Workforce and Economic Trends and Conditions– Carma Matti-Jackson – DISCUSSION/ACTION

Ms. Matti-Jackson described the current economic status of long-term care in Washington State. Ms. Matti-Jackson’s presentation included information on nurse staffing and its impact on the ability for long term care facilities to provide services for residents. Report begins on page 218 of the packet.

XIV. Legislative Panel – Helen Myrick – DISCUSSION/ACTION

Ms. Myrick reported from the legislative panel and introduced the members of the panel.

A. Nurse Delegation in Community Based and In Home Care Settings and Children with Tracheostomies/Ventilator Dependent

The NCQAC supports a feasibility study toward training and paying parents for home care of their children who are Tracheostomies/Ventilator Dependent so the children can be released from the hospital. Great interest from the medical community to help these children.

B. Meeting dates and times

Two meetings have taken place, the next meeting date: December 7, 2022, at 7:00pm. Weekly meetings of the Panel begin in January, each Wednesday at 4:00 pm.

XV. Meeting Evaluation

XVI. 4:00 PM Closing

DRAFT



**Nursing Care Quality Assurance Commission (NCQAC)
Advanced Practice Subcommittee Meeting Minutes
October 19, 2022**

Committee Members:

Jonathan Alvarado, ARNP, CRNA, Chair
Emerisse Shen, MSN, CNP, FNP, ARNP
Laurie Soine, PhD, ARNP
Shannon Fitzgerald, MSN, ARNP
Lindsey Frank, CD, OB-RNC, ARNP, CNM
Megan Kilpatrick, MSN, ARNP-CNS, AOCNS
Bianca Reis, DNP, MBA, ARNP, PMHNP-BC
Tatiana Sadak, PhD, ARNP, RN, GSAF, FAAN
Kimberley A. Veilleux, DNP, RN, ANP-BC

Absent:

Wendy E. Murchie, DNP, CPNP-AC

Staff:

Mary Sue Gorski, PhD, RN, Director, Advanced Practice and Research
Shad Bell, Assistant Director of Operations
Holly Palmer, Administrative Assistant

**I. 7:00 PM Opening – Jonathan Alvarado, Chair
Call to order**

- Jonathan called the meeting to order at 7:00 PM. The Advanced Practice Subcommittee members and support staff were introduced. The Public Disclosure Statement was read aloud for the meeting attendees.

II. Standing Agenda Items

- Announcements/Hot Topic/NCQAC Business Meeting Updates
 - Mary Sue, Emerisse, and Jonathan plan to attend the UW Advanced Practice Conference; a report will be provided at the next Subcommittee meeting
- Review of Advanced Practice Draft Minutes: September 21, 2022
 - Reviewed, with consensus to bring to the November 18, 2022, NCQAC business meeting for approval

III. Old Business

- Rules Update – The two rules in the process of being updated should complete the process by January 2023, at which time work will begin to review areas in the rules where language could be refined
- Review APSC Work Plan – An updated workplan was provided and reviewed by Mary Sue

IV. New Business

- Legislative Decision Package – APRN Title Protection – Consensus reached to bring a motion to the November 18, 2022, NCQAC Business Meeting requesting the legislative process to include the APRN title as a protected title begin, with a second from the Subcommittee

V. Ending Items

- Public Comment
 - The public was given the opportunity to comment on the agenda items
- Review of Actions
- Meeting Evaluation – All
- Date of Next Meeting – November 16, 2022
- Adjournment – The meeting adjourned at 7:38pm

DRAFT



Nursing Care Quality Assurance Commission (NCQAC)
Discipline Sub-committee Agenda
August 23, 2022 MINUTES
Rescheduled from August 16, 2022
3:30 pm to 5:30 pm

Join the Meeting
from your computer, tablet or smartphone

You can also dial in using your phone
United States: +1 564-999-2000
Conference ID: 478 294 276#

Committee Members:

Adam Canary, LPN, Chair
Sharon Ness, RN
Tiffany Randich, RN
Tracy Rude, LPN ad hoc *vacation*
Dawn Morrell, RN, BSN, CCRN
Quiana Childress, GCertHealthSc, BS, LPN
Judy Loveless-Morris, PhD, public member *absent*

Staff:

Catherine Woodard, Director, Discipline and WHPS
Karl Hoehn, Assistant Director, Discipline - Legal
Grant Hulteen, Assistant Director, Discipline – Investigations and WHPS
John Furman, PhD, MSN, COHN-S, WHPS Liaison *vacation*
Teresa Corrado, LPN, Assistant Director, Discipline – Case Management/HELMS
Barb Elsner, HSC
Margaret Holm, JD, RN ad hoc
Renae Powell, Case Manager
Alicia Payne, WHPS
Adena Nolet, Compliance Officer

Public:

Suzy Green, WorkWell NW
Patricia McCotter, McCotter Consulting, Board member WorkWell NW
Karen Schwisow, WorkWell NW
Phyllis Smith, WSNA

I. 3:30 pm opening – Adam

- Call to order – digital recording announcement
- Roll call

II. New members, member expectations, and consensus on meeting dates and time – Adam

- New member Quiana Childress, LPN. With the commission since December 2021; this is her first subcommittee meeting. She worked with an organization that provides in-home fertility and lab services. Has been a nurse for >15 years. New parent.
- Renae Powell new to case management. With Licensing for 15 years, complaint intake for 1.5 years, now in new role as discipline case manager.
- Meeting times and dates: third Tuesday every other month opposite commission meetings. Is this still good with everyone? Sharon, Dawn, Quiana, Tiffany, Adam all good with the meeting times.
- Highlights of commission members expectations from full document. Purpose from RCW 18.79.010. Catherine added the importance of signing up for hearings, participating in meetings. Staff does the commission's work.

III. June 21, 2022 Minutes– Adam

- In draft format until the commission approves at the September 2022 business meeting.
- Recommend moving forward to the September meeting. Everyone found them to be accurate.

IV. Performance measures – Catherine, Grant, Karl

- Investigations: Grant provided highlights. He went into a little more detail for the benefit of new people. June and July. Investigations queue is reduced to 411 in the queue in July. Grant explained the balance of performance measures.
- Legal: Karl provided highlights. Healthy average caseload. Approximately 45 per staff attorney. Just hired a second paralegal who will start in September. Worked a few special projects. Sometimes cases are late because of RCM delay; summer vacations are here.
- WHPS: Grant provided highlights. Important to note we have 245 in monitoring; approximately 40 fewer than a year ago. The program has reduced in numbers; not as many referrals. Grant explained the different categories of reporting. Graduations, discharges for other reasons, percent employed. Highlights from non-compliance report, graduation report.

V. Updated Personal Data Questions – Karl

- Karl pointed out the changes to the questions, such as adding a question about pending charges and investigations in addition to convictions. Nurses sometimes rush to endorse into WA before a conviction is finalized in another state. Expanded questions in a positive way.
- These questions will go into the HELMS system.
- If everyone agrees with changes, we will bring them to the September meeting. Sharon is good, Tiffany says great work, Dawn said they worked through Licensing subcommittee and Karl added edits, Quiana supports, Adam supports.
- Teresa explained that the need arose to submit these application questions soon to avoid complications in HELMS development.

VI. NCSBN Strategic Objective work: Guiding Nursing Philosophy, Principles, and Disciplinary Decision Pathway – Catherine

- Karl said these are in line with how we do our business. Consistent with just culture principles. Uses state of mind to determine intent.
- Add to our tool kit? Present to the commission meeting in September? Yes. Decision pathway reminds Sharon of the practice tree. Dawn: annual chair's meeting at NCSBN last week – reviewed then. Loved it! Common sense approach. Tiffany – agreed with Sharon and Dawn. This benefits us. Adam agrees. Quiana agrees – provides a pathway on how to evaluate decisions and be objective.

VII. WorkWell NW, Suzy Green – Catherine, Karl, Margaret

- Consider including classes in practice orders and Early Remediation action plans.
- Ms. Green introduced herself and her colleagues; her company works primarily with facilities, peer support programs, and health care professionals whose practice is impacted by stress and burnout.
- Ms. Green presented a PowerPoint describing the problem and their approach to it. It is a full course intended to be comprehensive.
- Margaret – can the program be shortened to less than eight weeks? No. What is the cost of the program? It depends. Needs to be an additional conversation. Mindfulness classes have a huge conversation component, which (for nurses) would have to be 1:1 with a facilitator. What they would propose would look different for nurses. Reimbursement from insurance? No. Margaret: instead of disciplinary like most of our classes, this is more rehabilitative and supportive.
- Adena: valuable and helpful for everyone. How many hours per week? Two hours. A nurse who is suffering from burnout would not likely sign up for more classes, so they would work to create a program that would tailor to the nurse's busy life. How do you know the nurse understands and gets it? Stress response and well-being index are measurable. No guarantee that the nurse will change.
- Dawn: Is travel involved? Over Zoom. Benefits to group and 1:1 work. Nurses must feel safe to disclose. Must be able to share in the group.
- Quiana: Not clear on how this could be structured, group v. 1:1. The study is based on 2014 data and the health care environment is much different in 2022. Used a night shift focus group and it changes when nurses are in a different environment. Nurses want to be able to sleep and spend time with family when they have off time. How many nurses would take advantage of this? Eight weeks is a long time. Suzy: The 2014 study is just theirs; there is a ton of other studies to support the concepts.
- Ms. Green recommends that if we think we'd like to explore further, we need to have a deeper conversation about it. Dawn agrees and wants to see if there's a way, we could make it fit in. She thinks it could fit well with WHPS. Quiana thinks not enough information yet. Sharon: Great in theory, but we need to discuss it more. Agrees with Dawn that it might be appropriate with WHPS. Margaret: We might look at it as conference opportunity.
- More discussion? Agreement for that. Catherine will coordinate future discussion.

VIII. WHPS Updates – Grant

- Genotox. Nurses struggling since COVID with testing. Genotox is DNA-based testing for urine collection. Starts with a buccal swab to set a DNA baseline, observed by RT personnel. Then testing is convenient as nurses buy the test kits and follow the

instructions to submit to Recovery Trek. Tests for 110 substances. To date, 10% nurses in WHPS have started using Genotox and have provided positive feedback.

- Quiana asked about the downside. Grant said the same issues arise as if they went to a collection site. Nurses cannot substitute urine because the DNA will not match. Technology is advanced.

IX. Work plan and strategic plan review – Adam, Catherine

- Voluntary participation v. alternative to discipline in WHPS
- Dawn: where is our safety for the patients if the employer doesn't know and is still practicing. Grant: most voluntary participants have a force on them to join the program. Most of that force is from the employer, so the employer already knows. Dawn: thinks we don't have to work so hard at increasing voluntary participation.
- Shift to more education to inform and encourage alternative to discipline.
- Quiana thinks there's an advantage to education. What are the barriers? Commitment, cost, and...
- Margaret: last conference did not concentrate on ATD, but only SUD. Kick it off and package this with the wellness program.
- Dawn: should be focused on employers to get the nurses in ATD. They don't have enough knowledge. Make employers aware. They just don't know. There's a shift from employers to keep them and support nurses because they need them. Grant: when nurses are in the program, they are safest because they're monitored. Quiana: important to stay employed.
- DSC agrees to shift the focus to ATD and make a concerted effort to educate employers.

X. Highlights of NCSBN Annual Meeting – Adam, Dawn, Tracy, Grant

- Moved to next meeting.

XI. Public comment – Adam

- Limited to two minutes per speaker
- No comments.

XII. Anything for the good of the order? – all

- Refers to the portion of the agenda during which members may make statements or offer observations about the character or work of the subcommittee without having any particular item of business before the meeting.

Adjourned at 5:37pm



**Nursing Care Quality Assurance Commission (NCQAC)
Consistent Standards of Practice Subcommittee Minutes
October 7, 2022 12:00 p.m. to 1:00 p.m.**

Subcommittee Sharon Ness, RN, Commission Member, Chair
Members Present: Helen Myrick, Public Commission Member
Robin Fleming, PhD, MN, BSN, BA, RN, Pro Tem
Jamie Shirley, PhD, RN, Pro Tem

Subcommittee Ella Guilford, MSN, MEd, BSN, RN, Commission Member
Members Absent: Tiffany Randich, RN, LPN, Pro Tem

Staff Present: Deborah Carlson, MSN, BSEd, PMC, CPM, RN, Nursing Practice Director
Shana Johnny, DNP, MN, RN, Nursing Practice Consultant
Jessilyn Dagum, Policy Analyst
Seana Reichold, Staff Attorney
Victoria Hayward, Nurse Education Consultant

- I.** 12:00 p.m. Opening – Sharon Ness, Chair
 - a. The meeting was called to order at 12:02 p.m.
 - b. Ms. Ness read the public disclosure statement.
 - c. Ms. Ness introduced the Subcommittee members
 - d. Shana Johnny introduced the Nursing Care Quality Assurance Commission (NCQAC) staff members in attendance
- II.** Announcements/Hot Topic/NCQAC Business Meeting Updates – Ms. Ness
 - a. The Subcommittee will be considering the need for an Advisory Opinion related to Advanced Registered Nurse Practitioners (ARNPs) who are practicing in their own facilities. This will be placed on the agenda for the December 2, 2022 meeting.
 - b. The Commission is actively recruiting for a new Executive Director
 - c. Consensus reached to send the August 5, 2022 draft meeting minutes to the November 18, 2022 NCQAC Business Meeting.
 - d. Ms. Johnny reviewed the updated subcommittee work plan.
- III.** Public Comment
 - a. Multiple members of the public commented that they are very interested in the topics of discussion and were encouraged to provide feedback to the Subcommittee via email.
- IV.** Old Business
 - a. Ms. Johnny provided an update on the Jurisprudence Module; it is in the testing phase and will be released soon.

- b. Consensus was reached to provide a summary review of HB 5183, Forensic Nurse Training, to the Commission at the November 18, 2022, business meeting.
- c. There are no new updates on the Congenital Syphilis Proviso Workgroup.
- d. There was no update on the Sexually Transmitted Infections Infrastructure Workgroup as Ella Guilford was not present.
- e. Ms. Carlson provided an update on the Vent/Vent-Trach Models of Care for Pediatric Patients Consortium. There is continued discussion around providing parents the training required to be a Nursing Assistant (NA) and be paid through the state to care for their children in their homes. This will require legislative process. A written summary will be provided to the Subcommittee at the December 7, 2022, meeting.
- f. Consensus was reached to take a request to create a Licensed Practical Nurse (LPN) Scope of Practice in Performing Endoscopy Procedures Advisory Opinion to the Commission at the November 18, 2022, NCQAC business meeting.

V. New Business

- a. The requester of the revision/clarification regarding the Chest Tube Frequently Asked Questions (FAQ) has been asked to provide the subcommittee with information regarding what they base their requirements on; that information has not been received to date.
- b. Rule writing for Blood Glucose Monitoring will be opened in the next month and partner workshops will be scheduled at that time.
- c. An early draft of the Advisory Opinion for Nursing Delegation to Nursing Assistants and Home Care Aides is in the packet for review, feedback is requested.
- d. Ms. Carlson is in the process of researching a Toolkit for General Delegation and Hospice Comfort Care Kit; the most recent document the Commission has on this topic is from 2007 and needs updating.
- e. The Commission approved creating a Delegation of Enteral Feedings Advisory Opinion and Ms. Carlson is in the process of researching and developing an early draft.

VI. Ending Items

- a. Review of Actions
- b. Meeting Evaluation – None
- c. Date of Next Meeting – December 2, 2022
- d. Meeting Adjourned at 1:07 p.m.



**Nursing Care Quality Assurance Commission (NCQAC)
Research Subcommittee Meeting Minutes
October 17, 2022 5:00 p.m. to 6:00 p.m.**

Subcommittee Members: Sharon Rott Ness, RN, Commission Member, Chair
Mary Baroni, PhD, RN
Yvonne Strader, RN, BSN, BSPA, MHA
Katie Haerling, PhD, RN, CHSE
Jamie Shirley, PhD, RN
Judy Loveless-Morris, PhD

Staff Present: Mary Sue Gorski, PhD, RN, Director of Advanced Practice and Research
Shad Bell, Assistant Director of Operations
John Furman, PhD, MSN, CIC, COHN-S, Washington Health Professional Services (WHPS) Liaison/Research
Debbie Carlson, MSN, Based, PMC, CPM, RN, Director of Nursing Practice
Holly Palmer, Administrative Assistant

I. 5:00 PM Opening

- Introduction, Public Disclosure Statement, Roll Call
 - Sharon called the meeting to order at 5:00 p.m. and introduced the Research Subcommittee members and staff. The Public Disclosure Statement was read aloud for the meeting attendees.

II. Standing Agenda Items

- Announcements/Hot Topic/NCQAC Business Meeting Updates
 - Mary Sue announced two new staff members, a Data Analyst and a Research Assistant, will both start on November 1, 2022.
 - The hiring of a new Executive Director is in process; the committee is reviewing 24 applications that will be narrowed to 8 candidates, who will interview at the end of November. The final three candidates will attend the March 2023 NCQAC Business Meeting.
- Draft Minutes Review: September 19, 2022
 - Reviewed, with consensus to bring to the November 18, 2022, NCQAC Business Meeting for approval.
- Review Work Plan – Mary Sue reviewed the Work Plan
 - The new NCQAC website is up and running, feedback is welcome.
 - Katie Haerling will present the simulation research she is working on at the November 18, 2022, NCQAC Business Meeting. The cost analysis portion of her research will be presented to the Subcommittee at a later meeting, prior to presenting it to the full Commission.
 - The Subcommittee is working with the Consistent Standards of Practice Subcommittee as well as the Department of Health's Diversity and Equity Committee to implement new rules requiring Diversity and

Equity (DEI) content curriculum for providers. It is anticipated that the Subcommittee will be involved in creating the implementation plan.

- Suggestions for improving the workplan were offered.

III. Old Business

- None

IV. New Business

- Draft Research Subcommittee Annual Report
 - The Student Engagement portion of the annual report was reviewed; edit suggestions were offered. Holly and Mary Sue will collaborate with John Furman to edit the report and the exit survey questions.

V. Ending Items

- Public Comment – None
- Review of Actions – Two new staff members will be attending the next meeting; Holly, Mary Sue & John will collaborate on the Student Engagement report and exit survey
- Meeting Evaluation - None
- Date of Next Meeting – November 21, 2022
- Adjournment – Meeting adjourned at 5:55 p.m.



**Nursing Care Quality Assurance Commission (NCQAC)
Education Subcommittee Minutes
November 22, 2022 12:00 to 1:00 p.m.**

Join the Meeting
from your computer, tablet or smartphone

Join Zoom Meeting
<https://us02web.zoom.us/j/89992659699>

Meeting ID: 899 9265 9699

Committee Members: Kim Tucker PhD, RN, CNE, Chair
Laurie Soine PhD, ARNP Member
Renee Hoeksel PhD, RN, ANEF, FAAN Pro Tem
Julie Benson MHA, MN, RN, CNE Pro Tem
Fionnuala Brown, DNP, MSN, FNP-C, RN Pro Tem *Excused*

Staff: Gerianne Babbo, EdD, MN, RN, Director of Nursing Education
Sarah Bear, EdD, MSN, RN, Nursing Education Consultant
Margaret Holm, JD, RN Nursing Education Consultant Practice
Tim Talkington, NCQAC Attorney
Sara Kirschenman, NCQAC Attorney
Janell Sparks, Education Administrative Assistant

If you have questions regarding the agenda, please call the Nursing Care Quality Assurance Commission (NCQAC) office at (360) 236-4744. Agenda items may be presented in a different order. If you wish to attend the meeting for a single item, contact our office at the number listed above and request a specific time scheduled for that item. If you have limited English language expertise call (360) 236-4744 before **November 15, 2022**.

This meeting is accessible to persons with disabilities. Special aids and services can be made available upon advance request. Advance request for special aids and services must be made no later than February 28, 2022. If you need assistance with special needs and services, please leave a message with your request at 1-800-525-0127 or, if calling from outside Washington State, call 360-236-4052. TDD may also be accessed by calling the TDD relay service at 711.

If you need assistance due to a speech disability, Speech-to-Speech provides human voicers for people with difficulty being understood. The Washington State Speech to Speech toll free access number is 1-877-833-6341.

12:00 PM Opening – Kim Tucker Chair

Call to order

- Introduction
- Public Disclosure Statement
- Roll Call

Standing Agenda Items

- Announcements/Hot Topics
 1. None
- Review of Draft Minutes
 1. Oct 3, 2022
 - 2.

Minutes approved by Nursing Commission Friday, November 18, 2022.

Old Business

- None

Dr. Haerling presented her most recent research, funded by the National Council of State Boards of Nursing Center for Regulatory Excellence, compared learning and patient care performance outcomes between students who participated in traditional clinical, screen-based virtual simulation, and mannequin-based simulation experiences.

Dr. Haerling's research study is under peer review for future publication.

Ending Items

- Public Comments

Public comments included an appreciation of study findings, the focus on competencies, and the contribution to the simulation body of knowledge.

One participant noted the research study confirmed student reports that clinical and manikin-based simulation are appreciated more than virtual simulation.

The question was asked “what was missing in terms of virtual simulation and the safety component” since student scores were lower. The study didn't specifically address this question, but it could be a focus for the future.

A comment was made that the cost utility analysis results for rural areas might be higher compared to urban areas because of the distance some students drive to clinical.

Dr. Haerling responded to a question requesting description of the criteria that made the study “high quality mannequin-based simulation.” Dr. Haerling stated the components outlined by INASCL that include, facilitation of simulation. Prebriefing, post briefing, and professional integrity.

