



**Board of Nursing  
Business Meeting Agenda**

March 8, 2024  
8:30 AM- 5:00 PM

This meeting is in person at Washington State Department of Health: [111 Israel Rd SE, Tumwater, WA 98501](#), in building TC2 room 166/167 and via zoom.

**Zoom registration:**

<https://us02web.zoom.us/meeting/register/tZwodOyrrTsoHNEiRA6XBdIyqCc4Yztsa5A>

**Board Members:**

Adam Canary, LPN, Interim Chair  
Quiana Daniels, BS, RN, LPN, Interim Vice Chair  
Kimberly Tucker PhD, RN, CNE, Interim Secretary/Treasurer  
Jonathan Alvarado ARNP, CRNA  
Jacob Garcia, MBA, MSN, RN, PCCN  
Ella B. Guilford, MSN, M.Ed., BSN, RN  
Heleena Hufnagel, BS, MBA-HCA, Public Member  
Judy Loveless-Morris, PhD, Public Member  
Ajay Mendoza, CNM  
Dawn Morrell, RN, BSN, CCRN  
MaiKia Moua, RN, BSN, MPH  
Sharon Ness, RN  
Norma Perez, M.Ed., Public Member

**Assistant Attorney General:**

Sierra McWilliams, Assistant Attorney General

**Staff:**

Alison Bradywood, DNP, MPH, RN, NEA-BC, Executive Director  
Chris Archuleta, Director, Operations and Finance  
Gerianne Babbo, Ed.D, MN, RN, Director, Education  
Shad Bell, Assistant Director, Operations and Communications  
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  
Anthony Partridge, MPPA, Assistant Director of Regulatory Affairs  
Catherine Woodard, Director, Discipline and WHPS

## Questions

Please contact us at 360-236-4703 if you:

- have questions about the agenda.
- want to attend for only a specific agenda item.
- need to make language or accessibility accommodations.

## Language and Accessibility

If you plan to attend and need language or accessibility services, WABON can arrange help. Please contact us at least one week before the meeting, (*March 1, 2024*).

Need this document in another format? Please call 800-525-0127.

Deaf or hard of hearing customers:

- Call: 711 (Washington Relay)
- Email: [civil.rights@doh.wa.gov](mailto:civil.rights@doh.wa.gov)

## Meeting Minutes

We record our meetings to help write accurate minutes. Our minutes are then approved at the next Washington State Board of Nursing (WABON) business meeting. WABON posts minutes on our website [nursing.wa.gov](https://nursing.wa.gov).

All minutes and recordings are public records. They are available on request from DOH at [doh.wa.gov/about-us/public-records](https://doh.wa.gov/about-us/public-records).

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 – Adam Canary, Chair – DISCUSSION/ACTION**

### **II. Call to Order**

- A. Introductions**
- B. Order of the Agenda**
- C. Land Acknowledgement – Quiana Daniels**
- 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. WABON Business Meeting
  - a. January 12, 2024
2. Advanced Practice Subcommittee
  - a. November 15, 2023

### **III. Consent Agenda. Continued – DISCUSSION/ACTION**

3. Discipline Subcommittee
  - a. December 19, 2023
4. Consistent Standards of Practice Subcommittee
  - a. December 1, 2023
5. Licensing Subcommittee
  - a. December 19, 2023
  - b. January 2024 – No meeting
6. Research Subcommittee
  - a. No meetings.
7. Education Subcommittee
  - a. January 31, 2024

#### **B. Letter from NCSBN President Jay Douglas**

#### **C. Performance Measures**

1. Investigations
2. Legal
3. Washington Health Professional Services (WHPS)
4. Substance Use Disorder Review Panel (SUDRP)
5. Nursing Assistant Program Approval Panel (NAPAP)
6. Nursing Program Approval Panel (NPAP)

#### **D. Licensing Report to the Governor's Office**

#### **E. Washington Center for Nursing/WABON monthly meetings**

1. January 29, 2024 – Joint meeting with DOH

#### **F. Out of state travel reports**

1. Federation of Associations of Regulatory Boards Forum – Karl Hoehn
2. NCSBN Scientific Symposium – Emma Cozart

### **IV. 8:45 AM – 9:00 AM - WABON Panel Decisions – DISCUSSION**

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

#### **A. Nursing Program Approval Panel (NPAP)**

1. January 4, 2024
2. January 18, 2024
3. February 1, 2024
4. February 15, 2024

#### **B. Nursing Assistant Program Approval Panel (NAPAP)**

1. January 8, 2024
2. February 12, 2024

**V. 9:00 AM – 9:30 AM - Chair Report – Adam Canary – DISCUSSION/ACTION**

**A. Nomination Committee – Sharon Ness**

**1. Slate of Candidates**

Situation: The nominations committee selected qualified members willing to serve in leadership positions and will present a draft slate of candidates to the Board for elections in May (refer to procedure H01.03 in the packet for details).

Background: The nominations committee reached out to Board members willing to serve in leadership positions and developed the draft slate of candidates.

Assessment: Candidates will speak to the Board regarding the positions they are seeking in the election. Members are eligible if they have completed a year on the board. This is a one-year appointment.

Recommendation: Nominations committee requests the Board to accept the slate of candidates with any additional nominations from the floor for the elections in May.

**a. Floor Nominations**

**B. Annual Board Survey– Preliminary Results of Board Member Responses – Lohitvenkatesh Oswal**

**C. NCSBN Midyear Meeting**

**VI. 9:30 AM – 10:30 AM - Executive Director Report – Alison Bradywood – DISCUSSION/ACTION**

**A. Budget Report – Kimberly Tucker, Chris Archuleta**

**B. Strategic Plan Update**

1. Nursing Assistants – to be presented during Education report.

2. Bill Implementation

a. SB 5499 – Nurse Licensure Compact – Alison Bradywood

b. SB 5582 – Reducing barriers and expanding educational opportunities to increase the supply of nurses in Washington. – to be presented during Education report

c. HB 1255 (RCW 18.79.440) Reducing stigma and incentivizing health care professionals to participate in a substance use disorder monitoring and treatment program. – Grant Hulteen

d. HB 1009: Military Spouse Employment - Jessilyn Dagum, Amber Bielaski – No report

3. Data-Driven Practice – Debbie Carlson

4. Diversity, Equity, Inclusion, & Belonging (DEIB) – Jessilyn Dagum, Jacob Garcia

5. Communications – Social Media Presence – Shad Bell, Peniel Parrao-Tovar

a. Social Media Procedures – Amy Sharar

**C. Rules Update – Jessilyn Dagum**

**D. Health Enforcement and Licensure Management System (HELMS) Update – Karl Hoehn**

**VI. Executive Director Report. Continued. – DISCUSSION/ACTION**

**E. WHPS Annual Report and SUDRP Annual Report – Catherine Woodard and Grant Hulteen**

Situation: Procedure W49 *Performance Reports and Procedure Review* requires WHPS staff to present an annual report to WABON at the March business meeting.

Background: WHPS is responsible for the collection of data and performance measures necessary for the comprehensive, quality evaluation of the effectiveness of the WHPS program and services provided. WHPS staff uses this data for analytic review of current performance trends, identifying business needs, supporting data-driven decisions, and improving business operations. Since the inception of SUDRP in July 2022, WHPS includes an annual SUDRP report as a supplement to the WHPS annual report.

Assessment: According to the procedure, the annual report includes program performance from the previous calendar year. The comprehensive report includes recommended information from the National Council of State Boards of Nursing *Substance Use Disorder in Nursing Resource Manual and Guidelines* (2011).

Recommendation: Approve the WHPS annual report and the SUDRP annual report.

**10:30 AM – 10:45 AM Break**

**VII. 10:45 AM – 11:45 AM - Subcommittee Report – DISCUSSION/ACTION**

**A. Advanced Practice – Jonathan Alvarado, Chair**

1. AP Compact Education Brief

Situation: The Washington State Board of Nursing (WABON) hosted Advanced Practice Nurses from across the state in four workshops to explore the implications of the Advanced Practice Registered Nurse Compact (APRN Compact) in the state of Washington. There is general agreement that the concept of a national licensure compact is timely and has benefits for both patient care and Advanced Practice Nurses. However, there have been concerns expressed about specific aspects of the current National Council of State Boards of Nursing APRN Compact.

Background: The benefits and barriers to adoption of the APRN Compact were discussed at each workshop and are summarized in an Education Brief. The Education Brief also summarizes the recommended next steps.

Assessment: The Advanced Practice Subcommittee reviewed the Education Brief on February 21, 2024, and recommended bringing this to the March 8, 2024, board meeting for approval.

Recommendation: Consider approval of Exploring the Advanced Practice Registered Nursing Compact for Washington State Education Brief and recommended next steps.

**B. Consistent Standards of Practice – Ella Guilford, Chair**

1. No report

**C. Discipline – Sharon Ness, Chair**

1. Complaint form revisions

2. Procedure A.06.11 *Review of Board of Nursing Reports*

Situation: Diversity, equity, inclusion, and anti-racism is a WABON strategic goal seeking to make this work visible and measurable. Discrimination can influence diagnosis and treatment decisions and impact quality care patient indicators. There is a concern that cases of discrimination should be considered at weekly case management team (CMT) meetings.

Background: CMT closes or opens reports of complaints for investigation at weekly meetings based on above threshold, below threshold, or Early Remediation criteria according to A06.10, *Review of Commission Reports*. Discipline staff and CMT panel members noted that cases involving potential bias or discrimination may be closed under the current below threshold ‘communication’ criteria.

Assessment: The research unit conducted a study of data collected from closed cases from March to September 2023. Of these, 59 closed cases had elements of implicit and explicit bias and potential discrimination and 37 identified a given type of discrimination in the narrative. Staff will develop a WABON policy statement for DSC to define discrimination, using the medical commission's policy statement and well-researched discrimination definition for guidance at CMT in the interim. CMT members will need training to provide informed and consistent analysis at CMT. Rulemaking may be needed in the future.

Recommendation: Consider recommendations from the Discipline Subcommittee (DSC): 1) changes to the complaint form to include three questions related to discrimination as a category for possible complaints against a nurse, 2) a whistleblower statement to be added to the complaint form, 3) adopting changes to procedure A.06 *Review of Board of Nursing Reports* to include discrimination as a category above threshold or eligible for early remediation and for multistate licenses to identify misdemeanor crimes related to the practice of nursing as above threshold (per the NLC).

3. Procedure A.20.12 *Substance Use Orders*

Situation: All procedures are scheduled for biennial review.

Background: Discipline staff refreshed language in A.20.12 *Substance Use Orders* and updated from NCQAC to WABON, making no substantive changes to the procedure.

Assessment: DSC reviewed the procedure on February 20, 2024, and recommend the procedure move forward to WABON for anticipated approval.

Recommendation: Consider approval of procedure A20.12 *Substance Use Disorders*.

**D. Licensing – Dawn Morrell, Chair**

1. No report

**E. Research – MaiKia Moua, Acting Chair**

1. Procedure R02.04 *Student Engagement Procedure*

Situation: Routine procedure updates done with no content related updates.

Background: Procedure R02.04 has been updated to make technical changes and to reflect the new WABON name.

Assessment: The Research Subcommittee reviewed the procedure on February 20, 2024, and recommended to bring to the March 8, 2024, board meeting for approval.