- Date of Next Meeting – Tues Jan 31, 2023, 12-1pm
- Adjournment

This meeting will be digitally recorded to assist in the production of accurate minutes. All recordings are public record. The minutes of this meeting will be posted on our website after they have been approved at the January 13, 2023, NCQAC meeting. For a copy of the actual recording, please contact the Public Disclosure Records Center (PDRC) at PDRC@doh.wa.gov.

If attending remotely, please mute your connection to minimize background noise during the meeting. Time permitting, comments from the public will be taken at the end of the meeting. Use the question box on the meeting control panel to submit questions. Smoking and vaping are prohibited at this meeting.

2022 Research Agenda Update

The following is a summary of the NCSBN research projects currently underway or anticipated in the near-term.

COVID-19

Title: National Prelicensure RN Study: Assessing the Impact of COVID-19 on Nursing Education

Description: The second phase of a multi-phase exploration of the impact of COVID-19 on nursing education. This is a longitudinal study that examines changes prelicensure RN programs have made to their instructional formats due to COVID-19 and their impact on the 2022 class of nursing students.

Status: Data analysis and manuscript preparation underway.

Title: Prelicensure RN Program Baseline Survey

Description: The first phase of a multi-phase exploration of the impact of COVID-19 on nursing education. This study determined the extent to which prelicensure RN programs changed their didactic and clinical delivery formats in light of the pandemic.

Status: Data analysis completed and manuscript submitted.

Title: Licensed Practical Nurse Program Survey

Description: This study supplements findings from the phase one prelicensure RN program baseline survey and allowed for a comparative analysis of curricular changes during the COVID-19 pandemic. The LPN version of this baseline survey study also delved deeper into the topic of clinical education (e.g., difficulty finding clinical placements, workarounds if so, etc.) as there is no planned follow-up with this cohort of programs.

Status: Data analysis completed and manuscript submitted.

Title: The Global Effects of COVID-19 Study

Description: Using contacts from the Global Regulatory Atlas, this study surveyed nursing regulatory bodies around the world to identify what regulatory changes had to be made in response to the coronavirus pandemic and how these may have impacted health-related outcomes.

Status: Data analysis completed and manuscript submitted.

Title: APRN COVID-19 Waiver Impact Study

Description: This study examined the impact of emergency waivers on certain aspects of supervisory/collaborative agreements between APRNs and MDs in four states: Maine, West Virginia, Kentucky, and Louisiana. This study also assessed discipline rates, patient access, telehealth activities, required fees, and expansion into provider shortage areas. Full analysis of over 17,000 APRNs located across 27 states is anticipated for early 2022.

Status: Data analysis completed and manuscript submitted.

Title: Impact of Pandemic Regulatory Changes on the Nursing Workforce

Description: In the context of numerous pandemic-driven regulatory actions affecting prelicensure programs' clinical offerings, and the activation of prelicensure new nurse graduates and retired/out of state nurses in good standing, this study examines hiring trends, staffing, and the implications for patient safety.

Status: Data analysis completed and manuscript submitted.

Title: Simulation Utilization Growth

Description: Secondary data review of state laws & statutes to see how regulation of the use of simulation in nursing education programs has changed since 2014 with the publication of the landmark findings from the National Simulation Study. This study explores how BONs' evidence-based regulations facilitated prelicensure RN program's flexible and quick response to the COVID-19 pandemic.

Status: Data analysis completed and manuscript submitted.

Title: Annual Report COVID-19 Trends

Description: Two-year review and analysis of data submitted to the Annual Report Study from participating BONs to examine COVID-19 trends and findings. This work builds on the findings of the Nursing Education Metrics and Outcomes Study and is part of our ongoing partnership the Nursing Education Department.

Status: Data analysis completed and manuscript nearing completion.

Title: 2022 National Nursing Workforce COVID-19 Impact Study

Description: Review of responses to a new subset of COVID-19 items on the 2022 National Nursing Workforce Survey. This analysis will examine trends pertaining to nurses' self-reported experiences with stress and burnout, as well as their narrative accounts of their practice challenges during the pandemic. Findings will be cross tabbed with other fixed measures included in the MDS.

Status: Data analysis completed and manuscript nearing completion.

Workforce

Title: 2022 National Nursing Workforce Survey

Description: Every two years, NCSBN partners with The National Forum of State Nursing Workforce Centers to conduct the only national-level survey specifically focused on the U.S. nursing workforce. The National Nursing Workforce Survey generates information on the supply of nurses in the country, which is critical to planning for sufficient numbers of nurses and ensuring a safe and effective health care system.

Status: Data collection complete, analysis and manuscript preparation ongoing. Targeted sub-analyses planned for 2023.



Letter FROM THE President

POST-BOARD MEETING UPDATE

Dec. 19, 2022

Dear Colleagues,

As we come to the close of 2022 and another year impacted by public health issues, legislative influences and the need for regulatory examination and innovation, I hold in high regard nursing regulators who have risen to the challenge of maintaining the focus on public protection.

The Board of Directors (BOD) at its December meeting, the first in over three years with all members physically present in Chicago, included generative discussion and significant action items.

As is customary, the BOD considered routine reports as well as NCSBN meeting outcome reports, external meeting attendance (domestic and international), strategic plan progress outcomes, the annual cybersecurity report, and a government affairs update.

A good portion of our agenda was set aside for the confidential deliberation of the NCLEX-RN® and NCLEX-PN® standard setting to go into effect April 2023. This presentation and discussion provided the BOD with available data and information necessary for decision making. The BOD considered the matter very carefully and made an evidence-based decision to uphold the current passing standards for both examinations.

The BOD considered a summary of the facilitated October BOD strategic planning meeting related to the strategic objectives, hearing progress on continuing work and approving new work which gave direction to staff related to future activities. The BOD's decisions were heavily influenced by the input obtained from members at the Annual Meeting. The new strategic objective activities aligned with the 2023-25 strategic Initiatives will be focused in four areas: Licensure Process Reform, Workforce Modeling and Data Exchange, Governance Review and Modernization, and Support Worker Regulatory Models.

The Nursing Regulation Department provided an exciting and comprehensive update on the robust research agenda that is in progress with several studies nearing completion that will inform the membership and be published in a *Journal of Nursing Regulation* supplement in April of 2023. Also, in the final stages of publication is the NCSBN Annual Environmental Assessment which documents significant trends and environmental influences that affect nursing regulation, education and practice.

The December meeting of the Finance Committee and meeting with the auditors was convened close to the BOD meeting and although the newly constituted committee worked hard to finalize recommendations, there is additional information to be gathered before a final report and presentation will be provided to the BOD by the auditors in February. In terms of the routine financial reports, the BOD did take note that consistent with global financial markets NCSBN's long-term investments suffered a loss. Fortunately, due to NCSBN's history of sound fiscal management there is no immediate concern about the organization's financial stability.

POST-BOARD MEETING UPDATE, CONTINUED

As is customary, the BOD considered Delegate Assembly and Annual Meeting experience and attendee feedback when making plans for the upcoming Annual Meeting. To facilitate dialogue, decision making and provide for the broadest contribution possible, the BOD decided to require delegates to be in person at the NCSBN 2023 Annual Meeting. Virtual participation will still be an option for other attendees via livestream. Additional information regarding the details of the meeting will be forthcoming.

The 45th Anniversary meeting planned for 2023 is well underway and we hope you are making plans to join your colleagues and special guests to celebrate our collective accomplishments, recognize individuals and elect members to serve in needed positions. This will be an opportunity to SHINE like the sapphires that represent this NCSBN milestone, reflecting the depth and diversity of skill and talents of our members. I encourage you to nominate your colleagues for awards and to consider the rewarding opportunities that the Leadership Succession Committee is highlighting.

As I reflect upon this past year, I remain grateful for the work and service of the NCSBN staff, the BOD and our members. As we know, the only thing constant is change and 2023 will bring even more change as we are beginning the process of an international search for a new CEO, one who will continue the stellar leadership and work of our current CEO David Benton.

Holiday Greetings to you all! Sending you joy and goodwill to carry through the holidays and into the bright new year.

Warmly,

Jay Douglas, MSM, RN, CSAC, FRE

President

804.516.9028

jay.douglas@dhp.virginia.gov

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Status: Data collection complete, analysis and manuscript preparation ongoing. Targeted sub-analyses planned for 2023.

INVESTIGATIVE PERFORMANCE MEASURES	Nov-21	Nov-22	% of Change		Oct-22	Nov-22	% of Change
Cases Reviewed at CMT	186	187	1%		153	187	22%
Cases Opened to Investigation	60	62	3%		44	62	41%
Open Cases in Investigation Queue	505	417	-17%		412	417	1%
Average Caseload per Investigator	50	46	-7%		41	46	12%
Total Investigations Completed	81	67	-17%		70	67	-4%
Percentage of Cases Completed w/in Time Lines Target 77% PM 2.2	75%	58%	-17%		60%	58%	-2.0%
Percentage of Investigations Opened Beyond 170 days Target 23% PM 2.4	57%	54%	-3.0%		57%	54%	-3.0%
Investigations Completed per Investigator PM 3.1	8	6.9	-14%		7	6.9	-2%
Task Back Assigned	12	8	-33%		9	8	-11%
# of COVID Cases Reviewed/Opened at CMT	31/11	6/1			1/0	6/1	

Nursing Care Quality Assurance Commission
Legal Unit Performance Measures
FY 2023 (Q2)
Karl Hoehn, Legal Manager

Type of Measure	Month	Baseline	Oct	Nov	Dec	Q Avg.
Caseload/ Case volume	Average Caseload per Attorney	45.92	62	67		64.50
	Cases Assigned to Legal	41.33	60	79		69.50
	TOTAL Finalized Cases	56.33	33	30		31.50
Performance	Average of Finalized Cases per Attorney (Target 10 per month)	14.08	4.70	4.30		4.50
	Percentage of Legal Reviews Sent to RCM in 30 Days or less (Target 77%)	78.33%	54%	93%		74%
	Document drafting time: Percentage of Drafts to AAG or SOA Served in 30 Days or less (Target 77%)	86.67%	0%	25%		13%
Work Type/Complexity	Percentage of Cases involving an ARNP	6.00%	13%	12%		12%
	Number of Cases forwarded to AAG	10.67	8	5		6.50
	Finalized with Legal Review only	21.00	14	21		17.50
	Finalized by Default or Final Order After Hearing	12.00	7	2		4.50
	Finalized by STID, AO or APUC (Settlements)	19.00	6	2		4.00
	Other (releases, reinstatements)	4.33	6	5		5.50

WHPS Monthly SUDRP Report - November 2022

Total SUDRP Cases Reviewed

6

SUDRP Referral Reasons

	Positive Drug Screen	Missed Test	Multiple Missed Check-ins	Non-Compliance (Other)
Total	4	1		1
Total Referrals	6			

Remain in WHPS

	No Action	WHPS Action
Total	5	1
Total WHPS Action	6	

Remain in WHPS with Legal Action

	Legal: SOC	Legal: STID	Referred for Investigation
Total			
Total Legal Action	0		

Discharged from WHPS

	No Legal Action	Legal: SOC	Legal: STID	Legal: Investigations
Total				
Total Legal Action	0			

Nurse Appearances

Total Appearances	2
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Referral Contract Review

	Approved	Denied
Total		
Total RC Review	0	

Graduations

	Order	STID	APUC	RC
Total	1	1	1	
Total Graduations	3			

WHPS Monthly Report - November 2022

Stage																	
	New Intake		Current Monitoring														
License Type	2021	2022	2021	2022													
ARNP			19	19													
RN/LPN	9	10	258	223													
NT																	
Total	9	10	277	242													
Referral Type - Monitoring (In-State)																	
	APUC		Order		Pending		RC		STID		Voluntary						
License Type	2021	2022	2021	2022	2021	2022	2021	2022	2021	2022	2021	2022					
ARNP	2	2	1	1	1		7	8			5	5					
RN/LPN	11	10	51	51	24	6	95	87	25	26	29	24					
NT																	
Total	13	12	52	52	25	6	102	95	25	26	34	29					
Total Monitoring	251	220															
Referral Type - Monitoring (Out-of-State)																	
	APUC		Order		Pending		RC		STID		Voluntary						
License Type	2021	2022	2021	2022	2021	2022	2021	2022	2021	2022	2021	2022					
ARNP					1		1	2			1	1					
RN/LPN	1	1	6	6	1		8	8	7	4							
NT																	
Total	1	1	6	6	2	0	9	10	7	4	1	1					
Total Monitoring	26	22															
Discharge Type																	
	Not Appropriate		Offered/ Refused		Referred Back to NCQAC		Pending Discipline		Voluntary Withdrawal		Successful Completion		Deceased		Medically Discharged		
License Type	2021	2022	2021	2022	2021	2022	2021	2022	2021	2022	2021	2022	2021	2022	2021	2022	
ARNP					1												
RN/LPN		2	1	1	4	1					4	4	1				
NT																	
Total	0	2	1	1	5	1	0	0	0	0	4	4	1	0	0	0	
Total Discharge	11	8															
Performance Measures																	
					2021	2022											
Case Manager Caseload (Intake & Monitoring)			Melissa Fraser		100	52											
			Heidi Collins		95	45											
			Lori Linenberger		101	49											
			Shelley Mezek		N/A	53											
			Alicia Payne		N/A	52											
Average from Inquiry to Intake - Target 7 Days					12	4											
Average from Intake to Monitoring - Target 45 Days					44	36											
Employment Measures (In-State)																	
		2021				2022											
License Type		Employed		Unemployed		Employed		Unemployed									
ARNP		11		5		14		2									
RN/LPN		181		54		156		48									
NT																	
Total		192		59		170		50									
Percentage - Target 72%		76%		24%		77%		23%									
Grand Total		251				220											

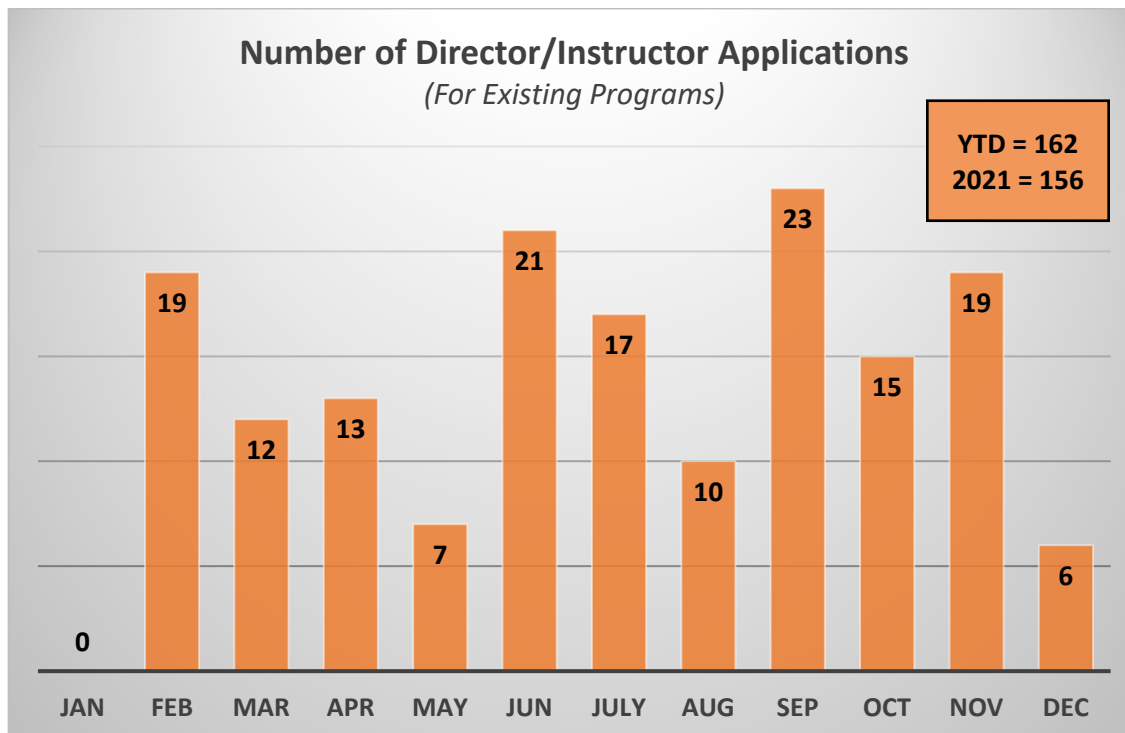
Washington Health Professional Services Non-Compliance Report - November 2022

No.	Case ID#	Program Start Date	Entry Reason	Anticipated Completion Date	Incident Date	Incident Type	Drug(s)	WHPS Action(s) Taken	Referred to SUDRP	Drug of Choice @ Program Entry	SUDRP Decision
	2000-06-72368	3/3/2022	RC	3/2/2025	11/3/2022	Excessive Dilute Noncompliance		Additional Test Scheduled; Notification Letter Sent; Referred for Evaluation			
	1980-05-0486	9/13/2022	APUC	9/12/2027	11/28/2022	Missed Test/No Show		Additional Test Scheduled; PSG Facilitator Notified; Referred for Evaluation; Correspondence with Nurse			
	18-11-V/RN-05422	9/13/2022		9/12/2027	11/30/2022	Missed Test/No Show		Additional Test Scheduled; PSG Facilitator Notified; Referred for Evaluation; Correspondence with Nurse			
	18-11-V/RN-05422	1/3/2019	Voluntary	1/9/2024	11/10/2022	Missed Test/No Show		Additional Test Scheduled			
			Order					Contract Extended; Counselor Notified; Referred for Evaluation; Referred to SUDRP; Self Test; WSM Notified; Correspondence with Nurse; Correspondence with PSG	12/5/2022		
	1986-11-4238	7/2/2019		8/22/2024	11/7/2022	Positive Drug Screen	Alcohol	Additional Test Scheduled; Ceased/Removed from Practice; PSG Facilitator Notified; Referred for Evaluation; WSM Notified			
	1982-02-5424	10/26/2020	Referral Contract	10/25/2025	11/4/2022	Missed Test/No Show		Additional Test Scheduled; Correspondence with Nurse			
	1974-03-0509	3/25/2020	Voluntary	4/16/2025	11/18/2022	Positive Drug Screen	Alcohol	Other correspondence			
		3/25/2020		4/16/2025	11/17/2022	Missed Test/No Show		Additional Test Scheduled			
	1980-05-0486	9/13/2022	APUC	9/12/2027	11/15/2022	Positive Drug Screen	Oxycodone	Additional Test Scheduled; Ceased/Removed from Practice; PSG Facilitator Notified; Referred for Evaluation; WSM Notified			
			Referral Contract					Additional Test Scheduled; PSG Facilitator Notified; Referred for Evaluation; Referred to SUDRP; Correspondence with Nurse; Correspondence with PSG	12/5/2022		
	1973-04-7069	2/18/2021		2/17/2024	11/21/2022	Positive Drug Screen	Alcohol	Correspondence with Nurse; Other correspondence			
	1966-06-5815	8/19/2022	STID	8/18/2023	11/23/2022	Positive Drug Screen	Morphine				
	1980-05-0486	9/13/2022	APUC	9/12/2027	11/28/2022	Positive Drug Screen	Amphetamine; Hydromorphone	PSG Facilitator Notified; Referred for Evaluation			
			Pending					Additional Test Scheduled; Ceased/Removed from Practice; Counselor Notified; MRO Review Requested; WSM Notified			
	1975-05-6014D	11/8/2022		11/7/2027	11/28/2022	Positive Drug Screen	Methamphetamine	Additional Test Scheduled; Ceased/Removed from Practice; PSG Facilitator Notified; WSM Notified; Correspondence with Nurse; Other correspondence			
	1968-03-6901	1/21/2022	STID	1/20/2024	11/30/2022	Positive Drug Screen	Alcohol	Additional Test Scheduled; Ceased/Removed from Practice; MRO Review Requested; PSG Facilitator Notified; Referred for Evaluation; Correspondence with Nurse; Correspondence with WSM			
	18-3-PO/RN-04041C	6/13/2018	Order	6/12/2023	11/21/2022	Positive Drug Screen	Codeine				

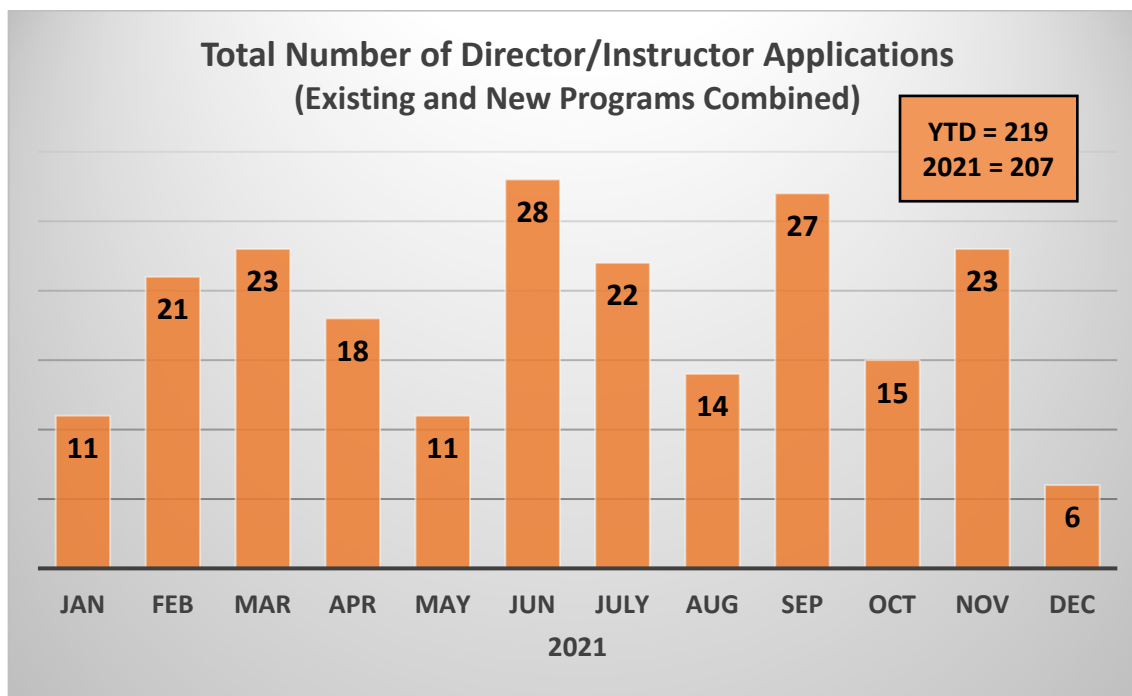
DSC Non-Compliance Spreadsheet
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 erated By: Alicia Payne 12/7/2022 6:32 AM