Recommendation: Approve Procedure R02.04 – Student Engagement with the Washington State Board of Nursing (WABON).

**F. Education – Kimberly Tucker, Chair**

1. SB 5582 *Simulation Rules*

Situation: SB 5582: Reducing barriers and expanding educational opportunities to increase the supply of nurses in Washington. Section 8: “The Commission shall adopt rules which allow for one hour of simulated learning to be counted as equivalent to two hours of clinical placement learning, with simulated learning accounting for up to 50% of the required clinical hours.”

Background: Since July 2023 the board has engaged in implementing the directives of Engrossed Second Substitute Senate Bill (E2SSB) 5582 (Chapter 126, Laws of 2023) including the development of the 1:2 simulation rules. Education, legal, and regulatory affairs teams have grounded this work in research, drawing from quality simulation research evidence, and adhering to best practices as defined by the simulation professional organizations INACSL (International Nursing Association of Clinical Simulation and Learning) and SSIH (Society for Simulation in Healthcare). The board held seven public rule workshops, meetings with INACSL and SSIH representatives, and national researchers to ensure a broad variety of perspectives were considered in the

drafted rule language. The public's participation and feedback was invaluable throughout this iterative rulemaking process. These draft proposed rules support students' development with the necessary clinical reasoning and judgment to ensure their preparedness for the challenges of nursing practice as safe entry-level professionals. The draft proposed rule language was presented to the board on January 12, 2024, and to the Education subcommittee on January 31, 2024, for their feedback and consideration.

**Assessment:**

The draft 1:2 simulation rules have undergone a thorough and iterative CR-101 process.

**Requested Action:**

Consider approval of the proposed draft simulation rule language for the SB 5582 Simulation Rules to move forward in the rulemaking process with the filing of a CR-102.

**11:45 AM – 12:00 PM - Lunch**

- VIII. 12:00 PM – 1:00 PM - Education Session – Introduction to Artificial Intelligence (AI), Rich G. Kenny, MMCI, RN, Health Informaticist.** Mr. Kenny has advised leading healthcare organizations on nursing workforce strategies and experience design for many years. AI is transforming health care and the nurse's role in care delivery. This presentation provides an overview of AI and integration into health care delivery.

**IX. 1:00 PM – 1:15 PM - Public Comment**

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

**X. 1:15 PM – 1:45 PM - Rules Hearing – Initial Out-of-State Exam and Endorsement Licensing - DISCUSSION/ACTION**

Situation: WABON is proposing amendments to WAC 246-840-030 and WAC 246-840-090 to clarify specific licensing requirements for RN and LPN applicants. These amendments aim to address concerns regarding the acceptance of nursing program graduates from other states and to safeguard the standards of nursing education in Washington.

Background: Current rules state that a nurse who has graduated from another state's approved nursing program or from a substantially equivalent program may be licensed. However, instances of fraudulent nursing programs have raised concerns about the acceptance of qualifications from such programs. Emergency rules were initiated on May 5, 2023, to address these concerns, and they have been extended multiple times, most recently on December 29, 2023.

Assessment: Proposed amendments seek to clarify that RN and LPN applicants applying for licensure via interstate endorsement or through an out-of-state traditional nursing education program must have completed a nursing education program approved by the nursing board in the state where they received their education. Furthermore, the program must substantially meet the requirements for nursing education approved in Washington state, as determined by WABON.

Recommendation: If adopted, these amendments will reflect the standards currently in place under the emergency rules. The proposed changes will provide clarity regarding the acceptance of qualifications from out-of-state nursing programs while maintaining the high standards of nursing education and practice in Washington.

**XI. 1:45 PM – 2:30 PM - Education – Dr. Gerianne Babbo, Christine Tran - DISCUSSION/ACTION**

**A. Education**



1. SB 5582 Next Steps 1:2 Draft Simulation Rules
2. SB 5582 Rule Writing- level of graduate degree in Baccalaureate programs in (for Sect 7, line 31-34, rule writing)
3. Model Act and Review Committee

**B. Nursing Assistant**

1. Strategic Plan Update
2. Testing

**2:30 PM – 2:45 PM - Break**

**XII. 2:45 PM – 3:15 PM – Legislative Panel Report – Quiana Daniels, Anthony Partridge – DISCUSSION/ACTION**

- A. Legislative Coverage Map
- B. Legislative Updates
  1. Simulation Proposal

**XIII. 3:15 PM – 3:45 PM – Board Hours Project Presentation – Bethany Mauden, Josh Smoots – DISCUSSION/ACTION**

**XIV. 3:45 PM – 4:45 PM - WCN Report – Sofia Aragon – DISCUSSION/ACTION**

**XV. Meeting Evaluation**

**XVI. Closing**





**Board of Nursing**  
Meeting Minutes

January 12, 2024  
8:30 AM- 5:00 PM

This was a virtual meeting, people could attend the meeting if they did not have a computer or phone access at Labor & Industries: 7273 Linderson Wy SW, Tumwater, WA 98501, in Room S119.

If you would like to request a copy of this recording, please visit the DOH Public Records Portal at <https://doh.wa.gov/about-us/public-records>.

**Board Members:**

Adam Canary, LPN, Interim Chair  
Quiana Daniels, BS, RN, LPN, Interim Vice Chair  
Kimberly Tucker PhD, RN, CNE, Interim Secretary/Treasurer  
Jonathan Alvarado ARNP, CRNA  
Jacob Garcia, MBA, MSN, RN, PCCN  
Ella B. Guilford, MSN, M.Ed., BSN, RN  
Heleena Hufnagel, BS, MBA-HCA, Public Member  
Ajay Mendoza, CNM  
Dawn Morrell, RN, BSN, CCRN  
MaiKia Moua, RN, BSN, MPH  
Sharon Ness, RN  
Norma Perez, M.Ed., Public Member

**Excused**

Judy Loveless-Morris, PhD, Public Member  
Emerisse Shen, FNP, ARNP

**Assistant Attorney General:**

Sierra McWilliams, Assistant Attorney General

**Staff:**

Alison Bradywood, DNP, MPH, RN, NEA-BC, Executive Director  
Chris Archuleta, Director, Operations and Finance  
Gerianne Babbo, Ed.D, MN, RN, Director, Education  
Shad Bell, Assistant Director, Operations and Communications  
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  
Kathy Moisio, PhD, RN, Director, Nursing Assistant Programs  
Anthony Partridge, MPPA, Assistant Director of Regulatory Affairs  
Catherine Woodard, Director, Discipline and WHPS

**I. 8:30 AM - Opening – Adam Canary, Interim Chair – DISCUSSION/ACTION**

**II. Call to Order**

**A. Introductions**

**B. Order of the Agenda**

**C. Land Acknowledgement – Quiana Daniels**

1. Mr. Canary requested volunteers from the Board to conduct the Land Acknowledgements for March and April, Ms. Daniels volunteered for March and Ms. Guilford volunteered for July.

**D. Announcements**

1. Welcome new staff – Ms. Mulanax and Mr. Smoots
2. Departing Board Member – Ms. Shen.
3. NCSBN Board of Directors – Dr. Babbo has been appointed as NCSBN's chair of Education Subcommittee Model Act and Rules Review.
4. Conference Planning for 2024 – Interested board members were asked to reach out to Dr. Bradywood if interested in joining the committee.
5. Orientation and Expectations for Board Members
  - a. New Members Orientation,
  - b. Mentor/Mentee,
  - c. Website has been updated for comparison of roles,
  - d. Letter for employers on the role of the board member.
  - e. Other - Please let us know if there is more, we can do.

**III. Consent Agenda – DISCUSSION/ACTION**

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

**ACTION:** Dr. Tucker moved to approve the consent agenda. Ms. Guilford seconded the motion. The motion passed.

**A. Approval of Minutes**

1. WABON Business Meeting
  - a. November 17, 2023
2. Advanced Practice Subcommittee
  - a. October 18, 2023
3. Discipline Subcommittee
  - a. October 24, 2023
4. Consistent Standards of Practice Subcommittee
  - a. October 6, 2023
5. Licensing Subcommittee
  - a. October 17, 2023
  - b. November 2023 – No meeting
6. Research Subcommittee
  - a. October 16, 2023
7. Education Subcommittee
  - a. November 6, 2023

**B. Letter from NCSBN President Jay Douglas**

### **III. Consent Agenda – DISCUSSION/ACTION. Continued.**

#### **C. Performance Measures**

1. Investigations
2. Legal
3. Washington Health Professional Services (WHPS)
4. Substance Use Disorder Review Panel (SUDRP)
5. Nursing Assistant Program Approval Panel (NAPAP)
6. Nursing Program Approval Panel (NPAP)

#### **D. Licensing Report to the Governor's Office**

#### **E. Washington Center for Nursing/WABON monthly meetings**

1. November 28, 2023

#### **F. Out of state travel reports**

1. Federation of State Medical Boards – November 30-December 1, 2023, Sara Kirschenman

### **IV. WABON Panel Decisions – DISCUSSION**

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

#### **A. Nursing Program Approval Panel (NPAP)**

1. November 16, 2023
2. December 7, 2023
3. December 21, 2023

#### **B. Nursing Assistant Program Approval Panel (NAPAP)**

1. November 13, 2023
2. December 11, 2023

### **V. Chair Report – Adam Canary – DISCUSSION/ACTION**

#### **A. Recruitment for new WABON and pro tem members**

Four positions are open:

ARNP, Public Member, RN, LPN (Our public and RN members are eligible for renewal)

#### **B. NCSBN midyear meeting – Atlanta, GA – March 12-14, 2024**

1. NLC Commission - March 11, 2024

#### **C. Nominations Committee for Officer Elections and WABON Award**

Annual appointment by the Chair of three board members to participate on the nominations committee for board officer elections, NCSBN award nominations, and WABON award.

The nominations committee receives, reviews, and selects nominations for NCSBN awards, and recipients of WABON award.

Ms. Ness, Mr. Garcia, and Ms. Daniels volunteered to participate.

## **VI. Executive Director Report – Alison Bradywood – DISCUSSION/ACTION**

### **A. Budget Report – Kimberly Tucker, Chris Archuleta**

Mr. Archuleta reported the Department of Health (DOH) submitted a decision package on behalf of WABON in the FY23 supplemental budget requesting spending authority to cover the additional ongoing revenues from fees gained from the December 2022 fee increase. Which amounts to \$4.5M in additional allotment for the 2023-2025 biennium. Revenue projections in FY25 have been adjusted to account for the anticipated increases from implementation of phase two of the NLC when WABON begins to issue the Multistate License (MSL) and collect the additional fees for the new credentials. Anticipated revenues rebound once phase two is fully implemented on January 31, 2024.

Mr. Archuleta expressed concern regarding a budgetary HELMS expense which was not previously communicated by DOH and thus not integrated into the WABON budget. Mr. Archuleta is working with Dr. Bradywood and DOH regarding the communication processes.

### **B. Strategic Plan Update**

1. Nursing Assistants – Kathy Moisio to present with Education Report

2. Bill Implementation

a. SB 5499 – Nurse Licensure Compact – Alison Bradywood

Dr. Bradywood gave a brief update on the progress of the compact implementation, the multistate licenses are scheduled to begin issuing on January 31<sup>st</sup>.

b. SB 5582 – Reducing barriers and expanding educational opportunities to increase the supply of nurses in Washington. – Gerianne Babbo and Kathy Moisio to present with Education Report

c. HB 1255 – Reducing stigma and incentivizing health care professionals to participate in a substance use disorder monitoring and treatment program. – Grant Hulteen.