Data and Performance Measures Related to Nursing Assistant Training Programs

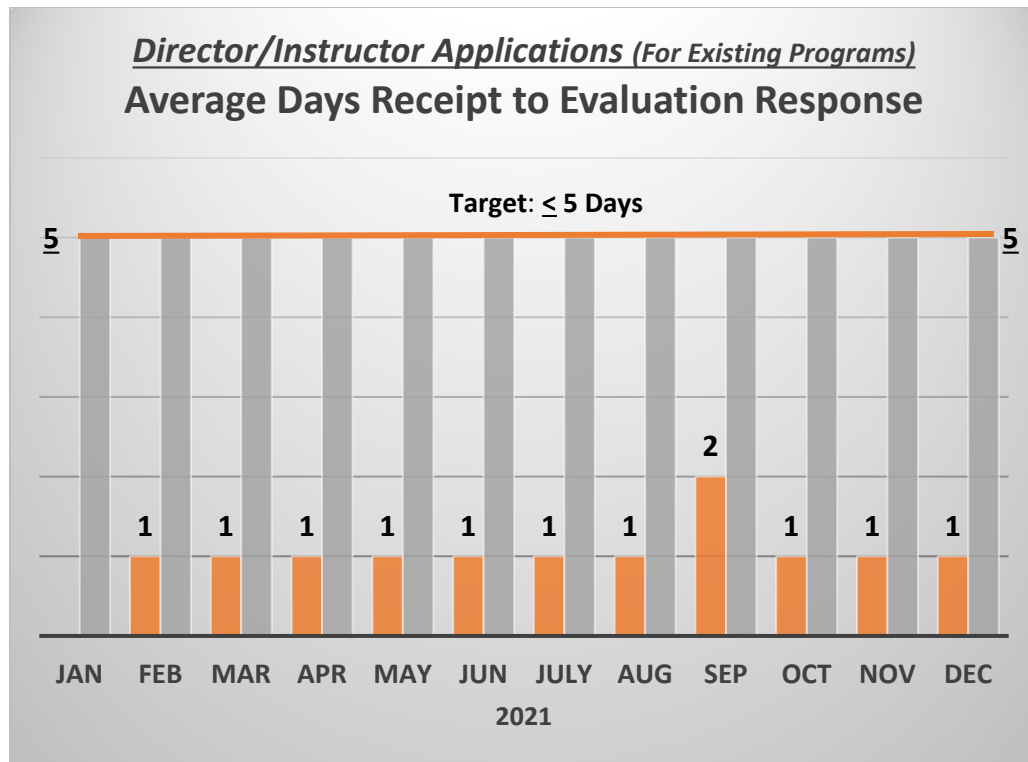
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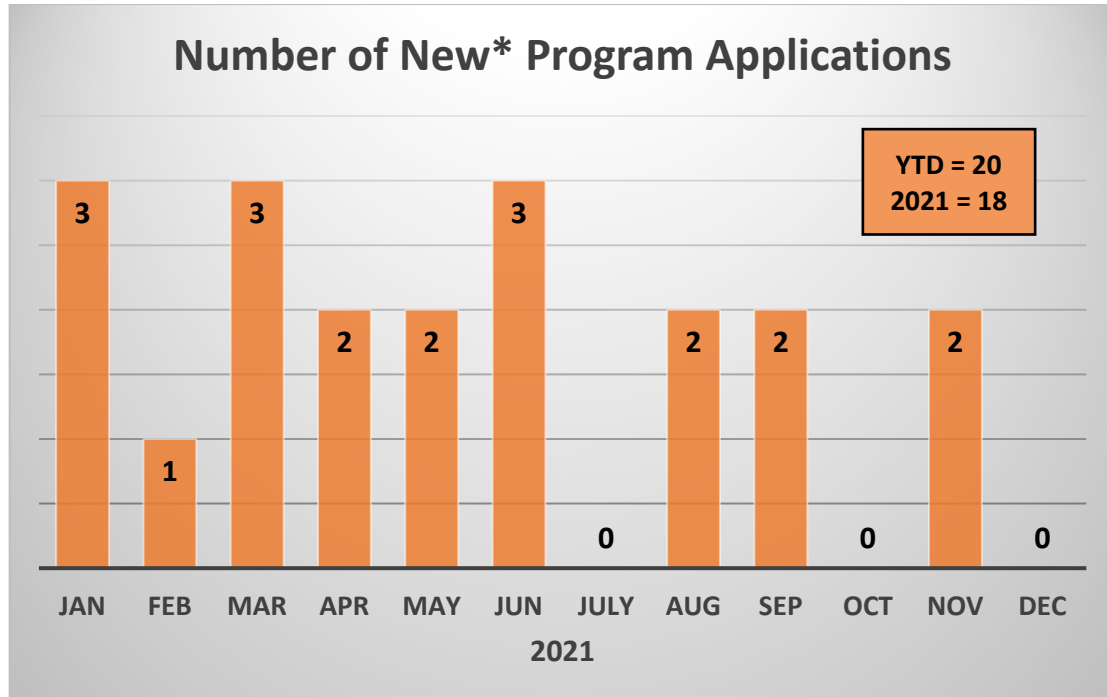
Descriptive Data:



Performance Measure:

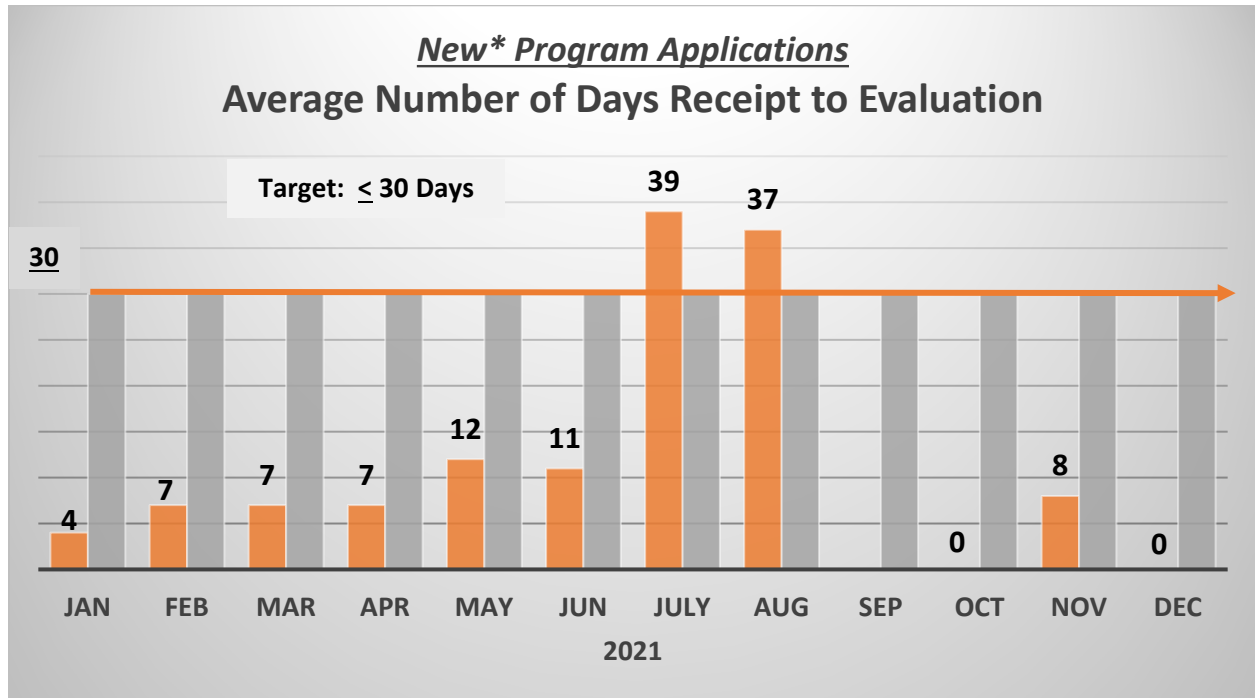


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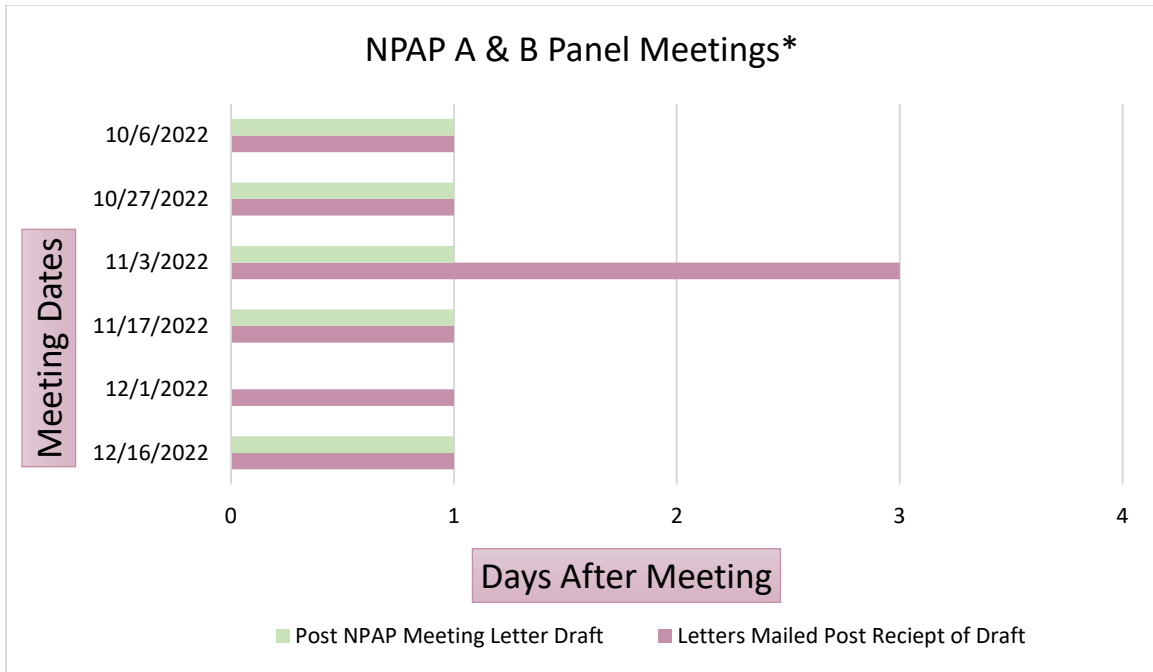


*Does not include 2nd/subsequent reviews of revised applications

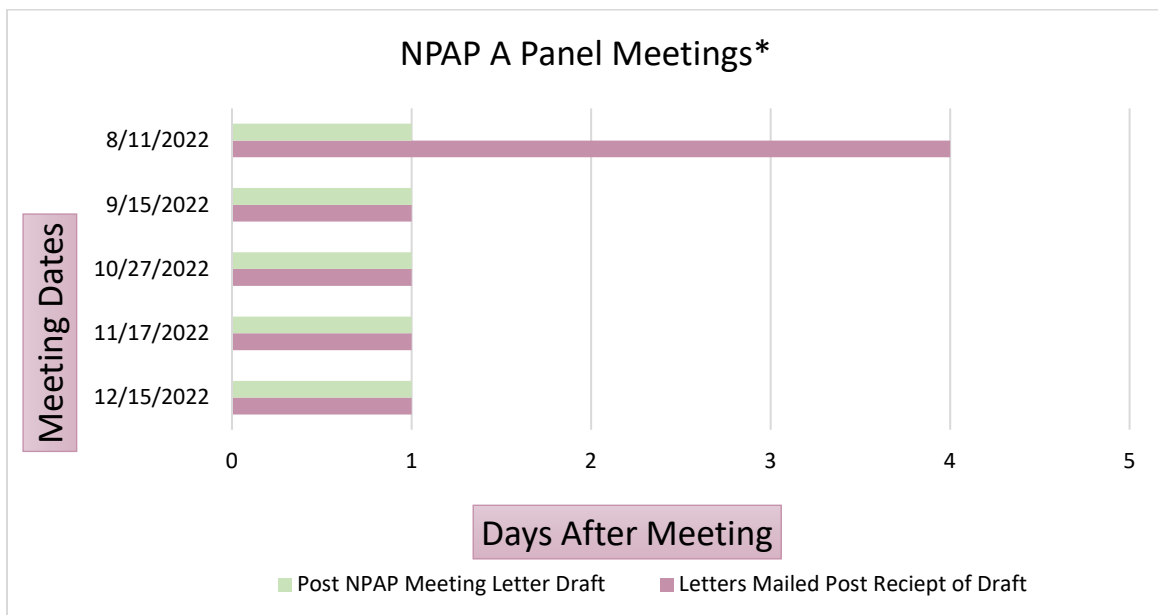
Performance Measure:



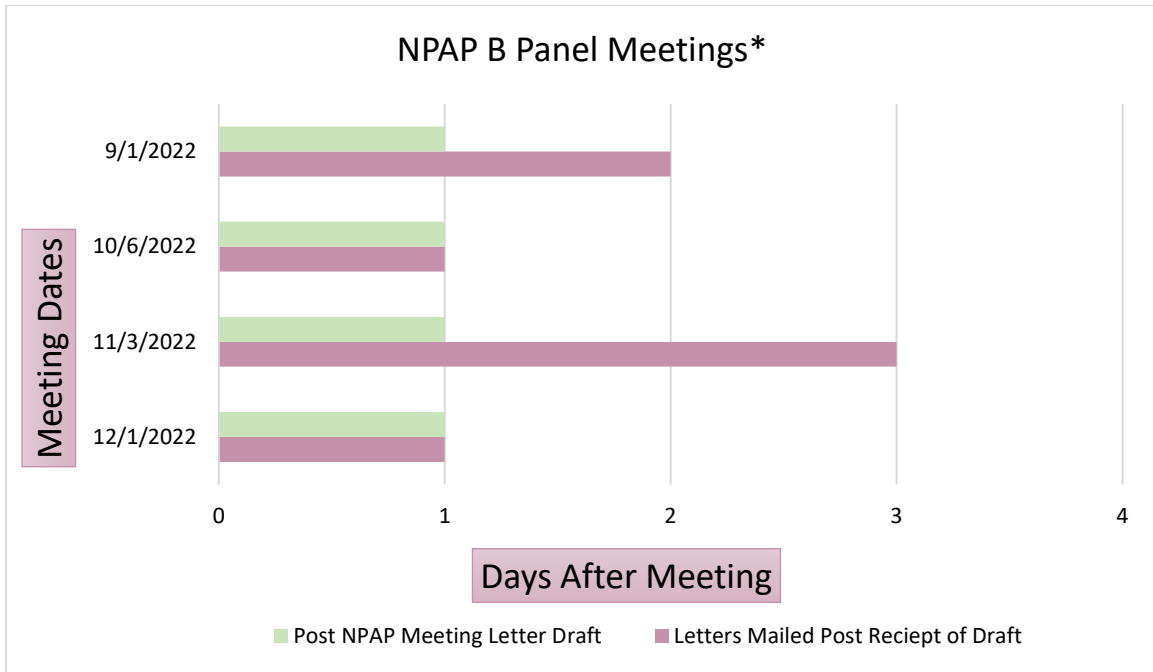
*Does not include 2nd/subsequent reviews of revised applications



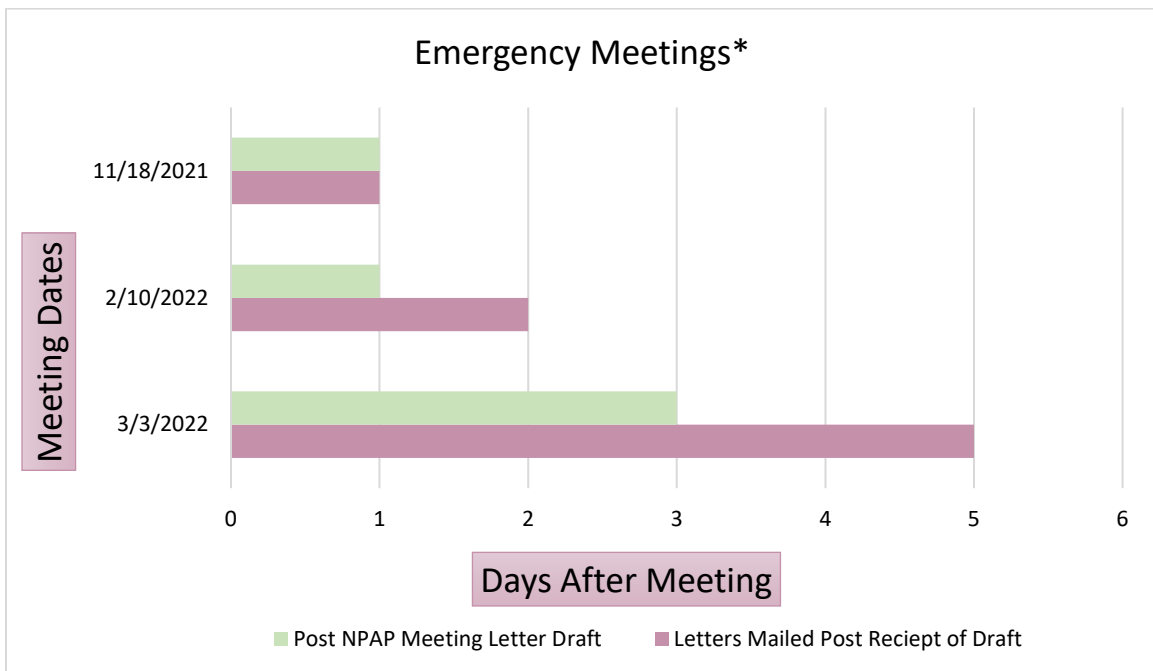
**Letters mailed within 30 days of NPAP meeting*



**Letters mailed within 30 days of NPAP meeting*



**Letters mailed within 30 days of NPAP meeting*



**Letters mailed within 30 days of NPAP meeting*

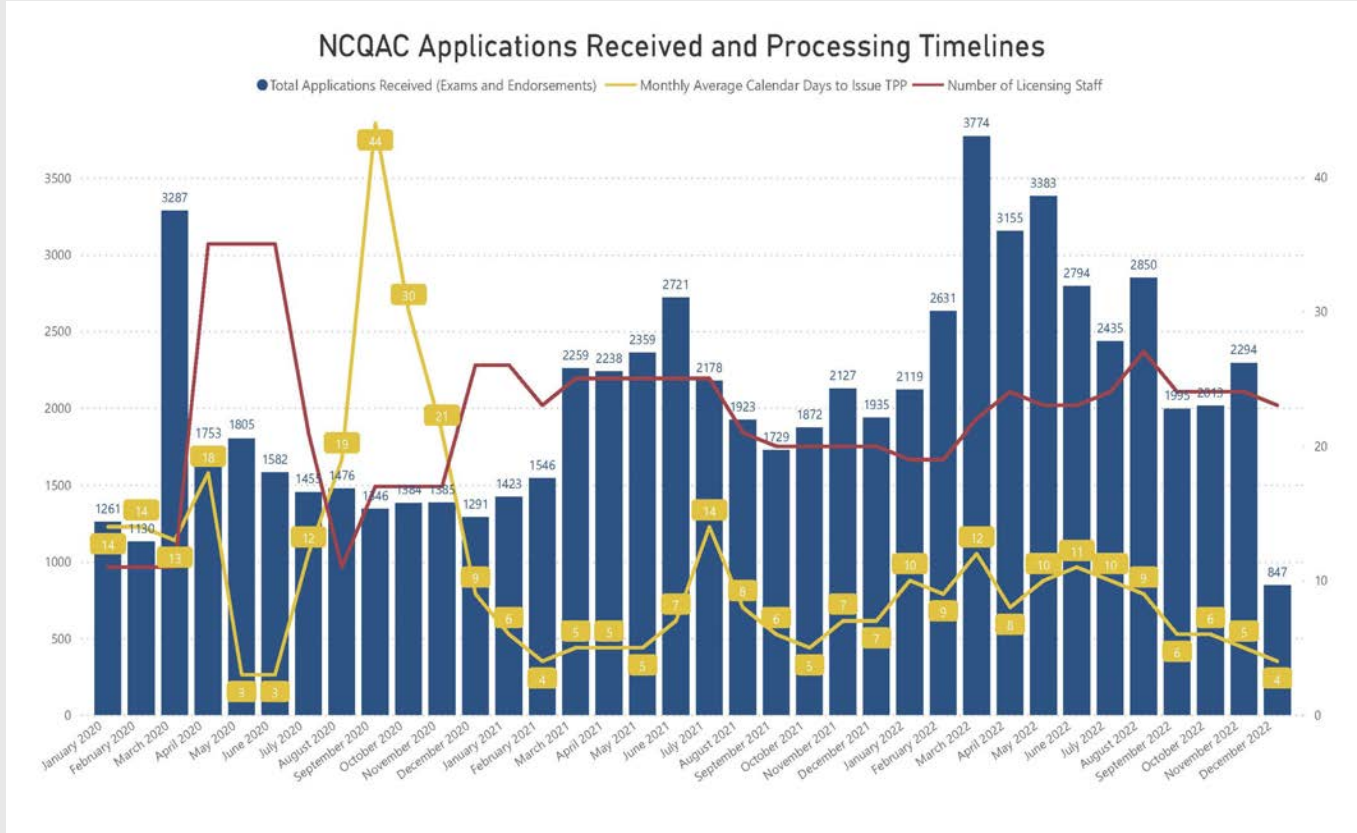
Nursing Care Quality Assurance Commission (NCQAC)