Mr. Hulteen reported the program did not receive additional requested funds but continues to advocate with legislators and prepare to begin issuing the stipend in July 2024.

d. HB 1009: Military Spouse Employment - Amber Zawislak-Bielaski - No Report.

3. Data-Driven Practice – Debbie Carlson

Ms. Carlson reported they have completed the project plan and data sets. and the draft strategy plan and are reviewing DOH resources for data management best practices.

4. Diversity, Equity, Inclusion, Belonging, & Anti-Racism (DEIB) – Alison Bradywood

Dr. Bradywood reported a group of staff and board members identified key areas for internal and external work throughout 2024. During the meeting it was recommended to form a DEIB taskforce to ensure direction and progress in DEIB initiatives.

**ACTION:** Mr. Garcia moved, with a second from Ms. Daniels, to convene a taskforce to continue to advance diversity, equity, inclusion, and belonging work in accordance with the WABON 2023-2025 strategic plan. The motion passed.

5. Communications – Social Media Presence – Shad Bell

Mr. Bell presented WABONs communication plan and introduced pro tem Ms. Tovar.

Ms. Tovar presented on social media the presence of other boards of nursing and offered their recommendation for WABON's presence.

Ms. Daniels recommended moving forward with establishing a presence. Mr. Bell assured the Board there are several steps to implement prior to establishing a presence.

**VI. Executive Director Report – Alison Bradywood – DISCUSSION/ACTION. Continued.**

**C. Rules Update – Jessilyn Dagum**

Ms. Dagum reported on the status of rules in progress, including emergency rules. A rules hearing is to be scheduled for the next business meeting in March.

**D. Health Enforcement and Licensure Management System (HELMS) Update – Karl Hoehn**

Mr. Hoehn reported on the HELMS project progress. Expected go live scheduled to begin in late 2025, HELMS Lite testing expected to begin in February. Due to challenges with the project, HELMS will be operating under the direct observation of the chief information officer of the State of Washington.

**VII. Subcommittee Report – DISCUSSION/ACTION**

**A. Advanced Practice – Jonathan Alvarado, Chair**

Dr. Gorski presented an update on AP Compact workshops and on title change from ARNP to APRN. WABONs seeking bill sponsors.

**B. Consistent Standards of Practice (CSPSC) – Ella Guilford, Chair**

**1. Patient Abandonment – Commonly Asked Questions (CAQs)**

The Washington State Board of Nursing (WABON) has a current interpretive statement on patient abandonment. The Washington State Nurses Association (WSNA) asks WABON for guidance on whether a nurse, who leaves a patient to prevent imminent personal harm in the event of an active shooter, be considered patient abandonment. With the notable increase in workplace violence, and specifically active shooters in health care, nurses are provided with education on their role in the event of an active shooter. The current standard/training typically involves a “*run, hide, fight*” model.

The nursing rules ([WAC 246-840-710](#)) only include a brief statement on patient abandonment: “Willfully abandoning clients by leaving a nursing assignment, when continued nursing care’s required by the condition of the client(s), without transferring responsibilities to appropriate personnel or caregiver.”

**ACTION:** Ms. Guilford moved, with a second from the Consistent Standards of Practice Subcommittee, to approve the Patient Abandonment CAQs. The motion passed.

**2. CSPSC Position Description**

The CSPSC Position Description defines the purpose, membership, roles, responsibilities, and duties of the CSPSC which has not been officially reviewed/revised since 2017. The subcommittee members determined some updates and minor revisions were needed.

**ACTION:** Ms. Guilford moved, with a second from the Consistent Standards of Practice Subcommittee, to approve the CSPSC Position Statement. The motion passed.

**C. Discipline – Sharon Ness, Chair**

**1. Procedure A21 Decision Making Criteria for License Applications**

Implementation of the Nurse Licensure Compact has changed the way licensing considers criminal convictions on applications. WABON cannot issue a multistate credential if the applicant has any felony conviction, no matter how old.

The updated procedure rescinds decision making authority for HSQA background check staff and requires all criminal conviction history to be provided to WABON in accordance with relevant laws and regulations.

**ACTION:** Ms. Ness moved, with a second from the Discipline Subcommittee, to adopt revisions to Procedure A21 Decision Making Criteria for License Applications. The motion passed.

2. Draft WAC 246-840-750 thru 780 and a new rule section WAC 246-840-790 in response to [Substitute House Bill \(SHB\) 1255](#).

**ACTION:** Ms. Ness moved, with a second from the Discipline Subcommittee, to approve draft proposed changes to WAC 246-840-750 through 780 as well as new WAC section WAC 246-840-790 and file the rule language proposal with the Code Reviser's Office as a CR-102. The motion passed.

**D. Licensing – Dawn Morrell, Chair** – No report

**E. Research – Judy Loveless-Morris, Chair** – No report

**F. Education – Kimberly Tucker, Chair**

1. Procedure E02.04 Nursing Assistant Training Program Approvals
2. Procedure E10.01 Complaints, Investigations, and Actions related to Nursing Assistant Training Programs

The new rules chapter for nursing assistants (WAC 246-841A) includes regulatory changes impacting procedures for the approval of nursing assistant training programs and for complaint investigations and disposition. In addition, Nursing Assistant Program Approval Panel (NAPAP) procedures require review on a scheduled basis to assure they are up-to-date and as efficient and effective as possible.

**ACTION:** Ms. Daniels moved, with a second from the Education Subcommittee, to adopt revisions to procedure E02.04 and adopt new procedure E10.01. The motion passed.