COVID-19 Response for Nurse Licensure

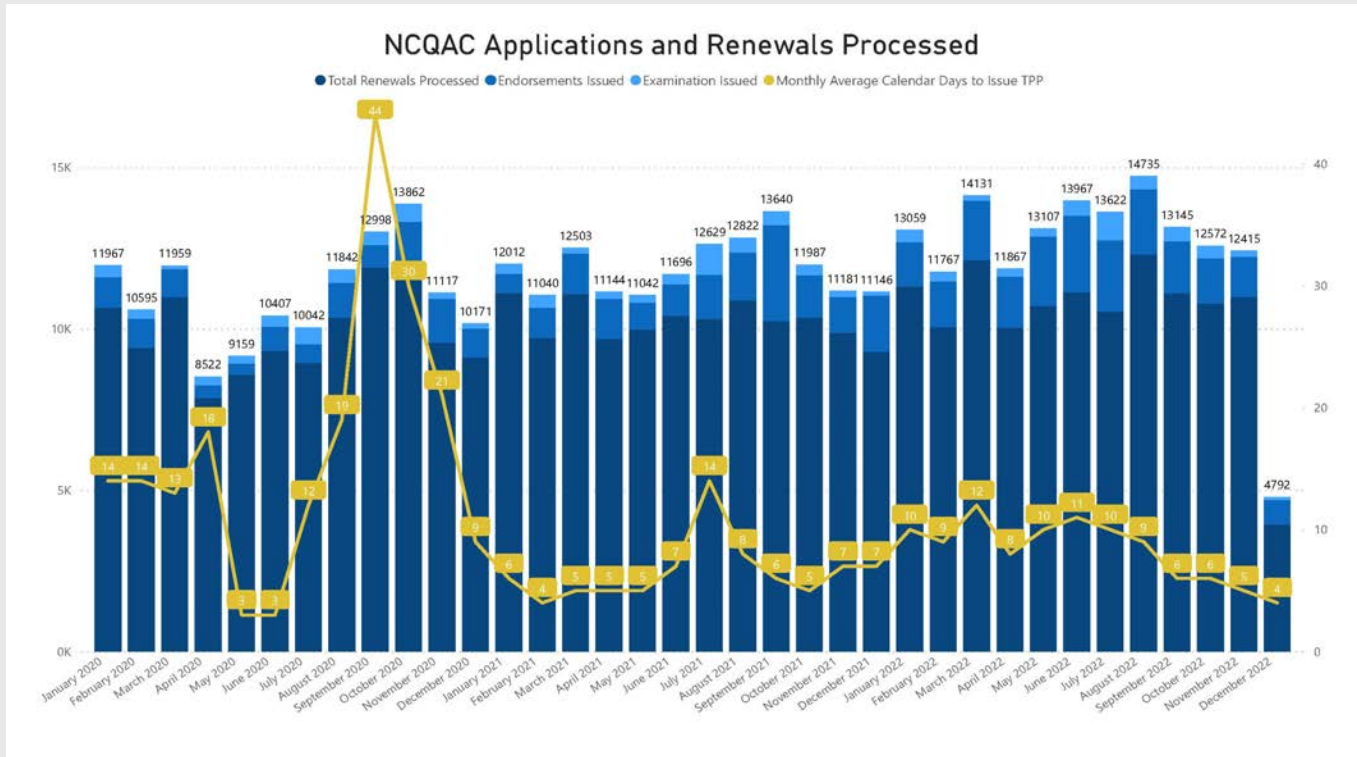
Weekly Update: Monday, December 19, 2022

As of December 19, 2022, the current processing time to issue a complete temporary practice permit (TPP) is four days (including weekends and holidays). The NCQAC hired temporary staff and shifted resources to meet the seven-day licensure mandate by the beginning of September 2022.

The first chart below reflects the monthly nursing application volumes, application processing times, and staffing levels for NCQAC since January 2020. The NCQAC received 2,294 new applications during November 2022. Additionally, in comparing January through November of 2021 to 2022, the NCQAC received 22,375 new applications in 2021 compared to 29,443 new applications in 2022 (31.6% increase).



The second chart on this report reflects the monthly outputs from the NCQAC. In November 2022, the NCQAC issued a total of 1,535 new nursing licenses. In addition, 10,991 nursing renewals were completed.



Note: *Temporary practice permits (TPP) are issued to nursing applicants who meet all licensure requirements, except for the FBI fingerprint background check. A preliminary background check is completed on all applications received by the NCQAC.

WCN/NCQAC Meeting

Tuesday, November 29, 2022 (4:00 pm to 5:00 pm)

Washington Center for Nursing Office Minutes

Present: Sofia Aragon, Paula Meyer, Bethany Mauden

Topics	Discussion	Action Needed
Call to Order	Meeting called to order 4:03 pm. Reviewed agenda.	
1. Helms Update	Not going as well as planned. Large turnover with the companies creating the product. Still working for HELMS to go live in 2023, may be late 2023.	
2. Review of Rules for Equity	Moving forward, NCQAC has chosen two members to participate in the review. WCN to choose their members by the January 13, 2023, NCQAC Meeting. Discussion on adding this work to our upcoming contract. Butch de Castro to also be part of the review. The review to begin after March 2023.	
3. Data Dashboard	Mary Sue Gorski and Gerianne Babbo have been working on a dashboard for the NCQAC website. Ability to click on a map of Washington state and see number of licensed nurses. Further developing to have more data available.	
4. January 13, 2023, NCQAC Meeting	The next NCQAC Meeting is January 13, 2023 and will be virtual. Paula asked Sofia if she can report on WCN activities around 2:30 pm due to scheduling. Materials for the packet are due December 19, 2022.	
5. Update on Preceptor Funds	Student nurse preceptors will receive \$725.00 for precepting nursing students who meet all requirements in the WSSNPG policy. The preceptor will have to apply for the funds and the amount is based on the number of preceptors that	

	apply for funds. They expect the number to decrease next year when more preceptors apply.	
6. Coordination on Nurse Faculty Funding Updates	Paula gave an update to the Dean's and Directors recently. Pending Governor's budget, expected in December.	
7. Development of DOH/WCN Contract for 2023 – 2025	Discussion on the first meeting for development of the new contract. Decided to make the next quarterly meeting in January 2023 the first meeting on contract development. Discussion on who should be involved. Make sure to invite Jonnita Thompson, Christie Spice and Sasha De Leon Paula offered to make and electronic introduction for Sofia to Sasha De Leon.	
8. WCN Deliverables Updates	Discussion on deliverables in 2023. Sofia reported that Patricia and Angelina plan to present the upcoming data reports to stakeholders before final reports are due. Sofia also requested moving the 4.2 Deliverable into 2023. Paula will let Jonnita know of the change.	
Next Meeting	It was decided to cancel the planned December 27, 2022, meeting. The next meeting will be January 31, 2023, from 4pm to 5pm.	

Submitted by: Frank Kohel

Approved:

2022 NCSBN Leadership and Public Policy Conference

**November 2-4, 2022
St. Augustine, Florida**

**Trip Report
Jessilyn Dagum, Policy Analyst**

PURPOSE:

Commemorating the 50th anniversary of President Kennedy's Moonshot speech, this conference inspired regulators to hone their leadership, negotiating, problem-solving, communication and crisis-management skills. The event offered nursing regulators to come together to network, share insights and learn about legislative strategies.

OUTCOME:

Objectives:

- Explored legislative opportunities at nursing regulatory bodies.
- Identified legislative strategies and opportunities for advancing legislation.
- Applied advanced skills in communication and negotiation to policy challenges at nursing regulatory bodies.

Highlighted Learning Activities:

- "Kennedy's Romantic Moon" presented by John Jordan, PhD, Associate Professor, Department of Communication, University of Wisconsin-Milwaukee. This presentation explored President John F. Kennedy's decision to make the dream of putting a man on the moon a reality. This session explored the use of persuasive communication, inspiration, and brave leadership.
- "Communication in a Crisis" presented by Timothy Sellnow, PhD, Professor and Associate Director of Graduate Studies, Research and Creative Activity, University of Central Florida; Deanna Sellnow, PhD, Professor and Assistant Director of Communication Programs, University of Central Florida. This presentation explored the IDEA Model Framework for effective communication in challenging times.
- "Leadership Lessons from Mission Control" presented by Ginger Kerrick, First Latina Director of NASA Mission Control and 30-Year Veteran of the Johnson Space Center; Chief Strategy Officer of Barrios Technology. This presentation explored Stories of Innovation, Collaboration, and Communication in Human Space Flight.

RECOMMENDATION:

The NCSBN Leadership and Public Policy Conference provides opportunities for those working in regulatory environments to explore different legislative strategies and opportunities for advancing legislation. These skills will help those working in policy and leadership roles make effective legislative decisions. The summit also offered opportunities to apply advanced skills in communication and negotiation to policy challenges at nursing regulatory bodies.

This event is a strong opportunity to learn different legislative strategies and connect with fellow nursing regulatory bodies. The information and resources presented at this event, provide the motivation and skills policymakers, leaders, and regulatory bodies need to make effective and informed policy decisions.

Washington State Nursing Care Quality Assurance Commission
NPAP DECISION SUMMARY REPORT **Date:** November and December 2022 Updated 12/05/2022

Actions	Number Added for this reporting period	2022 Panel Actions YTD	2021 Totals	2020 Totals	Instate Approved Programs	Out of State Approved Programs
Letter of Determination:					7 LPN Programs	5 ADN Programs
					25 ADN Programs	2 LPN-BSN Programs
Intent to Withdraw Approval					18 RNB Programs	12 BSN Programs
Conditional Approval		1	2		17 BSN Programs	25 RNB Programs
Deny Approval			3		123 Post BSN Programs	38 Total BSN Programs
Letter of Decision:					3 Refresher Programs	288 MSN Programs
Approval – Programs	2	21	30	43		129 DNP Programs
Approval – Sub Change	5	35	20	47		1 EdD Nursing Education Program
Plan of Correction (POC) Required		4	2	4		1 Refresher Programs
Acceptance of Submitted Documents or POC	5	60	64	65		
Additional Documents or Actions Required		1	4	29		
Deferred Action	1	9	12	30		
Removal of Conditional Approval				1		
Limit Student Enrollment		1	1	2		
Voluntary Closure			1	2		
Require Monitoring Report		8		2		
Site Visit Report	1	10	3	10		
Removal of Moratorium on admissions				1		

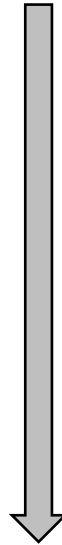
Covid-19 Curriculum Adjustments			7	92
Other		3	2	5
Letter of Concern		1		
Approvals-Miscellaneous (non-program)		3	2	3
Monitoring Report:				
Accept		1		5
Not Accept				1
Deferred				
Out-of-State DL Student Waivers:				
Accept				5
Deny				
Deferred				
Complaints:				
Open		2	3	3
Closed		3	3	11
Defer				
Complaint Investigation Reviewed:				
Accept Investigation Report		1	3	4
No Action Required		1		3
Action required				2
Licensing Education Exemption (Waiver) Request:				
Exemption Request Approved		4	5	8
Exemption Request Denied	1	2	1	2

Snapshot of Approved Nursing Assistant Training Programs (December 2022)

Number of Nursing Assistant Training Programs (All Types)	188
• Traditional Programs	147
• Home Care Aide Alternative/Bridge Programs	20
• Medical Assistant Alternative/Bridge Programs	10
• Medication Assistant Certification Endorsement (MACE) Programs	11

Trend Indicator in Program Numbers: ___ Notable Increase **X** Stable ___ Notable Decrease

Comments: Program numbers have ranged 180-200 total over last six years, but increased to >200 as 2019 came to a close and in early 2020. With the impact of COVID-19, the number of programs decreased temporarily to <200. They gradually climbed above 200 again in June 2022. Then, with a few nursing home sanctions and the 2-year program renewal process (where several inactive programs opted to close)-- the number is again slightly below 200.



NAPAP REPORT 2022

Activity	JAN 10+20	FEB 14+28	MAR 14	APR 11	MAY 9	JUNE 13	JULY 11	AUG 8	SEP 12	OCT 10	NOV 14	DEC 12	YTD
Programs Applications Approved	3	3	2	1	1	1		2		1		2	18
Program Applications Deferred	2		1			3							6
Program Applications Denied													
Program Change Requests Approved			2		1		1			1	2		7
Program Change Requests Deferred													
Program Change Requests Denied													
Program Complaints Reviewed				3			1		1		1	1	7
Program Complaints Opened				1								1	2
Program Complaints Closed	2			2			1				1	2	8
Site Visit Summaries Reviewed				1							1		2
Investigative Reports Reviewed	2								1			2	5
POC/DPOC or Program Condition Reviewed	2				1		1			2			6
Additional Documents/Program Actions Required	2	1	2		3		3			1	4		16
Intent to Change Program Status (Full to Conditional or Conditional to Full)													
Intent to Withdraw Program Approval					1								1
Program Director/Instructor Applications Requiring Panel Review										3		1	4
Other Review or Process Decisions	6	9	6	6	6	10	4	8	7	8	11	7	88

*Program approvals for January 2022 adjusted from 2 to 3 for a program approved pending completion, which occurred at a later date.

<u>Position Number</u>	<u>Member Name</u>	<u>Term</u>	<u>Race</u>	<u>Gender</u>	<u>Appointment Date</u>	<u>Exp Date</u>	<u>RCW 18.79 Criteria</u>
01	Emerisse Shen	01	A	F	7/1/2022	6/30/2026	ARNP
02	Helen Myrick seeking reappointment	01 02+	C	F	03/03/2015 09/06/2018	06/30/2018 06/30/2022	Public Member
03	Jonathan Alvarado	01	**	M	12/17/2021	06/30/2025	ARNP
04	Kimberly Tucker	01	C	F	07/01/2020	06/30/2024	RN
05	Dawn Morrell	01 02	C	F	10/08/2018 7/01/2022	06/30/2022 06/30/2026	Staff nurse providing direct care
06	Joan Madayag	01	A	F	7/01/2022	06/30/2026	LPN
07	Judy Loveless-Morris	01	A&Af	F	7/01/2022	06/30/2026	Public Member
08	Quiana Childress	01	Af	F	12/17/2021	06/30/2025	LPN
09	Yvonne Strader (eligible for reappointment)	00 01	*AA or AN	F	08/02/2017 07/01/2019	06/30/2019 06/30/2023	RN
10	Adam Canary	01 02	*AA or AN	M	07/01/2016 07/01/2020	06/30/2020 06/30/2024	LPN
11	Vacant						Public Member
12	Ajay Mendoza	01	*AA	M	07/01/2021	06/30/2025	RN Faculty member of a four-year university nursing program
13	Ella Guilford	01 02	Af	F	06/20/2019 07/01/2021	06/30/2021 06/30/2025	RN Faculty at a two-year community college nursing program
14	Sharon Ness	01 02	C	F	08/02/2017 07/01/2021	06/30/2021 06/30/2025	Staff nurse providing direct care
15	MaiKia Moua	01	A	F	07/01/2021	06/30/2025	RN Nurse Manager or Nurse Executive

*AA or AN = American Indian or Alaska Native

** Hispanic or Latin X

C = Caucasian

Ch =Chinese

Af = African American

A=Asian

Washington State Nursing Care Quality Assurance Commission

Position Description

Nominations Committee

Purpose:

1. Select members of the Nursing Care Quality Assurance Commission (NCQAC) who are qualified and willing to serve in leadership positions.
2. Select members of the NCQAC and staff to be nominated for awards. Complete applications as necessary.

Membership:

1. At least three members of the NCQAC appointed by the Chair.
2. No member should serve more than two consecutive years on the nominations committee.

Duties and Responsibilities:

1. Select at least two candidates each for the position of NCQAC Chair, Vice Chair, and Secretary/Treasurer.
2. Nominate NCQAC members and staff for awards, such as the NCSBN annual awards. Complete and submit applications.

Timeline for leadership nominations and elections:

1. November meeting --
NCQAC Chair appoints new members to the Nominations Committee.
2. January meeting –
Announces opening for nominations for the NCQAC annual award.
3. March meeting –
 - a. Verbally presents the slate of candidates to the NCQAC. The NCQAC approves the slate of candidates.
 - b. Candidates may speak to the NCQAC
4. May meeting –
 - a. Election of the Officers, according to Procedure H02.
5. July meeting –
 - a. New officers take office
 - b. Presents the NCQAC annual award.

Staff:

Executive Director or designee

Adopted: 7/06, 7/08

Revised: 6/08, 9/10, 11/11, 3/13, 3/17

Approved: 7/06, 7/08, 3/13, 3/17

NURSING BUDGET STATUS REPORT – November 2022

2021-2023 BIENNIUM:

This report covers the period of July 1, 2021, through November 30, 2022, seventeen months into the biennium, with seven months remaining. The NCQAC budget is underspent by 6.1% or almost \$1.3M and the current revenue balance is \$3.5M.

REVENUES:

The recommended revenue balance or “reserve” should be 12.5% of biennial budgeted allotments, or approximately \$3.7M. NCQAC revenue balance had another slight rebound during this reporting period, however, remains slightly below the recommended reserve balance. Revenues continue the trend of exceeding projections and currently outpace projections by more than 8%, or almost \$1.7M. This is due to the continued high volume of applications received despite the end of the declared emergency. Application volume should moderate for the remainder of the fiscal year; however, we anticipate at levels above projections made at the time the budget was prepared.

EXPENDITURES:

This report reflects actuals, no estimates.

Highlights:

- AG allotments were adjusted (increased) in FM14, however expenditures continue to come in above budget due to ongoing litigation.
- Salaries and Benefits remain below allotment due to the additional allotments granted in the 2022 supplemental. Delays in filling new positions also contributed to the savings.
- FBI Background Checks are charged based on actual files processed and continue to trend higher than projected due to the increased volume of endorsement applications.
- Several service units are now exceeding projections due to expenditures associated with the volume of applications and an increase in staffing levels.
- Indirects are charged based on biennial allotments. Indirect allotments increased with the approval of our decision packages combined with the reduction of rates in FY23 resulted in significant savings to date.

FISCAL OUTLOOK:

The combination of higher than projected revenues and underspending the budget has resulted in a net gain of almost \$3M to the reserve balance since the beginning of the biennium. We anticipate revenues to continue to exceed projections with the new fee increase that was implemented on December 1, 2022. Additionally, savings with indirects is expected to continue through the remainder of the biennium. Direct expenditures and service units will accelerate as more staff are onboarded and as travel is reinstated, however we do not anticipate reaching full expenditure by the end of the biennium. As a result, the revenue balance will rebound and will exceed recommended levels for the remainder of FY23. The final HELMS withdrawal, \$2.6M, will take place at the end of June 2023, at which time we expect the revenue balance to drop below the recommended reserve once again prior to the start of the next biennium.