## **VIII. Education – Dr. Gerianne Babbo, Dr. Kathy Moisia - DISCUSSION/ACTION**

### **A. Nursing Education**

1. SB 5582 Update - 1:2 Simulation Draft Rules Update

Dr. Babbo thanked the education team, attorneys, and Ms. Dagum. Dr. Babbo reported the team's working on drafting a 1:2 simulation rule based on evidence and best practices as defined by the simulation professional organization, International Nursing Association for Clinical Simulation and Learning ([INACSL](#)), and the Society for Simulation in Healthcare ([SSIH](#)), the work will be presented during the education session. Dr. Babbo further presented a timeline and tentative rules hearing to take place at the May Business Meeting.

2. Participation in WCN Clinical Placement Assessment.

Dr. Babbo reported the participation of WABON role to facilitate communication between education and health care facilities with the goal of increasing clinical placements. WCN's conducting data gathering on needs and policies to support placements for diverse populations.

3. International Center for Regulatory Scholarship (ICRS) Certificate Victoria Hayward  
Dr. Hayward completed her ICRS Certificate with the National Council of State Boards of Nursing program and has been invited to the institute in April.

### **B. Nursing Assistants**

1. Progress on Strategic Plan for Nursing Assistants.

Dr. Moisia reported they are implementing the rules changes for the new NAC chapter, continuing to implement NA testing, working on the apprenticeship pilot with sponsor Washington Healthcare Association, and establishing a rural hospital program training



for high school students as pursuant to legislation. Dr. Moisio further reported they are addressing language and timeline considerations for nursing assistants.

**2. Nursing Assistant Testing**

Dr. Moisio reported testing capacity has expanded and processes are being automated as much as possible. The team's working on improvements to registration, candidate sign-ins and minimizing the no-show rate. Total skills test takers for the quarter are 3,004, with 2,343 passing which is an increase from previous years. 1<sup>st</sup> attempt pass rates have also increased from previous years, for example 70.5% in 2021 to 78% in 2023. There are 78 program sites offering skills tests in Washington.

**IX. Education Session – Evidence-Based Regulation of Simulation: Draft Rule Updates Informed by CR-101 Workshops – Katie Haerling, PhD, RN, CHSE**

Dr. Haerling is a Pro Tem Member of WABON and an advocate for high-quality simulation and evidence-based regulation of simulation used in nursing education. Dr. Haerling was the lead author of the recent *Journal of Nursing Regulation* article, "Contributing to evidence-based regulatory decisions: A comparison of traditional clinical experience, mannequin-based simulation, and screen-based virtual simulation" and upcoming *Journal of Nursing Education* article, "A cost-utility analysis comparing traditional clinical, mannequin-based simulation, and virtual simulation activities."

Dr. Haerling presented the draft language for the simulation rule, and the process for drafting language for the 1:2 simulation rule using a review of the literature, healthcare simulation standard of best practice, consultation, and public workshops.

**X. Complete WABON Annual Survey – Lohitvenkatesh Oswal - DISCUSSION/ACTION**

Mr. Oswal presented the WABON Annual Survey and sent a link via email for completion to Board Members and Pro Tems.

**XI. Public Comment**

This time allows members of the public to present comments to the WABON. Several members of the public expressed interest in providing comments but were not present.

Ms. Kaway – commented they were happy WABON will be joining social media and asked about generational considerations for board membership.

**XII. Legislative Panel – Quiana Daniels, Anthony Partridge– DISCUSSION/ACTION**

Ms. Daniels and Mr. Partridge gave a report on the legislation reviewed and discussed at the legislative panels, reviewed the legislative priorities, and invited the public to attend the meetings on Wednesday's 4:00 PM – 5:00 PM during the session. For a copy of the agenda and information about the meeting, interested parties may visit:

<https://nursing.wa.gov/about-us/meetings> under the Legislative Panels section or sign up for GovDelivery at [Washington State Department of Health \(govdelivery.com\)](https://www.govdelivery.com).

**XIII. 2:00 PM – 2:30 PM – Executive Session – Closed to the Public**



At 2:00 PM, Mr. Canary moved the Board Members into Executive Session for the purpose of discussing ongoing litigation, which was closed to the public and not recorded. The executive session ended at 2:30 PM, when the Board returned to the public meeting.

#### **XIV. Board Member Poll - Evaluation**

##### **1. Did the length of the packet meet your needs?**

Strongly Agree 55%  
Agree 45%  
Neither Agree nor Disagree 0%  
Disagree 0%  
Strongly Disagree 0%

##### **2. Was the information and SBAR in the packet helpful?**

Strongly Agree 82%  
Agree 18%  
Neither Agree nor Disagree (0)%  
Disagree 0%  
Strongly Disagree 0%

##### **3. Did you feel like your voice was heard?**

Strongly Agree 73%  
Agree 18%  
Neither Agree nor Disagree 9%  
Disagree 0%  
Strongly Disagree 0%

##### **4. The meeting content was relevant to the Strategic Plan and to the Board?**

Strongly Agree 82%  
Agree 18%  
Neither Agree nor Disagree 0%  
Disagree 0%  
Strongly Disagree 0%

##### **5. Comments**

- A.C., I think the meeting went very well. The board had great discussions and staid on point and focused throughout the meeting.
- Q.D. Great, effective meeting!
- N.P. Evidence Based regulations of sim presentation was very thorough, and informative; being a new member I found the presentation useful (it included the background information, status)
- M.M. Adam did a great job welcoming the new members and encouraging their participation and questions. Such awesome work on testing improvements and simulation. Thank you for the budget report.