**Nursing Care Quality Assurance Commission
2021-23 Budget Status Report (Health Professions Account)**

For the period of July 1, 2021 through November 30, 2022

EXPENDITURES TYPES	BIENNIAL BUDGET	ALLOT THRU FM15	ACTUALS THRU FM15	PREV FM ALLOT FM16	PREV FM Expense FM16	Current FM ALLOT FM17	Current FM Expense FM17	BUDGET/ALLOT TO-DATE	EXPENDITURES TO-DATE	VARIANCE TO-DATE	% SPENT TO-DATE
DIRECT EXPENDITURES:											
FTEs (average)	81.33	83.89	81.62	83.89	82.15	83.89	89.32	81.33	77.63	3.70	95.45%
Staff Salaries & Benefits	\$16,788,320	\$10,386,599	\$9,976,746	\$711,301	\$746,046	\$711,301	\$807,177	\$11,809,201	\$11,529,969	\$279,232	97.64%
Commission Salaries	\$604,615	\$376,152	\$337,835	\$25,384	\$24,863	\$25,384	\$22,309	\$426,920	\$385,007	\$41,913	90.18%
Goods & Services	\$597,803	\$369,327	\$379,278	\$25,385	\$20,305	\$25,386	\$18,112	\$420,098	\$417,695	\$2,403	99.43%
Rent	\$830,031	\$509,151	\$372,873	\$35,654	\$24,631	\$35,654	\$1,348	\$580,459	\$398,852	\$181,607	68.71%
Attorney General (AG)	\$1,592,958	\$924,582	\$912,723	\$67,378	\$134,288	\$67,378	\$67,142	\$1,059,338	\$1,114,152	(\$54,814)	105.17%
Travel	\$180,000	\$111,015	\$46,115	\$7,665	\$13,972	\$7,665	\$12,041	\$126,345	\$72,128	\$54,217	57.09%
Equipment	\$111,696	\$63,996	\$55,637	\$5,300	\$9,093	\$5,300	\$6,400	\$74,596	\$71,131	\$3,465	95.35%
IT Support & Software Licenses	\$367,476	\$221,754	\$145,221	\$16,191	\$27,997	\$16,191	\$11,650	\$254,136	\$184,868	\$69,268	72.74%
TOTAL DIRECT	\$ 21,072,899	\$ 12,962,576	\$ 12,226,429	\$ 894,258	\$ 1,001,194	\$ 894,259	\$ 946,180	\$14,751,093	\$14,173,803	\$577,290	96.09%
SERVICE UNITS:											
FBI Background Checks	\$527,013	\$324,297	\$379,297	\$22,524	\$67,620	\$22,524	\$20,825	\$369,345	\$467,742	(\$98,397)	126.64%
Office of Professional Standards	\$435,023	\$251,513	\$220,501	\$20,223	\$42,467	\$20,223	\$13,667	\$291,959	\$276,634	\$15,325	94.75%
Adjudication Clerk	\$213,498	\$131,175	\$64,800	\$9,147	\$5,593	\$9,147	\$1,675	\$149,469	\$72,067	\$77,402	48.22%
HP Investigations	\$86,601	\$51,816	\$43,400	\$3,865	\$10,220	\$3,865	\$614	\$59,546	\$53,089	\$6,457	89.16%
Legal Services	\$39,570	\$23,523	\$23,575	\$1,783	\$1,815	\$1,783	\$235	\$27,089	\$25,585	\$1,504	94.45%
Call Center	\$164,978	\$98,792	\$93,171	\$7,354	\$13,235	\$7,354	\$6,144	\$113,500	\$106,406	\$7,094	93.75%
Public Disclosure	\$382,476	\$234,876	\$192,962	\$16,400	\$25,576	\$16,400	\$9,434	\$267,676	\$227,973	\$39,703	85.17%
Revenue Reconciliation	\$180,909	\$111,060	\$115,984	\$7,761	\$14,718	\$7,761	\$7,520	\$126,582	\$131,037	(\$4,455)	103.52%
Online Healthcare Provider Lic - Staff	\$305,352	\$188,154	\$170,969	\$13,022	\$55,964	\$13,022	\$6,956	\$214,198	\$233,889	(\$19,691)	109.19%
Online Healthcare Provider Lic - Contract	\$195,792	\$122,370	\$127,488	\$8,158	\$0	\$8,158	\$0	\$138,686	\$127,488	\$11,198	91.93%
Suicide Assessment Study	\$40,800	\$25,500	\$10,915	\$1,700	\$721	\$1,700	\$0	\$28,900	\$11,636	\$17,264	40.26%
TOTAL SERVICE UNITS	\$ 2,572,012	\$ 1,563,076	\$ 1,443,063	\$ 111,937	\$ 237,928	\$ 111,937	\$ 67,069	\$1,786,950	\$1,733,546	\$53,404	97.01%
INDIRECT CHARGES:											
Agency Indirects (16.9% in FY1 - 15.3% in FY2)	\$3,964,221	\$2,435,238	\$2,039,686	\$168,695	\$189,187	\$168,695	\$141,996	\$2,772,627	\$2,370,870	\$401,758	85.51%
HSQA Division Indirects (11.3% in FY1 - 9.7% in FY2)	\$2,648,714	\$1,627,112	\$1,383,247	\$112,714	\$119,925	\$112,714	\$90,002	\$1,852,540	\$1,593,174	\$259,366	86.00%
TOTAL INDIRECTS (28.2% in FY1 - 25% in FY2)	\$ 6,612,936	\$ 4,062,349	\$ 3,422,933	\$ 281,409	\$ 309,112	\$ 281,409	\$ 231,998	\$4,625,167	\$3,964,043	\$661,124	85.71%
GRAND TOTAL	\$30,257,847	\$18,588,001	\$17,092,425	\$1,287,604	\$1,548,234	\$1,287,605	\$1,245,247	\$21,163,210	\$19,871,392	\$1,291,818	93.90%

NURSING REVENUE

BEGINNING REVENUE BALANCE	\$ 4,257,147
21-23 REVENUE TO-DATE	\$ 22,045,099
21-23 HELMS ASSESS. TO-DATE	\$ 2,887,402
21-23 EXPENDITURES TO-DATE	\$ 19,871,392
ENDING REVENUE BALANCE	\$ 3,543,452

Academic Progression - Updated January 2023

Goals: Evaluate the demand for licensed practical nurses and registered nurses in the state. Continue the discussion of the appropriate education preparation and scope of practice for PNs.

Objectives	Responsibility	Resource projections (time, staff, money, etc.)	Deadlines	Progress
1) List barriers and strengths identified by employer organizations of current models for consistent academic preparation for LPNs	Mary Sue Gorski,	Expand interested party discussions statewide and nationally to include broader range of employer organizations.	Expanded employer groups to convene Fall 2022	Complete
2) Develop a report using workforce data, stakeholder group input, and national collaboration.	Paula Meyer, Mary Sue Gorski, Gerianne Babbo	Pull together NCSBN input, workforce data analysis, and stakeholder input to develop a full report of progress to date	Winter 2022	Completed
3) Explore outcomes of existing LPN education models.	Paula Meyer, Mary Sue Gorski, Gerianne Babbo	Refer to Research Subcommittee to develop plan for next steps January 2023.	February 2022 through February 2024	January 2023 to research subcommittee July 2023 plan to NCQAC for recommendations.

Communications – Updated December 2022

NCQAC Communications has identified three overarching goals, and the objectives listed in the table below directly support these goals. Objectives will be met through specific tasks outlined in our separate workplan. Year One of the biennium will be spent doing the work to achieve these goals, and year two will be spent evaluating our success/progress, as well as finalizing any work that supports the goals. Evaluation methods will be determined for each objective prior to Year Two.

Goals:

- **Provide exceptional communications internally and externally.**
- **Develop and implement a strong and meaningful identity for NCQAC, to include mission, vision statement, and logo.**
- **Ensure accessibility and inclusivity in all aspects of communication with the public and our stakeholders.**

High Level Objectives	Responsibility	Resource projections (time, staff, money, etc.)	Deadlines	Progress
Construct a new, streamlined website	NCQAC Communications, Communications Task Force	NCQAC Communications/WaTech staff, unit input Lead: Shad	Winter 2022	New website live www.nursing.wa.gov Continuing to improve and add content (data dashboards, preceptor page, etc)
Revamp SharePoint for internal use by staff to include a landing page for information sharing	NCQAC Communications	NCQAC Communications/DOH IT staff, unit input Lead: Shad	Spring 2023	Start moving forward in January
Develop and implement style guide and publication standards	NCQAC Communications	NCQAC Communications, leadership input Lead: Amy	Spring 2023	To be completed in tandem with website build

High Level Objectives	Responsibility	Resource projections (time, staff, money, etc.)	Deadlines	Progress
Develop and ensure that Language Access Plan requirements are met for publications that have accessibility requirements.	NCQAC Communications, Communications Task Force	NCQAC Communications, leadership input Lead: Laura	Spring 2023	DOH revamping process. Working with them to make sure NCQAC complies.
Develop and implement agency templates for a variety of purposes, such as GovDelivery PowerPoint, MS Word, Excel, Teams/Zoom meetings, etc.	NCQAC Communications	NCQAC Communications, leadership input Lead: Amy	Spring 2023	To be completed once identity is defined, which will happen in initial phase of website build.
Complete the communications visions submitted by each division.	NCQAC Communications, Communications Task Force	NCQAC Communications, leadership input All	Winter 2022	Some completed with new website, remainder need to be reviewed.
Determine evaluation methods for objectives supporting goals.	NCQAC Communications, Communications Task Force	NCQAC Communications, leadership buyoff Lead: Amy	Summer 2022	Transition project from Rebecca to Jessilyn.
Evaluation Period	NCQAC Communications, Communications Task Force	NCQAC Communications, leadership buyoff All, Amy	Spring 2023	To be completed prior to July 1, 2023

Nursing Assistants – Established August 2021 (for 2021-2023) – **UPDATED December 14, 2022**

Goal: Streamline nursing assistant training and testing processes, expand capacity through use of technology, and support progression into nursing as evidenced by the following outcomes:

- New training program applications consistently reviewed in 7-10 days;
- Statewide first-time test-taker pass rates (average, annualized) improved to 75% for 2023 and to 80% by 2024;
- Testing capacity increases to 22,932 test-takers per year (119% increase) through use of a virtual approach;
- Quantitative ratings of >3.7 on a 5-point scale on electronic surveys regarding the new curriculum by training programs and students at 6, 12, and 18 months post-implementation; and
- The LPN Registered Apprenticeship Program (LPN RAP):
 - Enrolls 45 students (15 at each pilot site) in three different geographical areas in 2023; and
 - The completion rate for students in the pilot is $\geq 85\%$.

Objectives	Staff Responsibility	Resource projections (time, staff, money, etc.)	Deadlines	Progress
1 —Pilot, evaluate, and refine the new nursing assistant training curriculum.	Kathy Moisio	Porsche Everson is contracted to support pilot preparation; members of the LTC Workforce Development Steering Committee and Workgroups are eager to pilot. NAPAP to review and make decisions re feedback/refinements.	• To be completed in SPRING 2022	• Completed April-June 2022
2 —Establish a steering committee, workgroup, and workplan for the LPN Apprenticeship Pathway; hire a Nurse Consultant to lead the LPN Apprenticeship Pathway work; and host a statewide LTC Summit to gain statewide stakeholder input on developing the pathway.	Kathy Moisio with new hire taking over the leadership role once hired	Dr. Mary Baroni has been instrumental in making connections to support the foundational work for a successful launch.	• To be completed in FALL 2021	• Completed Timely
3 —Conduct public rules meetings to gather input on nursing assistant rules revisions that address curriculum and testing changes and other needed updates.	Bonnie King and Kathy Moisio	Online meetings will be used maximally to provide efficiencies of time and cost and maximize stakeholder participation.	• To be completed in WINTER 2023	• In progress (7 meetings scheduled Oct-Feb)
4 —Testing plan or contract in place for 2022, including timelines for phasing in	Kathy Moisio in coordination with	Completion represents a challenge with other activities, but must be	• To be ready for implementation JAN 1, 2022.	• Recommendations are included in the contract on a

Objectives	Staff Responsibility	Resource projections (time, staff, money, etc.)	Deadlines	Progress
revisions recommended from the LTC Workforce Development Steering Committee and Testing Workgroup (virtual skills testing within training programs at point of graduation, new evaluation approach, etc.).	Contracts Unit, Paula Meyer, possibly legal staff, and the other agencies involved: DSHS and DOH/HSQA	finished by 12/31/2 to avoid interruptions to testing. NAPAP considers, makes decisions re: final plans.		phase-in schedule (2022-2023) <ul style="list-style-type: none"> • Contract completed/signed timely
5 —Develop nursing assistant curriculum into an online-capable format	Kathy Moisio	Legislative allocations are available to support this development as a means of assuring smooth progression from NAC toward LPN as part of the LPN Apprenticeship Pathway. Also, members from the LTC Workforce Development Steering Committee and Workgroups have expressed interest in participating. NAPAP participates and/or reviews, makes decisions re: final plans.	<ul style="list-style-type: none"> • To be completed in SPRING 2022 	<ul style="list-style-type: none"> • Completed by June 30, 2022
6 —Finalize nursing assistant rules revisions, incorporating stakeholder input.	<ul style="list-style-type: none"> • Bonnie King with support from Kathy Moisio and others (legal staff, DOH/HSQA staff, etc.) 	NAPAP reviews, makes decisions re: final version.	<ul style="list-style-type: none"> • To be completed after public meetings held (see item #3)—WINTER/SPRING 2023 	<ul style="list-style-type: none"> • Public meeting dates are in progress through Feb. 10, 2023
7 —Develop the communication/roll-out plan regarding curriculum, testing, and rules changes for launch in September 2022.	Kathy Moisio with support from Communications staff	Online meetings will be used maximally to provide efficiencies of time and cost and maximize stakeholder participation.	<ul style="list-style-type: none"> • To be completed in SUMMER-FALL 2022 	<ul style="list-style-type: none"> • Curriculum roll-out began in July 2022 with frequent online orientation sessions that continue today. • Testing changes are on hold with Mass Examination Plan

Objectives	Staff Responsibility	Resource projections (time, staff, money, etc.)	Deadlines	Progress
				<ul style="list-style-type: none"> Public Rules meetings are in progress
8 —Continue LPN Apprenticeship Pathway development with steering committee and workgroup members according to timelines established in the workplan.	Marlin Galiano	<ul style="list-style-type: none"> Legislative allocations cover the FTE for the new Nursing Consultant and for the costs of planning activities, contracts, etc. 	<ul style="list-style-type: none"> To continue through SPRING 2022 to JUNE 30, 2022 deadline 	<ul style="list-style-type: none"> Completed the planning phase timely-- Implementation phase in progress
9 —Participate actively in legislative session in relation to the Decision Package (DP), re-introducing HB 1124 (glucometer testing by nursing assistants), and support for LPN Apprenticeship Pilot funding.	Paula Meyer and others as directed	<ul style="list-style-type: none"> There is stakeholder support for re-introducing HB 1124. Senator Conway sponsored the LPN Apprenticeship Pathway planning and has expressed interest in supporting the piloting; federal grant submission may lead to funding to support piloting at one site. 	<ul style="list-style-type: none"> To occur in WINTER 2022 	<ul style="list-style-type: none"> Decision Package Passed HB 1124 Passed Federal Grant Passed (Yakima Valley College) These Milestones Completed Timely
10 —Implement the communication/roll-out plan for curriculum/testing/rules revisions	Kathy Moisio, Alana Llacuna, New Staff via Decision Package (starting in Sept. 2022)	NAPAP members and members of the LTC Workforce Development Curriculum and Testing Workgroups may have interest in participating; online presentations will be used maximally for time/cost efficiency and ease of participation by stakeholders.	<ul style="list-style-type: none"> To begin in SUMMER 2022 	<ul style="list-style-type: none"> Curriculum roll-out underway timely Testing revisions on hold during implementation of the Mass Examination Plan Public meetings in progress Oct 2022-Feb 2023.
11 —Begin LPN Apprenticeship Pathway approval processes (NCQAC and LNI)	Marlin Galiano	NPAP and LNI will provide review and decisions; NCQAC and LNI staff may also provide	<ul style="list-style-type: none"> To begin in after plan is developed – deadline for 	<ul style="list-style-type: none"> Curriculum work underway

Objectives	Staff Responsibility	Resource projections (time, staff, money, etc.)	Deadlines	Progress
		technical assistance as needed; steering committee and workgroup support revision work as needed.	planning is JUNE 30, 2022	<ul style="list-style-type: none"> Students beginning pre-requisite coursework in Jan LNI and NCQAC approvals lie ahead
12 —Launch new nursing assistant curriculum and testing revisions with corresponding rules effective; Provide ongoing support, evaluation, continuous quality improvement	Kathy Moisio, Alana Llacuna, New Staff via Decision Package (starting in Sept. 2022)	Contracted testing vendor or implementing entities provide direct testing services with staff overseeing performance; stakeholder feedback and NPAP review and decisions provide support for continuous quality improvement.	• SEPTEMBER 2022 –Onward with goal of having rules revisions in place Sept 2023	<ul style="list-style-type: none"> Curriculum is on-target and available as of July 2022 to programs who want to launch voluntarily A rolling phase-in process is in place with a goal of all programs using as of Sept. 2024 Testing revisions paused as we implemented the Mass Examination Plan A series of public meetings for rules began in Oct. (Oct-Feb)
13 —Launch LPN Apprenticeship Pathway pilot in 1-3 sites (in accordance with funding, if received)	New Nursing Consultant	NPAP and LNI will provide review and decisions; NCQAC and LNI staff may also provide technical assistance as needed.	• GOAL: A timeline for the work is in development	<ul style="list-style-type: none"> Work to launch this is active and in progress

WHPS Updated December 19, 2022

Goal: Increase the number of nurses enrolled in the Washington Health Professional Services (WHPS) program voluntarily and in lieu of discipline (with an emphasis on in lieu of discipline) by 25% every two years through education, early identification, referral to treatment, and advocacy. NCQAC and WHPS staff do this by promoting the just culture model and employment retention. Focus on in-lieu-of-discipline enrollment per September 2022 commission decision.

Baseline from 2019: 300 nurses Projected 2021: 375 nurses Projected 2023: 469 nurses Projected 2025: 587 nurses

Will require an additional case management team for each 100 nurses added to the program.

<i>Objectives</i>	<i>Responsibility</i>	<i>Resource projections</i>	<i>Deadlines</i>	<i>Progress</i>
Provide educational resources, including but not limited to lectures, brochures, web sites, publications/articles, newsletters, display booths, on-site consultations...	Dr. Furman WHPS staff NCQAC Communication task force		2. WHPS materials reviewed and updated – December 2021	Tool kit, BONcast, new information, resources, posted on nursing.wa.gov. Blog posted June 2022. Dr. Furman is distributing new posters.
Host a SUD-related educational conference every two years.	Dr. Furman to coordinate 2023 SUD conference with Amy Sharer and Shad Bell.		Begin conference prep December 2022	Next conference Fall 2023; planning underway to secure speakers. Conference will be in-person.
Develop education courses, modules and toolkits for interested party use.	Dr. Furman WHPS staff	Work with Communications Task Force and C4PA to develop resources to include on the new NCQAC/WHPS web site.		Blog posted beginning June 2022. Virtual toolkit on website.

				WHPS BONcast on nursing.wa.gov under About Us/Who We Are, or under Quicklinks on home page.
Support professional workforce reentry and increase employment retention by 10% through education and cooperative approach to worksite monitoring, prioritizing patient safety.	Dr. Furman WHPS staff	N/A	10% annual goal, reportable in March of each year beginning in 2022. (annual report) Also found in performance measures.	Dr. Furman has approached WSNA, SEIU, and UFCW to gauge current interest. Ongoing effort.
Reduce the number of nurses who withdraw from monitoring due to financial limitations by 50%.	Dr. Furman – WHPS Liaison	Explore options for making scholarship funds available for nurses in financial straits.	On hold during pandemic. Goal to reach 50% reduction in withdraws by November 2024.	Dr. Furman negotiating with nursing associations. To shift focus to other organizations.
Develop a Substance Use Disorder Review Panel (SUDRP) as an organization-based intervention tool for nurses. This will take the place of the Substance Use and Abuse Team and will connect nurses in WHPS with commission members (both disciplinary and for achieving milestones). The intent is to reduce noncompliance and recidivism rates and increase program completion rates.	Discipline Subcommittee; Assistant Director, Discipline – WHPS (lead on project).		Annual updates at July commission meetings beginning 2023.	July 2022 SUDRP fully implemented.



The Washington State Nursing Care Quality Assurance Commission (NCQAC)
Academic Progression and the Licensed Practical Nurse

January 2023

Summary and Next Steps

Introduction

Currently, there is a global shortage of nurses. Over the last 10 years Washington State has seen a decrease in the licensed practical nurse (LPN) population. To address this issue, the Nursing Care Quality Assurance Commission is beginning a discussion about the education and scope of practice for the LPN.

One trend noted has been that LPNs are working beyond their scope of practice particularly in assisted living facilities. Questions being asked included: What is the appropriate education level and standards for the LPN? What is the need for the LPN and the registered nurse (RN)? At the July 2019 meeting, the Nursing Commission endorsed an exploration of this topic as a strategic initiative.

The strategic plan conversation began March 2020 with a webinar series representing 19 states and six Canadian Provinces. Although there were many individuals registered for more than one webinar there were a total of 68 unique registrants interested in this topic.

The webinar series validated concerns about variability in education and scope of practice but more data was needed to recommend solutions. Focus groups including employers, practice partners, and educators were brought together to broaden and deepen the input.

Findings from the webinar series and the focus groups are summarized below followed by recommendations for next steps in this important workforce strategic initiative.

Webinar Series

The first webinar was focused on LPN education requirements. The second was RN scope of practice and education requirements and the third webinar explored LPN scope of practice, demand, roles, and activities. The final webinar covered LPN and RN education, role, scope, and demand overlap as well as identifying specific areas of concern and potential solutions.

A grid was developed as a resource for the webinar series to illustrate LPN education requirements. The grid illustrated a wide variability in education of both credits and content required. Participants shared that states and provinces regulate scope of practice and set the standard for education received. Participants validated the wide variation across states and provinces.

Results of a literature review also shared at the webinar revealed role ambiguity and role conflict have been reported between LPNs and RNs. Examples were given of the RN role overlap with the LPN role in different states and provinces.

The scope of practice for LPNs is often defined differently for each care setting which can add to role confusion. A scope of practice decision tree is being used in some states for LPNs and RNs and can be a helpful tool to clarify roles.

There is variance in the education and scope of practice of LPNs. The industry is driving where they can be hired and work. The nursing shortage is driving the way that LPNs are being utilized. Creative strategies have been employed to provide academic progression pathways for LPNs. Wide variability in staffing patterns and salary add to potential confusion. Following the webinar series, it became clear that more information and discussions was needed to address these main concerns.

Focus Group Discussions

The individuals selected to provide additional information represented a wide range of educators, practicing nurses, employers, regulators, and administrators. Each focus group received a full packet of summary materials and were asked to provide additional input. A summary of the webinars and a historical perspective was presented to each group.

The discussion focused on these questions posed; What is the role of the LPN? How do LPNs, employers, and RNs know the full scope of the LPN practice? How is LPN demand determined? and What are the experiences you are having in your state that concern you about LPN and RN practice and education? Some key input is summarized below.

LPN demand. The use of advisory opinions, decision tree, and WACs as the directive in teaching settings to guide their knowledge of the top of the LPN scope was discussed. The consensus was that in some cases there is a lack of RNs and a “need” that must be met which the LPNs may be asked to fill.