#### **XV. 2:37 PM - Closing**



**Washington State Board of Nursing (WABON)  
Advanced Practice Subcommittee Meeting Minutes  
November 15, 2023**

**Subcommittee  
Members Present:**

Emerisse Shen, MSN, CNP, FNP, ARNP, Acting Chair  
Jonathan Alvarado, ARNP, CRNA  
Kimberley A. Veilleux, DNP, RN, ANP-BC  
Ronna Smith, MN, ARNP  
Bianca Reis, DNP, MBA, ARNP, PMHNP-BC  
Jeffery Ramirez, Ph.D., PMHNP, CARN-AP, CNE, FNAP, FAANP, FAAN  
Cyd Marckmann, DNP, ARNP  
Megan Kilpatrick, MSN, ARNP-CNS, AOCNS  
Wendy E. Murchie, DNP, CPNP-AC  
Michelle Dedeo, DNP, ARNP-CNS, ACCNS-AG, CCRN, CNRN, SCRNP  
Molly Altman, PhD, CNM, MPH, FACNM

**Staff Present:**

Mary Sue Gorski, PhD, RN, Director, Advanced Practice and Research  
Alison Bradywood, DNP, MPH, RN, NEA-BC, Executive Director  
Jessilyn Dagum, Policy Analyst  
Emma Cozart, Data Consultant  
Lohitvenkatesh Oswal, Research Assistant

**I. 7:00 PM Opening – Emerisse Shen, Acting Chair  
Call to Order**

- Emerisse Shen 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/WABON Business Meeting Updates
- Review of Advanced Practice Draft Minutes: October 18, 2023
  - Reviewed, with consensus to bring to the January 12, 2024 WABON business meeting for approval.

**III. Old Business**

- Naturopathic Physician Scope of Practice change
  - Emerisse Shen and Mary Sue Gorski gave background information on Naturopathic scope of practice request. Subcommittee discussed and gave recommendation to bring to the WABON meeting with a second from the AP subcommittee.
- AP Compact – Prepare for December meeting and see packet
  - Mary Sue Gorski gave an update on the planning of the AP Compact invited workshops in Seattle and Spokane. Mary Sue Gorski and Alison Bradywood provided background on the AP Compact and subcommittee discussed and provided comments, questions, and concerns.

**V. New Business**

ARRC Rulemaking – ARNP Education Requirements

Jessilyn Dagum provided an update on JARRC rulemaking

**VI. Ending Items**

Public Comment

- The public was given the opportunity to comment on the agenda items.
- Date of Next Meeting – January 17, 2024
- Adjournment – The meeting adjourned at 8:02 PM.

DRAFT



**Washington State Board of Nursing  
Discipline Subcommittee **MINUTES**  
December 19, 2023  
3:30 pm to 5:30 pm  
Adjourned 5:11 pm**

**Committee Members:** Sharon Ness, RN, Chair  
Dawn Morrell, BSN, RN, CCRN  
Quiana Daniels, GCertHealthSc, BS, RN, LPN  
*Judy Loveless-Morris, PhD, Public Member - Absent*  
*Tiffany Randich, RN, Pro-Tem – Excused*  
Michelle Dedeo DNP, ARNP-CNS, ACCNS-AG, CCRN, CNRN, SCRN, Pro-Tem  
Molly Altman, PhD, CNM, MPH, FACNM, Pro-Tem  
Tracy Rude, LPN, Pro-Tem, ad hoc

**Staff:** Catherine Woodard, Director, Discipline and WHPS  
Karl Hoehn, JD, Assistant Director, Discipline - Legal  
Grant Hulteen, Assistant Director, Discipline – Investigations and WHPS  
Barb Elsner, HSC  
Holly Palmer, HSC  
Margaret Holm, JD, RN, ad hoc  
Bonnie King, Policy Analyst, ad hoc  
Jeff Lippert, Attorney, ad hoc

1. **3:30 pm opening – Sharon**
  - Call to order – digital recording announcement
  - 3:35 pm opening
  - Roll call of board members and staff – Sharon and Catherine
  - Introduction of new Pro-Tems
2. **October 24, 2023 Minutes– Sharon**
  - In draft format until WABON approves at the January 2024 business meeting.
  - Consensus to move to January business meeting.
3. **Performance measures – October and November 2023 – Catherine, Grant, Karl**
  - Investigations – Grant
    - CMT reviewed 10% more cases, up to 208 from 189.
    - Opened 94, up from 72.
    - 149 completed; investigators completed an average of 7.4 cases/month.
  - Legal – Karl
    - Investigations coming down; all attorneys working a full caseload.
    - Legal Reviews are above timelines.
    - Drafting time has been going up.
    - Slightly under target for finalizing but working a lot of complex cases.
  - WHPS – Grant
    - Averaging 230 participants in the program.
    - 81% of the nurses are employed in nursing practice.
    - Meeting all performance metrics.
    - Noncompliance – 23 instances; summarized in packet.
    - Eight RNs graduated in the past two months.
  - SUDRP - Grant
    - Eleven cases presented in October/ November.
    - Two appearances, both graduations.
    - One action taken for discharge and statement of charges issued for noncompliance.
  - Performance Measures - Catherine
    - Discipline has the most performance measures of WABON.
    - Mary Sue's group in research is really doing well with their data dashboards, which is what we are moving towards.
    - Asking members here what is most important to see at this meeting – Alison suggested compressing data to a one-page report for the business meeting.
      - Sharon – Would like to see more info on the topics/reasons for the complaints.
      - Tracy – Seem to remember that was being done in the past.
      - Margaret – ER uses pie charts to report.
      - Catherine – The key elements we collect at intake may not be the same when we get to the end of the investigation. The case nature sometimes morphs into other things than first reported.
      - Tracy – Maybe review six months at a time, twice a year.
      - Margaret – She is attending the CMT meetings for this purpose – currently breaking complaints down like TERCAP used to. The problem is that the beginning category is not always the end category.
    - Any other key elements (other than intake reason) you'd like to see?
      - Dawn – to what end is this wanted/needed?