The role of the LPN in LTC and in home-health settings is more of a leadership oversight role while in acute care setting it is more of a support role. The LPN is also being seen more in community settings. Some LTC facilities depend on LPNs and can’t afford to staff full RN nursing staffs. There is an economical factor that effects the rise and fall of LPN demand in programs and the workforce.

The LPN role has not been very well understood for many years. It’s importance waxes and wanes depending on employers staffing methodology. Many believe that every individual that goes into the nursing profession should be on a trajectory whether they start out as a nursing assistant, LPN, RN or ARNP.

Employers might post positions available as interchangeable MAs or LPNs. This is a disservice to LPNs because employers expect the same scope of practice and professionalism from both roles.

The ambiguity of the LPN role is affecting both the MA and LPN as well as the LPN and RN distinction. Employers are also seeing confusion with the CNA and MA role. In some settings, CNAs are being expected to perform like MAs causing gaps in the workforce.

Over the last few years, LPNs have been replaced with RNs due to ambiguity in what the scope is and where those boundaries are for LPNs. There has been a recent interest in trying to understand LPN full scope as well as their limits.

Education preparation of LPNs. Focus groups report a wide variability of education requirements across states and within our state. The variability included number of credits as well as content required. Participants shared that states and provinces regulate scope of practice and set the standard for education received. Although not explicitly stated, this variance in education preparation likely contributes to employer confusion and scope of practice misunderstandings.

Three different types of LPN academic progression programs have the potential to clarify the LPN role and the intersect between LPN and RN nursing care.

- 1) LPN education (certificate or AD) with an exit as an LPN.
- 2) LPN to ADN program providing students an LPN education with an option to exit at the LPN or continue to an AD RN.
- 3) LPN to BSN programs providing practicing LPNs the pathway to continue their education by completing education for an RN and BSN together.

Scope of Practice. LPNs are heavily relied on in LTC settings resulting in more LPNs being put into places where the level of care is beyond their education. It was noted that industry drives the scope of practice of LPNs. Why does the LPN vary significantly from state to state? Should the LPN role, scope and education be more universal?

There's confusion with LPNs about their scope. For example, LPNs may enter an LPN to RN program with the understanding that they already do everything that RNs do.

There are levels of nursing care and each of the subsequent levels incorporates the prior. The LPN should be right in between CNA and RN.

There is evidence there is a role for the LPN and currently, there is a need for every level of nursing. A team nursing model might be the future for integrating LPNs in different healthcare facilities. LPNs have the skills, licensure, and ability to do many direct nursing roles.

Summary/Next steps

The goal of this strategic initiative was to open a discussion on the scope of practice and education level standards of the LPN and broaden the input on this topic. We sought input both in state and across the US and Canada. Review of this input reinforces the variability in LPN scope of practice, role confusion and variations in education level/standards across the interested parties we engaged.

There was also a strong demand for LPNs to work in a variety of settings. The initial goal of opening the discussion as a strategic initiative has been met and results were very productive. In addition to validating the findings of the variation in scope of practice and education level, there is an increased awareness of the breadth and depth of the challenge.

After careful review of the extensive input received over two years and across 19 states, we recommend incorporating this work into the overall workforce efforts of the Nursing Commission. The discussion and input provided an in-depth exploration of this topic. There continues to be unanswered questions that need long term solutions.

There are also two initiatives in our state partially addressing the workforce challenges identified. At this time, we recommend the Research Subcommittee be asked to add to their workplan to monitor this workforce challenge. This would include continuing to support the ongoing initiatives; the state work on LPN to BSN progression and LPN apprenticeship and to evaluate the outcomes associated with these initiatives. We also recommend that we revisit the strategic initiative in July 2023 to evaluate the research Subcommittee's role in this work. It is essential for the Nursing Commission to track progress and intervene if appropriate to solve this complex nursing workforce challenge.

Paula R. Meyer MSN, RN, FRE Executive Director Nursing Care Quality Assurance Commission Washington State Department of Health	Mary Sue Gorski, PhD, RN Director Research and Advanced Practice Nursing Care Quality Assurance Commission marysue.gorski@doh.wa.gov
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DRAFT

Nursing Care Quality Assurance Commission
Washington Administrative Code (Rules) Agenda
Updated: 12/21/2022

Website: <https://nursing.wa.gov/support-practicing-nurses/rules-laws-and-statements/rules/rules-progress>

#	Profession	Staff Content Experts Rules Staff assigned	WAC Sections	Purpose for Rule Making	CR-101 Preproposal	CR-102 Proposal & CR-105 Expedited	CR- 103P Perma nent	CR-103E Emergency 120-day limit WSR means Washington State Register
Emergency Rules								
1	RN, ARNP, NA Basic Caregiver Training Emergency Rules	Kathy Moisio Jessilyn Dagum	9/9/2022: Revised: 246-840-930 246-841-405 3/14/2022: Original: 246-840-930 246-841-405	Amending specific training requirements for Nursing Assistants Registered (NARs) and Home Care Aides (HCAs). The Nursing Care Quality Assurance Commission (commission) is adopting an emergency rule to <u>allow a registered nurse delegator to delegate nursing tasks to a NAR or HCA based on evidence as required by DSHS and in accord with timing set by DSHS in rule.</u> To align with the corresponding NAR rule, the commission is adopting emergency language to correspond. (Emergency rules expire every 120 days and must be re-filed, if necessary).				WSR: File: 1/6/2023 WSR: 22-19-006 Filed: 9/9/2022 WSR: 22-15-020 Filed: 7/12/2022 WSR: 22-07-046 Filed: 3/14/2022
2	NT, LPN, RN, ARNP Nursing Emergency Rules	Debbie Carlson, Gerianne Babbo, Mary Sue Gorski, Jessilyn Dagum	9/9/2022 Revised: 246-840-365, 367 5/13/2022 Revised: 246-840-365, 367, 533 1/14/2021 Revised:	Amend specific credential and license requirements for Nurse Technicians (NT), Licensed Practical Nurses (LPN), Registered Nurses (RN), and Advanced Registered Nurse Practitioners (ARNP) in response to the COVID-19 pandemic and the critical demand for healthcare professionals. (Emergency rules expire every 120 days and must be re-filed, if necessary).				WSR: File: 1/6/2023 WSR: 22-19-008 Filed: 9/9/2022 WSR: 22-11-047 Filed: 5/13/2022 WSR: 22-03-056 Filed: 1/14/2022 WSR: 21-19-092

#	Profession	Staff Content Experts Rules Staff assigned	WAC Sections	Purpose for Rule Making	CR-101 Preproposal	CR-102 Proposal & CR-105 Expedited	CR-103P Permanent	CR-103E Emergency 120-day limit WSR means Washington State Register
			246-840-010, 365, 367, 533, 840 9/17/2021 Revised: 246-840-010, 365, 367, 533, 840, 930 4/24/2020 Original: 246-840-010, 125, 210, 240,361, 365, 367, 533, 534, 840, 930					Filed: 9/17/2021 WSR: 21-12-012 Filed: 5/20/2021 WSR: 21-04-005 Filed: 1/20/2021 WSR: 20-22-024 Filed: 10/23/2020 WSR: 20-14-065 Filed: 6/26/2020 WSR: 20-10-014 Filed: 4/24/2020
3	NAR, NAC Nursing Assistants Emergency Rules	Kathy Moisio Jessilyn Dagum	1/14/2022 Revised: 246-841-420, 470, 490, 500, 510, 555 6/26/2020 Original: 246-841-405, 420, 470, 490, 500, 510, 555	Amend specific training requirements for Nursing Assistant Certified (NAC) and Nursing Assistant Registered (NAR) in response to the COVID-19 pandemic and the critical demand for healthcare professionals. (Emergency rules expire every 120 days and must be re-filed, if necessary).				WSR: File: 1/6/2023 WSR: 22-19-007 Filed: 9/9/2022 WSR: 22-11-049 Filed: 5/13/2022 WSR: 22-03-055 Filed: 1/14/2022 WSR: 21-19-091 Filed: 9/17/2021 WSR 21-12-011 Filed: 5/20/2021 WSR 21-04-004 Filed: 1/20/2021

#	Profession	Staff Content Experts Rules Staff assigned	WAC Sections	Purpose for Rule Making	CR-101 Preproposal	CR-102 Proposal & CR-105 Expedited	CR- 103P Perma nent	CR-103E Emergency 120-day limit WSR means Washington State Register
								WSR 20-22-023, Filed: 10/23/2020 WSR 20-14-066 Filed: 6/26/2020
Standard Rulemaking								
4	NA Standards of Practice & NAC Training Program Standards	Kathy Moio Bonnie King	Chapter 246-841 WAC (amend) Chapter 246-842 WAC (repeal)	Legislated work by NCQAC with key interested parties in 2018-2020 resulting in a final Long-Term Care Report to the Legislature (June 2021) confirmed the need for updating rules. The coronavirus disease 2019 (COVID-19) pandemic magnified the need and urgency for changes to eliminate barriers to career advancement for nursing assistants to help address the nursing assistant shortage in health care. NCQAC believes standardizing curriculum in training programs will also result in standardizing scope of practice across work settings.	WSR: 21-05-021 Filed: 2/8/2021 Note: The Nursing Assistant Program Approval Panel (NAPAP) is reviewing draft language with interested parties in seven public workshops between October and February.			
5	NA Secretary Authority Rules	Ross Valore (HSQA) Kathy Moio Bonnie King	246-841-520, 720	Chapter 246-841 WAC is being revised. Within the chapter are three sections which are under the authority of the DOH Secretary: WAC 246-841-520 Expired licenses, 720 Mandatory reporting, 990 Fees. WAC 246-841-520 and 720 need revisions to align with the rest of the chapter revisions which are ongoing. See # 4 above.	WSR: 22-08-019 Filed: 3/28/2022			
6	ARNP Inactive and Expired Licenses	Mary Sue Gorski Jessilyn Dagum	246-840-365, 367	Concerns expressed at the 3/11/2022 CR-102 rules hearing (see Emergency to Perm Rules below effective 9/9/2022) caused the commission to remove 365 and 367 from consideration. They voted to begin a new CR-101 process and consider adding other rule sections.	WSR: 22-12-090 Filed: 6/1/2022 Note: The NCQAC approved filing a Preproposal at the 3/11/2022	WSR: 23-01-134 Filed: 12/20/2022 Note: The rule hearing is scheduled for 1/27/2022 at 12:00 PM.		

#	Profession	Staff Content Experts Rules Staff assigned	WAC Sections	Purpose for Rule Making	CR-101 Preproposal	CR-102 Proposal & CR-105 Expedited	CR- 103P Perma nent	CR-103E Emergency 120-day limit WSR means Washington State Register
					meeting. Interested Parties Workshop held 6/21/2022 and 6/30/22.			
7	ARNP Opioid Prescribing	Mary Sue Gorski Jessilyn Dagum	WAC 246-840- 463 and 246- 840-4659	The rules were opened to address concerns expressed by Washington state long-term care associations and advanced practice nursing associations about the implementation of the 2018 opioid prescribing rules. On December 21, 2018, the NCQAC adopted Interpretive Statement (NCIS 2.00), Application of WAC 246-840-4659 to nursing homes and long-term acute care hospitals. Interpretive statements are not enforceable and not subject to discipline under the Uniform Disciplinary Act. Opening the rule provides the opportunity for additional stakeholder engagement, rule clarification, and possible amendments to address identified concerns.	WSR: 19-15-092 Filed: 7/22/2019 Note: Interested Parties Workshop held 6/21/2022 and 6/30/22.			

#	Profession	Staff Content Experts Rules Staff assigned	WAC Sections	Purpose for Rule Making	CR-101 Preproposal	CR-102 Proposal & CR-105 Expedited	CR-103P Permanent	CR-103E Emergency 120-day limit WSR means Washington State Register
8	NT, LPN, RN, ARNP Temporary Practice Permits	Amber Zawislak, Debbie Carlson, Gerieanne Babbo Jessilyn Dagum	246-840-095	When the department and commission first began completing FBI fingerprint background checks on out-of-state applicants the process took several months. To remedy this delay in licensure, the commission issues a temporary practice permit after the applicant meets all other licensure requirements, allowing the nurse to begin working in Washington State. Under WAC 246-840-095, the temporary practice permit is valid for 180 days or until the commission issues a permanent Washington State license to the nurse. WAC 246-840-095 also allows for an additional 180-day extension of the temporary practice permit if the department has not received the fingerprint results during the initial 180-day period. The commission intends to engage in rulemaking to shorten the length of a temporary practice permit and to align the internal NCQAC process with WAC language.	WSR: 22-06-057 Filed: 2/25/2022 Note: NCQAC approved filing a Preproposal in a 2017 commission meeting. Interested parties' workshops scheduled for: 7/7/22, 8/4/22, and 9/19/22.			
9	RN, ARNP, NA Delegation Legislation SHB 1124 Governor signed 3/11/22 Effective 7/1/2022	Debbie Carlson, Jessilyn Dagum	246-840-010, 700, 910, 920, 930, 940, 950, 960	1124-S.PL.pdf (wa.gov) Nurse Delegation of Glucose Monitoring, Glucose Testing, and Insulin Injections (c) Except as authorized in (b) or (e) of this subsection, a registered nurse may not delegate the administration of medications. Except as authorized in (e) or (f) of this subsection, a registered nurse may not delegate acts requiring substantial skill and may not delegate piercing or severing of tissues. Acts that require nursing judgment shall not be delegated. (e) For delegation in community-based care settings or in-home care settings, a registered nurse may delegate nursing care	WSR: Filed: Note: At a commission meeting held on May 13, 2022, the commission voted to begin the rulemaking process for nursing rules.			

#	Profession	Staff Content Experts Rules Staff assigned	WAC Sections	Purpose for Rule Making	CR-101 Preproposal	CR-102 Proposal & CR-105 Expedited	CR- 103P Perma nent	CR-103E Emergency 120-day limit WSR means Washington State Register
				<p>tasks only to registered or certified nursing assistants <u>under chapter 18.88A RCW</u> or home care aides certified under chapter 18.88B RCW.</p> <p>(v) When delegating insulin injections under this section, the registered nurse delegator must instruct the individual regarding proper injection procedures and the use of insulin, demonstrate proper injection procedures, and must supervise and evaluate the individual performing the delegated task (()) <u>as required by the commission by rule</u>. If the registered nurse delegator determines that the individual is competent to perform the injection properly and safely, supervision and evaluation shall occur at (()) <u>an interval determined by the commission by rule</u>.</p> <p>(f) <u>The delegation of nursing care tasks only to registered or certified nursing assistants under chapter 18.88A RCW or to home care aides certified under chapter 18.88B RCW may include glucose monitoring and testing.</u></p>	Note: NA rules in progress will incorporate language for NAs. See #4 above.			

#	Profession	Staff Content Experts Rules Staff assigned	WAC Sections	Purpose for Rule Making	CR-101 Preproposal	CR-102 Proposal & CR-105 Expedited	CR- 103P Perma nent	CR-103E Emergency 120-day limit WSR means Washington State Register
10	RN, LPN, ARNP, NA, NT Health Equity Continuing Competency Legislation ESSB 5229 effective 7/25/2021	Shana Johnny, Jessilyn Dagum		5229-S.SL.pdf (wa.gov) Health Equity & Continuing Competency The law, effective 7/25/2021, in Section 2 requires rule-making authorities for each health profession to adopt rules requiring a licensee to complete health equity continuing education training at least once every 4 years. The new law is very prescriptive. DOH has developed minimum standards (model rules) effective 12/24/2022. The CR-103 was filed on 11/23/2022 under WSR 22-23-167. Information about available courses must be available to licensees by 7/1/2023 and include a course option that is free of charge. The nursing commission must adopt rules that meet or exceed minimum standards by 1/1/2024.	WSR: Filed: Note: 9/9/2022 Commission votes to begin NCQAC rule making.			
Rules Effective 2021-2022								
1	ARNP Scope of Practice (Standard rulemaking)	Mary Sue Gorski Jessilyn Dagum	246-840-300, 700, 710	The rules were opened in response to an April 3, 2018, petition about scope of practice for advanced registered nurse practitioners. The proposed amendments to WAC 246-840-300, WAC 246-840-700 and 246-840-710 introduce new and revised language that clarify the ARNP scope of practice, update gender pronouns, and include other housekeeping changes.	WSR: 19-01-002 Filed: 12/5/2018 Note: Workshops on the concepts were held 1/22, 23, 24/2019. The Advanced Practice Subcommittee drafted language. Additional public workshops were	WSR: 22-15-078 Filed: 7/18/2022 Note: Hearing was held on 9/9/2022 Business meeting at 1:15 PM.	WSR: 22-23-130 Filed: 11/21/2022	

#	Profession	Staff Content Experts Rules Staff assigned	WAC Sections	Purpose for Rule Making	CR-101 Preproposal	CR-102 Proposal & CR-105 Expedited	CR-103P Permanent	CR-103E Emergency 120-day limit WSR means Washington State Register
					held 1/26 and 2/7/2022.			
2	NT Nursing Technician Definition (Expedited rulemaking)	Gerianne Babbo Tim Talkington Bonnie King	246-840-010	The commission Education Subcommittee determined the proposed rules are needed to align rule language with the statute, RCW 18.79.340 regarding requirements for nursing program approval.		Expedited WSR: 22-12-092 Filed: 6/1/2022 Public comment period ends 8/1/2022. CR-105 expires 180 days after publication. Must file CR-103P Before 11/28/2022	WSR: 22-17-144 Filed: 8/23/2022 Effective 9/23/2022	
3	NT, LPN, RN, ARNP Fees (Standard rulemaking)	Chris Archuleta Fiscal Staff (HSQA) Bonnie King	246-840-990	The Secretary of the Department of Health in consultation with NCQAC is considering an increase in licensure fees for professions under its regulation. A fee increase is needed to address the increasing costs associated with the agency's new Healthcare Enforcement and Licensing Modernization Solution (HELMS) database, the need to increase staffing levels to meet the new legislative mandate to process nurse licenses in seven days or less, and an increase in workload associated with implementing solutions addressing the nursing assistant and long-term care crisis.	WSR:21-23-053 Filed: 11/10/2021 Note: The NCQAC voted at the 9/9/2021 meeting to begin the standard rulemaking process.	WSR: 22-10-104 Filed: 5/4/2022 Note: The DOH hearing is scheduled for 6/13/2022 at 2 pm.	WSR: 22-15-074 Filed: 7/18/2022 Note: Effective 12/1/2023 to allow time for 90 day advance notice about the fee change.	
4	NT, LPN, RN, ARNP Emergency to Permanent Rules (Standard rulemaking)	Debbie Carlson, Gerianne Babbo, Mary Sue Gorski, Shana Johnny Jessilyn Dagum	3/11/2022 246-840-533, 930 9/17/2021 Original 246-840-365, 367, 533, 930	Create permanent rules from some of the previous emergency rules. The NCQAC first adopted emergency rules in response to COVID-19 in April 2020. They were refilled multiple times while permanent language is being developed.	WSR: 21-19-104 Filed: 9/17/2021 Note: Public workshops held 11/3 & 11/8/2021. CR-102 hearing scheduled for 3/11/2022.	WSR: 22-04-081 Filed: 1/31/2022 Note: CR-102 hearing held 3/11/2022. WAC 246-840-365, 367 removed and will be included in a new CR-101.	WSR: 22-12-026 Filed: 5/23/2022 Note: Effective 9/9/2022 to coincide	

#	Profession	Staff Content Experts Rules Staff assigned	WAC Sections	Purpose for Rule Making	CR-101 Preproposal	CR-102 Proposal & CR-105 Expedited	CR-103P Permanent	CR-103E Emergency 120-day limit WSR means Washington State Register
							with expiration of emergency rule.	
5	LPN/NT Practice Opportunities (Standard rulemaking)	Debbie Carlson, Gerianne Babbo, Shana Johnny Jessilyn Dagum	246-840-010, 840, 850	Allow LPN students practice opportunities. NCQAC's legislative panel completed a review of the benefits of apprenticeship programs. The panel recommended opening rules to grant LPN students the same opportunity as registered nurse (RN) students to obtain a nurse technician credential.	WSR: 20-11-044 Filed: 5/18/2020 Note: Workshops 10/5, 9/2020. NCQAC approved rule language for (CR-102) on 3/12/2021.	WSR 21-20-058 Filed: 9/28/2021 Note: Hearing held 11/12/2021. CR-103 to be filed with an effective date of 5/15.	WSR: 22-04-082 Filed: 1/31/2022 Note: Effective 5/13/2022 to coincide with expiration of emergency rule.	
6	NT, LPN, RN Continuing Competency (Standard rulemaking)	Amber Zawislak, Shana Johnny, Debbie Carlson, Gerianne Babbo, Mary Sue Gorski Bonnie King	WAC 246-840-111, 120, 125, and 200 through 260	The Nursing Care Quality Assurance Commission (commission) is adopting amendments to the continuing competency rules and requirements for active, inactive, expired, and retired active credential statuses. This reduces the continuing education hours from 45 hours to eight hours, the active practice hours from 531 to 96 hours and the reporting period from a three-year cycle to an annual cycle. These changes applied to the retired active rule, the active credential rule, the reactivation from expired rule, and the reactivation from inactive rule. The commission also adopted changes that now allow the commission to choose to audit licensees based on a random audit, or as part of the disciplinary process and the language for extensions is removed as it is no longer needed.	WSR: 19-01-001 Filed: 12/5/2018	WSR: 21-04-096 Filed: 2/1/2021	WSR: 21-11-032 Filed: 5/12/2021 Effective 6/12/2021	

#	Profession	Staff Content Experts Rules Staff assigned	WAC Sections	Purpose for Rule Making	CR-101 Preproposal	CR-102 Proposal & CR-105 Expedited	CR- 103P Perma nent	CR-103E Emergency 120-day limit WSR means Washington State Register
7	NT, LPN, RN, ARNP, NA Aids Education & Training (Expedited rulemaking)	Debbie Carlson, Gerianne Babbo, Mary Sue Gorski, Kathy Moio Bonnie King	WAC 246-840- 025, 030, 045, 090, 539, 541, 860, 905, 246- 841-490, 578,585 and 610	Section 22, paragraph (11) of ESHB 1551 repeals RCW 70.24.270-Health Professionals-Rules for AIDS education and training. This repeal no longer requires health professionals to obtain AIDS education and training as a condition of licensure. The amendment of the impacted rules is to help reduce stigma toward people living with HIV/AIDS by not singling out AIDS as an exceptional disease requiring special training and education separate from other communicable health conditions.		Expedited WSR: 20-18-045 Filed: 8/28/2020	WSR: 21- 04-016 Filed: 1/22/2021 Effective 2/22/2021	
Future Rulemaking from Legislation								

Establishing and enforcing evidence-based standards for nursing education is an essential part of the Nursing Care Quality Assurance Commission's (NCQAC) duty to protect the public's health and safety. As a practice discipline, nursing requires experiential learning opportunities to adequately prepare students for practice. In the past, these experiential learning opportunities were primarily traditional clinical experiences where students "provide[d] direct care under the guidance of an instructor or preceptor" (NCSBN, 2016). More recently, nurse educators have used various types of simulation to replace or augment traditional clinical experiences and achieve learning objectives. Like many nursing regulatory bodies, the NCQAC regulates the minimum number of required clinical experience hours and the use of simulation for nursing education programs.

Internationally, nursing education programs in the US require relatively few clinical hours when compared with those in the UK, New Zealand, and Australia (Hungerford et al., 2019). Within the US, requirements vary by state and program type. Data from the National Council of State Boards of Nursing (NCSBN) National Nursing Education Annual Report (Spector et al., 2022) show the mean number of direct patient care hours was 386.3 for licensed practical or vocational nursing (LPN/VN) programs, 437.61 for associate degree in nursing (ADN) programs, and 625.64 for bachelor's degree in nursing (BSN) programs. This report indicated, "more time is needed in clinical experiences (skills labs, simulation and direct care clinical experiences)" (p.8). In our state, WAC 246-840-531 states the number of clinical or direct patient care experience hours must be at least 300 hours for LPN program, 500 hours for (ADN), and 600 hours for (BSN) programs. These requirements are similar to the national means (Figure 1). The NCSBN *Model Rules* (2021) do not include a recommendation or rule about the number of clinical hours pre-licensure nursing programs should include. There is currently a lack of evidence to support such a recommendation or rule (Spector, 2018).

The *Model Rules* (NCSBN, 2021) say up to 50% of required clinical hours can be replaced with simulation if it adheres to specific standards. This is reflected in WAC 246-840-534 and is supported by evidence from NCSBN's National Simulation Study (Hayden et al., 2014) that found up to 50% of required clinical time could be replaced with high-quality simulation without negatively impacting outcomes. This study used a 1:1 ratio where each hour of simulation replaced one hour of traditional clinical experience. There has been interest in considering a 1:2 ratio where each hour of simulation replaces two hours of required clinical time. Emerging evidence suggests time spent in simulation is more "intense" and "efficient" than time spent in traditional clinical (Sullivan et al., 2019, p. 41) and a one hour of simulation may be equal to two hours of traditional clinical under certain circumstances (Curl et al., 2016, p. 77). At least one state currently allows nationally accredited programs to replace up to 50% of their required clinical hours (400 hours for practical and 750 for professional nursing programs) with simulation using the 1:2 ratio (Colorado State Board of Nursing, 2022). This ratio is not reflected in the *Model Rules* (NCSBN, 2021) or Healthcare Simulation Standards of Best Practice™ (INACSL, 2021).

The NCQAC recently partnered with the University of Washington Tacoma and the NCSBN Center for Regulatory Excellence to further investigate the 1:2 ratio. In this multi-site, randomized controlled study of prelicensure nursing students enrolled in their first in-patient clinical course and focused on specific

learning objectives, students who participated in two hours of high-quality mannequin-based simulation performed as well or significantly better on measures of cognitive learning and patient care performance than students who participated in four hours of traditional clinical experience. This finding supports the 1:2 ratio under very specific conditions and emphasizes the need for additional evidence to guide policy. This study also underscored the importance of quality simulation experiences. Additional questions about how to best employ the unique resources of traditional clinical and simulation-based learning opportunities remain. Further investigation of these questions will inform thoughtful, evidence-based regulation of simulation in nursing education in Washington State.

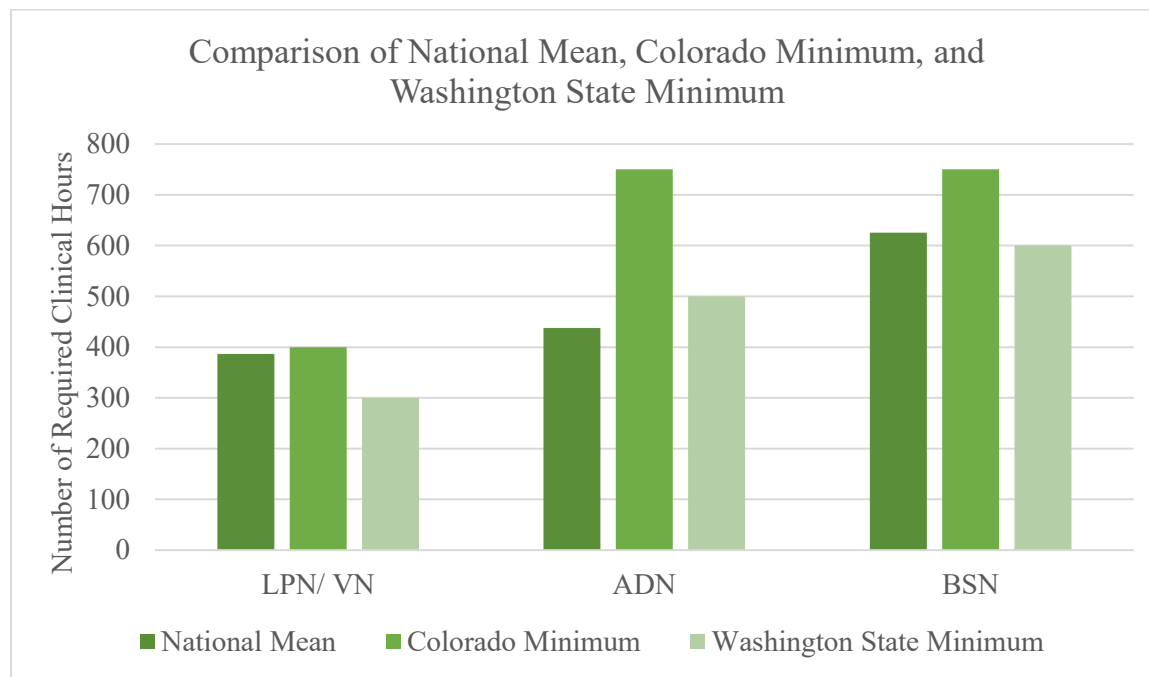


Figure 1. A comparison of the national mean number of direct patient care hours in surveyed nursing programs (Spector et al., 2022), Colorado minimum required clinical hours (Colorado State Board of Nursing, 2022) and Washington State minimum required clinical hours (WAC 246-840-531)

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WAC 246-840-531 Clinical and practice experiences for students in approved nursing education programs.

WAC 246-840-534 Use of simulation for clinical experiences in LPN, RN, or RN to BSN nursing education programs located in Washington state.

DRAFT

**DEPARTMENT OF HEALTH
NURSING CARE QUALITY ASSURANCE COMMISSION
PROCEDURE**

Title:	Travel Reservation Requests	Number:	J10.03
Reference:	RCW 18.79.010 ; NCQAC Procedure H03 – In and Out of State Travel Approval		
Author:	Bethany Mauden Administrative Assistant 4 Nursing Care Quality Assurance Commission		
Effective Date:	TBD	Date for Review:	January 13, 2025
Supersedes:	J10.02 January 8, 2016 J10.01 June 18, 2014		
Approved:	Yvonne Strader, RN, BSN. BSPA, MHA Chair Nursing Care Quality Assurance Commission (NCQAC)		

PURPOSE:

This procedure outlines the steps required for in and out of state travel reservations for the NCQAC commissioners and staff. The policy places reasonable restrictions on travel requests to improve efficiency in coordinating and managing requests.

Refer to NCQAC procedure H03 In and Out of State Travel approval for information on the decision-making process for travel.

PROCEDURE:

- A. If the NCQAC is paying for travel, requests for staff flights will be processed by an Administrative Assistant 3 (AA3) and emailed as a copy to the Executive Director's Administrative Assistant 4 (AA4) no less than six weeks prior to travel date. The AA4 is responsible to process travel requests for NCQAC Board Members and the Executive Director.**

1. Exceptions to this policy must be approved in advance by the Executive Director or their delegate and are made on a case-by-case basis.

- B. Travel requests must include the following:**

1. Preferred departure date and time
2. Full name as it appears on official state identification or driver's license
3. Full birth date
4. Travel destination including details of personal travel if applicable
5. Who is traveling when submitting a request for other or additional members
6. Purpose of travel
7. Vehicle rental (if required) is subject to approval.
 - a. NCQAC members requesting rental vehicles must have approval from the Executive Director or their delegate. Once received, the AA3/AA4 makes vehicle rental reservations through the Enterprise Rental Car website. Upon receipt, the AA3/AA4 will forward vehicle reservation itineraries to travelers. NCQAC staff who would like to drive are to reserve a vehicle from the DOH motor pool.
8. Preferred airline, seat preference if traveler is known to airline, and/or frequent flier numbers.
 - a. Airline and seat preferences are subject to space available and the state contract.
9. Preferred return date and time
10. Specific event information (event brochure, event name, location, etc.)
11. Registration for the event is to be confirmed prior to travel arrangements. The registration information is to be received at least six weeks prior to the registration deadline for the event.
12. Specific requests (e.g., flight numbers, flying in or out of another destination, additional guests, colleagues, etc.) are subject to availability, cost, and approval by Executive Director or their delegate and must be provided to the AA3/AA4 at the time of the original request.
13. Any changes must be received at least five business days prior to travel and must be approved by the Executive Director or his/her delegate.

C. Travel reservation confirmations, changes, and cancellations:

1. **AA3/AA4 responsibilities** upon receiving a travel request:
 - a. Verify travel preapproval on the [In or Out of State Travel log](#).
 - b. Verify that registration for the event has been completed.
 - c. Make reservation typically within two weeks (or ten business days) of the request with appropriate consideration for holidays, absences, business meetings, etc.
 - d. Send a confirmation email to the requestor that the reservation has been complete including travel details.
2. If specific travel requests cannot be accommodated the AA3/AA4 will:
 - a. Confirm in the original request whether an alteration to the travel request is permitted;
 - i. If so, change to "best" accommodate the travel request;
 - ii. If not, the AA3/AA4 will email the requestor to inform them of which accommodations cannot be met and provide an alternative. If the AA3/AA4 has not received a response within 2 business days, a travel alteration will be made.
3. AA3/AA4 will not cancel any reservation without prior approval from:
 - a. The requestor or
 - b. The Executive Director or their delegate

4. **Traveler's responsibilities** once the request has been submitted include:
 - a. Receipt of written approval for travel by ED or their delegate.
 - b. Confirm the itinerary meets the traveler's needs for the event.
 - c. Send a reminder to the AA3/AA4 if the itinerary is not received at least five days prior to travel.
 - d. Book hotel reservations within the per diem rates set by the State of Washington or according to room arrangements for the event.
 - e. Provide all required information (i.e., follow on travel dates, personal traveling, if alternate personnel are required, etc.)
5. Responsibilities of the traveler in the event of changes to their original request are:
 - a. Respond to AA3/AA4 inquiries regarding changes within two business days of the inquiry
 - b. Keep change requests to a minimum and timely (no shorter than 10 business days prior to travel)
6. Traveler's responsibilities when submitting cancellation requests:
 - a. Submit cancellations within four business days (if possible) from travel date
 - b. Provide all required information (i.e., follow on travel dates, personal traveling, if alternate personnel are required, etc.)
 - c. All cancellations will be submitted in writing via email

***Note:** All personnel changes, travel dates and locations, vehicle rentals, etc., require the approval of the Executive Director or their delegate. Refer to NCQAC procedure H03 In and Out of State Travel approval for information on the decision-making process for travel.*

7. All approved state travel reservations are made by the AA3/AA4 through the Alaska EasyBiz or directly through the airlines and not via a third-party booking system (i.e., Expedia). Once the itinerary is received by the AA3/AA4, pertinent information is written into the Airline Reservation (AR) Book. The book has carbon pages which are sent on a monthly basis to accounting for flight charge reconciliation with the traveler/program. On completion of the reservation, an image of the information written into the AR Book is sent to accounting.

D. If The National Council of State Boards of Nursing (NCSBN) is paying for travel, the traveler will make reservations, allowing the traveler to address any potential alterations to their travel request at the time of the reservation.

1. Reservations for NCSBN can be made using the information on the CALL TO MEETING document they provide, or;
2. By calling Direct Travel at 866-805-9145

E. Additional travel requests beyond flight and rental vehicle specifics

1. NCQAC support staff may provide the following information:
 - a. Arrival destination – Hotel – Conference venue (if different then hotel)
 - b. Hotel/Conference venue
 - c. Miscellaneous
 - i. Taxi/shuttle
 - ii. Conference/meeting agendas
 - iii. Meal venues

**DEPARTMENT OF HEALTH
NURSING CARE QUALITY ASSURANCE COMMISSION
PROCEDURE**

Title:	In & Out of State Travel Approval	Number:	H03.04
Reference:	RCW 18.79.010 ; NCQAC Procedure J10 – Travel Reservation Requests		
Author:	Chris Archuleta Director of Operations and Finance Nursing Care Quality Assurance Commission		
Effective Date:	TBD	Date for Review:	January 13, 2025
Supersedes:	H03.03 July 13, 2018 H03.02 April 1, 2016 H03.01 November 18, 2011		
Approved:	Yvonne Strader, RN, BSN, BSPA, MHA Chair Nursing Care Quality Assurance Commission (NCQAC)		

PURPOSE:

Promotion of fairness and transparency in the decision making for in and out of state travel for NCQAC members and staff working with the NCQAC.

Some of the work and events associated with the NCQAC requires travel within and beyond the borders of the state of Washington. The work may include participation in national association committees, trainings, attending conferences and meetings with a regulatory focus, and providing leadership and consultation to other boards of nursing. Travel associated with assigned work duties which may include site visits, presentations, interviews, DES trainings, participation as a vendor, and off site meetings with clients, legislators, or other state agencies are excluded from this procedure.

Costs associated with travel require evaluation. In and out of state travel may be allowed or prohibited by state law, Governor executive order, or lack of financial means to support the costs.

Benefit to the NCQAC requires evaluation. Documentation of activity must include purpose, learning objectives, and outcome statement. The purpose of the event must be related to the regulatory purpose of the NCQAC, [RCW 18.79.010](#):

It is the purpose of the Nursing Care Quality Assurance Commission to regulate the competency and quality of professional health care providers under its jurisdiction by establishing, monitoring, and enforcing qualifications for licensing, consistent standards of practice, continuing competency mechanisms, and discipline. Rules, policies, and procedures developed by the commission must promote the delivery of quality health care to the residents of the state of Washington.

PROCEDURE:

Two (2) logs for travel exist and are saved on the [S: drive](#); one for in state travel and one for out of state travel. The logs are locked and can only be edited by the Executive Director (ED) or delegate. This procedure applies to both in and out of state travel. Requests for in and out of state travel must be submitted to the appropriate Director for their review. Once reviewed and if approved by the Director, the Director will forward the request to the ED for approval. If the ED approves, the ED or delegate will enter the information on to the appropriate log.

Each May, the ED or delegate reviews the in and out of state travel for the previous year and biennium. The ED or delegate prepares a projection of in and out of state travel for the upcoming biennium. The projection includes committee appointments, conferences, meetings, and special events. The ED or delegate completes the projection, assures the necessary travel allotment is available, and presents to the ED.

The ED and the NCQAC chair review the report. The ED must consider direction from the governor, state legislature, department of health, and financial standing of the NCQAC in the review. Limitations on how many trips per person per year, or number of people attending events will be at the discretion of the ED and NCQAC chair. The ED and NCQAC chair prepare and present the plan for in and out of state travel to the NCQAC annually at the July business meeting. The criteria (if applicable) used to evaluate travel requests includes, but not limited to:

- A. Payer for the event: The National Council of State Boards of Nursing (NCSBN) generously supports travel to committee meetings, the annual meeting, the midyear meeting, and other events through the year. The ED determines availability of NCSBN funds for attending NCQAC members or staff. The ED completes all waivers necessary for NCSBN payment or reimbursement.
- B. If NCSBN sponsors the event and waivers are unavailable, but the event directly benefits the work of NCQAC, the ED might consider the use of NCSBN resource funds.
- C. NCQAC Members: The NCQAC chair reviews the content and learning objectives for upcoming events. The chair determines if the event benefits NCQAC and its members. The chair may recommend a member for the travel, considering the following:
 - 1. Past attendance and participation in all NCQAC meetings
 - 2. Past attendance and participation in NCQAC responsibilities: i.e., charging panels, hearing panels, conference calls, task forces
 - 3. Past completion of all assignments in a timely manner, including review of disciplinary cases, disciplinary paperwork submittal, sub-committee reports and business packet material submittal
 - 4. Leadership of a sub-committee, task force, Nursing Program or Nursing Assistant Program Approval Panel, or an officer for NCQAC

5. Service on a NCSBN committee, leadership of a committee, board member, or officer
 6. Availability of member to attend
- D. NCQAC Staff: The ED reviews the content and learning objectives for upcoming events. The ED determines if the event meets a need for education or training for staff. The ED may recommend a staff member for the travel, considering the following:
1. Past performance of NCQAC staff support, sub-committees, task forces
 2. Past completion of all assignments in a timely manner, including submitting agenda items, minutes, business packet materials, and supporting documents.
 3. Supportive working relationship with NCQAC members
 4. Content benefit to the work of the NCQAC. Examples include training on: NurSYS®; substance use and abuse regulations; Taxonomy of Error, Root Cause Analysis and Practice Breakdown; finance; personnel laws; and, nursing regulatory trends.
 5. Service on a NCSBN committee, leadership of a committee, board member, or officer
 6. Availability of member to attend
- E. The chair of the NCQAC and the ED present the recommendations in the form of the In and Out of State Travel Logs to the NCQAC for decision.
- F. The ED or delegate updates the In and Out of State Travel Logs on the [S: drive](#) with the date the NCQAC approves the travel.
- G. If travel opportunities occur between NCQAC meetings, the chair and the ED review the opportunity and apply the criteria. The chair and ED decide and present the circumstance and decision at the next NCQAC business meeting.
- H. Staff at the NCQAC office coordinates travel arrangements with the person traveling in accordance with items listed in the reference section of this policy. All approval forms must be completed prior to completing reservations. All in and out of state travel requires approval by the ED. If travel approval is not secured prior to reservations and travel, reimbursement may be denied. Travel arrangements must be made at least 30 days in advance. Hotel reservations are to be made immediately. Exceptions are at the discretion of the ED.
- I. At times, airline arrival and departure times do not coincide with the event times. It is up to the NCQAC member or staff to make every effort to arrange travel to allow for full participation in the event. If travel times do not allow the NCQAC member or staff to attend the full event, the chair or the ED must approve this plan.
- J. The NCQAC member or staff chosen must submit all reimbursement documents within two weeks of completing travel to the appropriate source.
- K. The NCQAC member or staff must complete a written report of the event (Attachment 1).
- 1). If multiple members attend, the members coordinate who will report on separate items. The members need to address the learning objectives and needs identified by the chair or the ED. Members submit their written reports to the Nursing Commission office within two weeks of the event. **Note:** Exceptions to this procedure will be made on case-by-case bases and require the ED's approval.

Attachment 1: In and Out of State Travel Report Form

(HOST)
(Title of Event)
(Date of Meeting)
(Location)
(Name)

PURPOSE:

OUTCOME:

RECOMMENDATION:

DRAFT

Name	Terms	Specialty
Baroni, Mary	07/01/21-06/30/22 07/01/22-06/30/23	Nursing Education ARNP, Pediatrics
Benson, Julie	10/25/21-06/30-22* 07/01/22-06/30/23	Nursing Education
Brown, Fionnuala	12/13/21-06/30/22* 07/01/22-06-30-23	Nursing Education
Cochrell, Patty	04/29/22-06/30/22* 07/01/22-06/30/23	Nursing Administration
D'Anniballe, Germaine	06/27/22-06/30/23	ARNP
Fitzgerald, Shannon	Unable to verify dates of first term 09/01/20-06/30/21 07/01/20-06/30/22 07/01/22-06/30/23	ARNP, Pediatrics
Fleming, Robin	07/01/21-06/30/22 07/01/22-06/30/23	Nursing Education, School nursing
Fought, Sharon Gavin	04/01/22-06/30/22* 07/01/22-06/30/23	Nursing Education
Frank, Lindsey	07/01/19-06/30/20 07/01/20-06/30/21 07/01/21-06/30/22 07/01/22-06/30/23	ARNP, CNM
Graham-Heine, Keyna Brook	03/22/22-06/30/22* 07/01/22-06/30/23	ARNP, Psych
Graham, Sandra Gonzalez	07/01/19-06/30/20 07/01/20-06/30/21 07/01/21-06/30/22 07/01/22-06/30/23	Nursing assistant training programs
Gumprecht, Barbara	06/01/22-06/30/22 07/01/22-06/30/23	Nursing Education
Haerling, Katie Anne	04/09/20-06/30/20* 07/01/20-06/30/21 07/01/21-06/30/23	Nursing Education, Research, Simulation
Hoeskel, Renee Celeste	03/01/20-06/30/20* 07/01/20-06/30/21 07/01/21-06/30/22	Nursing Education
Kilpatrick, Megan	03/01/20-06/30/20* 07/01/20-06/30/21 07/01/21-06/30/22	ARNP, CNS
Marr, Lindsay	11/15/22-06/30/23	Nursing Practice
Mulligan, Anne	07/01/20-06/30/21 07/01/21-06/30/22 07/01/22-06/30/23	Nursing Education
Murchie, Wendy E.	07/01/22-06/30/23	DNP, Nursing Practice
Owens, Joan	04/27/22-06/30/22*	Nursing Education

	07/01/22-06/30/23	
Patricelli, Vanessa	11/15/22-06/30/23	RN, Nursing Practice
Pizzitola, Rebecca	04/13/20-06/30/20* 07/01/20-06/30/21 07/01/21-06/30/22 07/01/22-06/30/23	Public Member
Ramirez, Jeffrey	11/28/22-06/30/23*	ARNP, Nursing Education
Randich, Tiffany	07/01/22-06/30/23	LPN, RN Practice
Reis, Bianca	08/01/21-06/30/22 07/01/22-06/30/23	ARNP, Psych
Rude, Tracy	07/01/21-06/30/22 07/01/22-06/30/23	LPN, Nursing Practice
Sadak, Tatiana	03/22/22-06/30/22* 07/01/22-06/30/23	ARNP, Long Term Care, Nursing Education
Shirley, Jaime Lynn	04/15/19-06/30/19* 07/01/19-06/30/20 07/01/20-06/30/21 07/01/21-06/30/22 07/01/22-06/30/23	Nursing Practice, Ethics
Soine, Laurie	07/01/22-06/30/23	ARNP
Trehearne, Barbara	08/16/19-06/30/20 07/01/20-06/30/21 07/01/21-06/30/22 07/01/22-06/30/23	Nursing Practice, Center for Nursing evaluator for deliverables
Veilleux, Kimberley A.	07/01/22-06/30/23	ARNP

Nursing Assistant Training and Certification Deadlines/Requirements for Nursing Delegation in Community-Based and In-Home Settings Update

Overview

The (NA) and nursing laws and rules require the NA to complete get specific trainings and certifications through the Washington State Department of Social and Health Services (DSHS) allowing a registered nurse (RN) to delegate tasks to the NA in community-based and in-home care settings.

Training Requirements for Nursing Assistant prior to Delegation

- DSHS Basic Caregiver Training [DSHS Delegation Credentials and Training Verification](#)
- DSHS Basic Core Nurse Delegation Training [Nurse Delegation for Nursing Assistants and Home Care Aides \(wa.gov\)](#)
- DSHS Specialized Diabetes Nurse Delegation (Required for RN delegation to NAs administering insulin to a diabetic client) [Nurse Delegation Training \(wa.gov\)](#)

During the COVID-19 Public Health Emergency (PHE), waivers were made about nursing assistant (NA) training requirements through DSHS. The Nursing Care Quality Assurance Commission [WSR 29-19-006 NCQAC Emergency Rules](#) allowed the RN to delegate to the NA based on requirements established by DSHS [WSR 22-12-081 DSHS Emergency Rules](#) that define when the NA needed to complete the required training based on when they are hired or rehired.

An emergency rule through DSHS provides extensions to the training and certification deadlines for current and new hires.

LTC worker hired or rehired during the time frame of:	Must complete basic training no later than:
8/17/2019 to 4/30/2021	1/31/2023
5/1/2021 to 3/31/2022	4/30/2023
4/1/2022 to 9/30/2022	8/31/2023
10/1/2022 to 12/31/2022	9/30/2023

An attempt was made to gather data regarding the number of NAs this might affect. DSHS did try to do a survey but there were very few responses. It is unknown how many NAs were hired within these time frames and those that have completed or not completed the required training for nursing delegation.

RESEARCH SUBCOMMITTEE STUDENT ENGAGEMENT REPORT

August 2022

Washington State's Board of Nursing

NCQAC

Nursing Care Quality Assurance Commission

To request this document in another format, call 1-800-525-0127. Deaf or hard of hearing customers, please call 711 (Washington Relay) or email civil.rights@doh.wa.gov.

For more information or additional copies of this report:

Nursing Care Quality Assurance Commission (NCQAC)

Research Unit

P.O. Box 1099

Olympia, WA 98507-1099

360-236-4703

360-236-4738 (fax)

nursingresearch@doh.wa.gov

Report Authors

Jessilyn Dagum
Research Assistant

Dr. Mary Sue Gorski
Director of Research, Advanced Practice, and Policy

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Executive Summary

The Nursing Care Quality Assurance Commission (NCQAC) protects the public's health and safety by regulating the competency and quality of licensed practical nurses, registered nurses, advanced registered nurse practitioners and nursing technicians.

The Research Subcommittee works to improve access and utilization of available data to inform policy decisions, evidence-based regulatory practice, and research. Every year the subcommittee takes on several different projects along with standing annual items including external data requests, the Student Engagement Program, and assisting with the preparation and analysis of data-driven reports. This report summarizes the newly developed Student Engagement Program activities, and accomplishments of the subcommittee related to this program.

DRAFT

Student Engagement Program

The **Student Engagement Program**, run by the Director of Research and supporting staff, is a formal student internship program with the nursing commission. The program runs from Fall to Spring of the academic year with a break for summer. Students can participate in the program for any length of time within the program's start and end dates (September to July) including quarterly, by semester, or for the entire academic year, often aligned with their class schedule.

Onboarding is done through the Department of Health and facilitated by the Director of Research and supporting staff. Students are then introduced to what the nursing commission is, what we do, and why it matters. Typically, students bring projects they have in mind to be conducted, or they will assist with current or ongoing projects within the nursing commission. Students are then paired with a mentor and conduct their project(s) over the course of time they are in the program. Once completed, the students can present their work to the nursing commission's staff, subcommittees, panels, or even the full commission at a scheduled business meeting.

During their time in the program, students' hours, projects, and experiences are cataloged by the nursing commission and included in this annual report.

Historical Data

Students were interning with the nursing commission as early as 2016, but only recently has the experience been developed and officially named the Student Engagement Program. Below is a synopsis of the information gathered since 2016.

Over the Years

Since 2016, the nursing commission has had several students participate in the program. The chart below describes how many students that have participated by academic year. The highest number so far being 2018-19.

Year	2016-17	2017-18	2018-19	2019-20*	2020-21	2021-22	Total
# Students	2	2	10	0	7	8	29

**In response to the coronavirus disease 2019 (COVID-19) public health emergency, the nursing commission paused participation in the program to reallocate staff resources to the emergency at hand.*

Academic Institutions

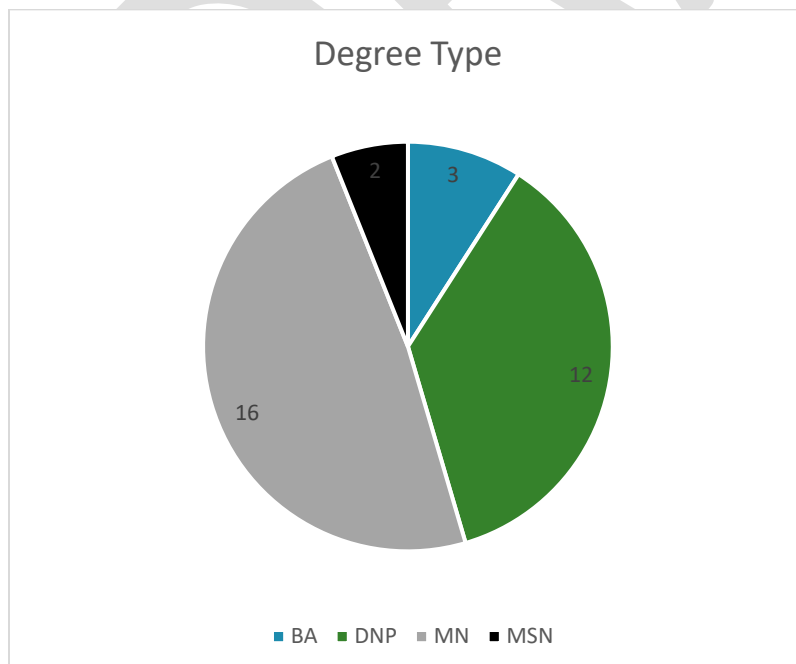
Of the many colleges and universities in Washington State, below are the academic institutions that the nursing commission has received students from to date. The majority come from Gonzaga and the University of Washington, Tacoma. As availability allows, the nursing commission looks forward to welcoming more institutions to participate in the program. **Since 2016, the nursing commission has had 33 students participate in the program.**

School	Capella	Gonzaga	PLU	Seattle U	SPU	UW - B	UW - S	UW - T	Total
# Students	2	6	1	2	3	1	4	14	33

Degree Types

Of the 33 students, 3 were pursuing Bachelor of Arts (BA), 12 were Doctorates of Nursing Practice (DNP), 16 were Masters of Nursing (MN), and 2 were Masters of Science in Nursing (MSN).

Degree Type	BA	DNP	MN	MSN	Total
# Students	3	12	16	2	33



2021-2022 Academic Year

Over the past academic year, the Research Subcommittee has worked to improve the Student Engagement Program by developing a onboarding and offboarding process, providing more opportunities for students to present their projects within the nursing commission, highlighting and creating a space for student's completed projects on the nursing commission website, including students' projects and experiences in the Research Subcommittee's annual report, and collecting feedback from student through an exit survey in order to continue to improve the program. This information is included with the running total data below.

Academic Institutions

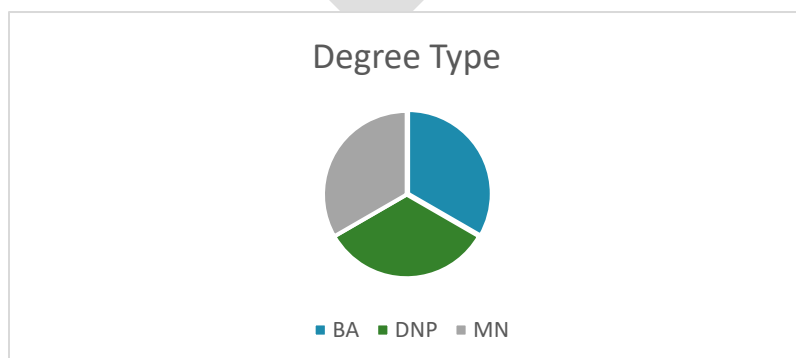
Since Fall of 2021 to present, the nursing commission has had **6 students** participate in the program. As availability allows, the nursing commission looks forward to welcoming more institutions and their students to participate in the program.

School	Capella	Gonzaga	PLU	Seattle U	SPU	UW - B	UW – S	UW- T	Total
# Students	0	0	0	0	2	0	0	4	6

Degree Types

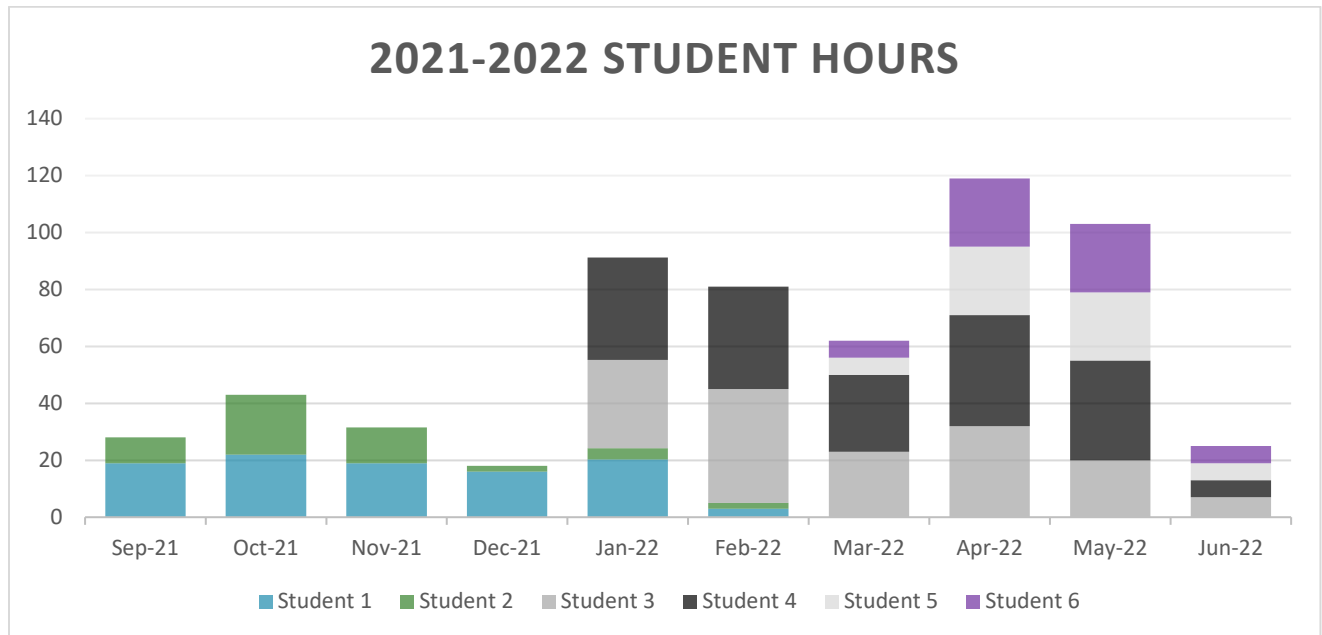
Of the 6 students, 2 were pursuing Bachelor of Arts (BA), 2 were Doctorates of Nursing Practice (DNP), and 2 were Masters of Nursing (MN).

Degree Type	BA	DNP	MN	MSN	Total
# Students	2	2	2	0	6



Student Hours

As part of DOH's internship requirements, the nursing commission tracks how many hours each student dedicates to their projects during their time in the program. Below is a graph of how many hours each student spent working on their projects each month for the 2021-2022 academic year.



Student Projects

This past year students came into the program with no specific projects but rather areas of interest within the nursing commission. The students' projects were primarily in:

- Policy development
- Education reform
- Assistance with ongoing special project

Students specifically worked on:

- Washington ARNP Scope of Practice
- LPN Program Standardized Competencies
- Investigation of Florida School Graduates
- ARNP National Certification Investigation

Examples of the students' work are provided in Appendix I.

Exit Survey

This past year, the Research Subcommittee developed an exit survey as part of the program's offboarding process. The students that participated in the program for the 2021-2022 academic year were the first group to pilot the survey. The purpose of the exit survey is to:

- Capture students' work, projects, and accomplishments in their own words
- Determine student satisfaction with the experience
- Enable data-driven improvement strategies
- Identify process strengths and opportunities to improve student experience

Of the 6 students, 4 participated in the exit survey. Highlights of the exit survey are listed below. The survey data is displayed in the next following pages.

- All reported developing a better understanding of the regulatory structure of nursing through this experience.
- "Likes" included flexible times, understanding the bigger picture of NCQAC, and understanding the mechanics of policy modification
- "Dislikes" were around one project focused, not relevant to degree, and unknown results
- Overall rated experience as good, very good, or excellent and expectations were met.

Please note that questions 1-12 include personal information and are not included in the results below. The full survey and the survey results are available in Appendix II.

Summary Next Steps

The student engagement process has increased access to student experiences in the nursing commission. The service the students provide offer excellent learning experiences. The student involvement in ongoing projects brings new perspectives to the work of the commission and helps health care professionals learn more about nursing regulation.

As evidenced by our initial exit survey results, there are some opportunities for improvement of the student experience. The survey and process itself will be revised to address that feedback.

The Research Subcommittee will continue to gather the information in this report for annual review to assure the processes remain relevant and maximize the support of student experiences and commission members and staff.



DISCIPLINARY TIMELINES

EACH PHASE
IN SEQUENCE

WAC 246-14

Uniform Procedures for Compliant Resolution

- Intent

These rules establish basic time periods for processing and resolving complaints against credentialed health care providers and applicants. The rules also provide enforcement mechanisms to ensure timely disposition of complaints and adjudicative proceedings. The department of health does not anticipate that the basic time period will be used in all cases. These rules are adopted as required by RCW [18.130.095](#)(1). The intent is to promote timely protection of the public and fairness to credential holders, applicants, and complainants, without sacrificing public safety.

What happens if a time period expires?

When a basic time period expires, enhanced management oversight will occur. The reason for the delay will be noted in the tracking system, but work on the case will not be interrupted.

"Enhanced management oversight" is defined as enhanced direction of a case imposed by department management as an enforcement mechanism when a basic time period is exceeded. Management will ensure the case moves through the stage promptly. Some examples of enhanced direction may be staffing changes, resource reallocation, and work planning.

Initial assessment of reports

- Initial assessment is the process of determining whether a report warrants an investigation and becomes a complaint. This occurs at the weekly Case Management Team (CMT) meeting. Case management staff will notify the complainant and credential holder or applicant as soon as possible after the initial assessment is complete.
- The basic time period for initial assessment is twenty-one days.
- Case management staff will review all reports for imminent danger within two working days. If imminent danger is identified, staff will immediately set up an emergency CMT for commission review.

Investigation of complaints

- Investigation is the process of gathering information which examines the complaint and the situation surrounding the complaint.
- The basic time period for investigation is one hundred seventy days.

Case disposition

- Case disposition is the process of deciding whether to issue a statement of charges on a complaint, to take informal action, or to close the complaint without action. It includes the processes necessary to implement the decision.
- The basic time period for case disposition is one hundred forty days.
- This time is shared between the legal team, who strives to complete a legal review within 30 days, and the reviewing commission member.

Adjudication

- The basic time period for settlement, discovery, and commencement of hearing is one hundred eighty days or less, to be set in the scheduling order.
- The basic time period for issuing an order is forty-five days. For secretary professions, the forty-five day period begins upon completion of the hearing. For boards and commission professions, the forty-five day period begins upon completion of the hearing and deliberations.

Stipulations to Informal Disposition

- If a statement of allegations is issued, the respondent will have twenty-eight days to make an initial response. If no response is made, the program's attorney may determine informal disposition has been rejected. The case will be returned to case disposition.
- If a response is made, the basic period for completion of informal resolution is sixty days. If informal resolution has not been reached within that time, the case will return to case disposition to determine appropriate action.

Performance measures

- NCQAC and HSQA adopted performance measures related to discipline timelines in 2009 (?)
- We report performance measures regularly to the Discipline Subcommittee and full commission.
- Performance measure 2.2 states 77% of investigations will be completed withing 170 days.
- Performance measure 2.4 states no more than 23% of investigations will be open beyond 170 days.



December 13, 2022

The Honorable Patty Murray
United States Senate
154 Russell SOB
Washington, D.C. 20510

Via FAX: (202) 224-0238

Dear Senator Murray:

We reach out to you as a coalition to ask for your support for language in the end-of-year omnibus budget package related to developing workforce pathways for long term care workers throughout the country, and here in the state of Washington, where our agencies and organizations have coalesced to advance support for long term care workforce development. Never have we experienced such a crisis in staffing for the long term care sector, and never has your support been more important.

Here in Washington, the long term care workforce initiative has been launched by our state's Workforce Training and Education Board. Our goal with this work is to develop programs, projects and protocols that support critically important long term care workers.

Today we seek your help and are asking that you champion language in the omnibus budget package. We are providing sample report language below that is an important step and builds on House-passed language that called upon HHS to help address this crisis. The language modifies the House L-HHS FY23 bill to include the Department of Labor, which has more extensive on-the-ground training programs well suited to train and provide career paths to help better meet the needs of tomorrow's seniors.

SPECIFIC REPORT LANGUAGE NEEDED IN END-OF-YEAR OMNIBUS

PACKAGE: *"Addressing workforce shortages. The Committee's intent is to develop the workforce needed to care for a rapidly aging U.S. population. The Committee calls on the Department of Labor and Department of Health and Human Services to address the care workforce needs of seniors through existing education, training, and grant programs, as well as traditional and non-traditional apprenticeship programs."*

Additionally, we ask that you support apprenticeship funding for existing and successful programs. For example, the Healthcare Apprenticeship Expansion Program (HAEP) strengthens career pathways through apprenticeships in senior living, beginning with caregivers and nursing aides. In four years, HAEP has already increased retention to 85% from average long term care rates of 30% and trained 7,200 diverse apprentices, 93% of whom are female and 35% are persons of color. HAEP is funded through the Department of Labor's Closing the Skills Gap Grant program and has proven remarkably successful.

The Honorable Patty Murray

December 13, 2022

Page 2

Thank you in advance for your support of this important request. If you have questions or need additional information, we stand ready to support you.

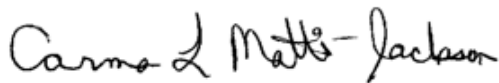
Very truly yours,



Deb Murphy, MPA, JD
Chief Executive Officer
LeadingAge Washington



Jilma Meneses
Secretary
Washington State Department of Social and
Health Services



Carma Matti-Jackson
President/CEO
Washington Health Care Association



Paula Meyer MSN, RN, FRE
Executive Director
Washington State Nursing Care Quality
Assurance Commission