- Margaret – For WABON’s full work, it’s more than just curiosity. It helps with determining what kinds of issues are turning up and how we can focus our presentations, etc.
- Tracy – We kind of lump all the things together in the practice area – not aware of things being split up by type of facility, etc.
- Are the numbers of cases important?
  - Tracy – Open cases, yes.
  - Dawn – Feels it’s important to continue gathering, don’t want to be missing things; this data pulls all the parts of the board together into one place.
- Catherine – Holly will be working with Emma to get the data displayed more effectively.
  - Add every six months – the last six months at the February DSC meeting, and then again in August.
- Karl – When the pilot project started, there were some things we didn’t do in the beginning - like the performance measures.
  - Catherine – HSQA developed these in 2009 and we report on the at every subcommittee and business meeting.
  - HSQA used to prepare a comparison report between HSQA, WMC, and WABON. We stopped doing that a couple years ago. HSQA is very interested in the work we’re doing that makes us so efficient.
  - Will continue to collect data , although it may not all be presented.
- Karl – Legal group has baseline measures, but they don’t really reflect reality of today –discussion may be needed to consider modifying those baselines.
- Dawn – Appreciate the work that’s done.

**4. Bill Implementation and Rules Updates – Catherine, Karl, Grant, Jeff Lippert, Bonnie King**

- RCW 18.80 Nurse Licensure Compact (NLC). Projected to begin issuing multi-state licenses in January. – Karl presented update
  - Ongoing work. Ran into the issue that if an RN has a WA SSL and wants an MSL, the MSL has to have the same number as the SSL – IT worked through this and reached a solution. When a MSL credential is created, there is a workaround in the background that will make the SSL show up as MSL.
  - All changes have to be done through ILRS as a “band aid” and will be finalized through HELMS as well.
  - We should be able to issue the first MSL one on January 31, 2024. Quiana Daniels will receive the first MSL in the state of Washington.
  - The new fees go into effect by January 5<sup>th</sup>; hearing held, no objections, and CR103 filed.
- RCW 18.70.440 (SHB 1255) WHPS Stigma and Stipend program. Draft rule language for review. Jeff Lippert reviewed updated language.
  - The stigma piece of HB1255 involves removing documents from provider credential search – they can be removed, but it still has a flag for enforcement action; there is a solution for that that will be implemented (the prioritization was lowered due to the MSL issue) to remove the enforcement flag. This is an IT project.

- Adding a new WAC regarding distribution; 2 workshops w/ no substantial edits; on a fast track, due to be implemented July 2024; Jeff is asking us to approve the draft language to bring before the board in January – if board approves, we can move this forward to the CR102.
- Additional funding for the stipend program is NOT in the governor's budget; we still need the language because we never know what might happen in the legislative session. We do have \$25,000 to spend each year that the legislature allocated to the program.
  - Sharon – Requested interested parties meetings update. Grant said we had two meetings; one person attended each and both went well.
- Definition updates appear in -760.
- Presented updated version of draft language to -790 – updated verbiage; some language comes direct from the statute; reviewed all pieces of -790.
  - Dawn – Maybe consider using the \$25k to pay initial evaluations.
  - Grant – if we offered the eval it would save a lot if we could identify those who aren't qualified for the program.
  - Grant – still working on contracts with facilities for collections for testing.
- Consensus reached to move the rule language to the full board in January.

## 5. Procedure Review – Catherine, Karl

- A21 Licensing Criteria
  - This procedure originated in 1997. Now, under the NLC , we can't issue an MSL to anyone with a felony.
  - Karl – The MSL says no felony, ever. It also says that denials can be made based on misdemeanors that relate to the practice of the profession. In 2016, the commission delegated decision making authority to the FBI background staff; included a complicated chart with specific crimes and a timeline. That won't work under the compact.
  - The FBI background group requests fingerprinting of out-of-state people who are looking to get a SSL in WA.
  - Goal of the rewrite is to take away the delegation from HSQA and bring it back inhouse so the board can decide how to treat criminal convictions.
    - Karl reviewed draft language for the procedure with the group; flowchart and table removed.
    - Consensus reached to forward this to the January board meeting for full approval.

## 6. Work plan – Sharon, Catherine

- The last scheduled procedure revision is on this meeting agenda – as other things come to the surface, we will address them.
- Data collection from CMT regarding discrimination – Research had to wait for software to do analysis – it will be on February agenda.
- Semi-Annual performance measures will be on the February agenda.
- ER Program Review – Margaret will present the last two calendar years at the February meeting.
- Workplan not as robust as in the past but our work because we don't have an active part of the strategic plan this time, but work continues, and we will be adding DEI pieces; plan to meet with medical and potentially add some of their concepts to our work.



**7. Public comment – Sharon**

- Limited to two minutes per speaker – public provided the opportunity to speak.
- No comment.

**8. 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.
- No comments.

**9. Adjourned at 5:11pm**

DRAFT



**Washington State Board of Nursing  
Consistent Standards of Practice Subcommittee Minutes  
December 1, 2023**

<b>Committee Members Present:</b>	Ella Guilford, MSN, M.ED., BSN, RN, Chair Heleen Hufnagel, MBA-HCA, BS, Member Quiana Daniels, BSN, RN, LPN, Member Tiffany Randich, RN, LPN, Pro Tem Diana Meyer, DNP, RN, NEW-BC, FAEN, Pro Tem
<b>Staff</b>	Deborah Carlson, MSN, PMC, CPM, RN, Director of Nursing Practice Shana Johnny, DNP, MN, RN, Nursing Practice Consultant Margaret Holm, JD, RN, Nursing Practice Consultant Dennis Gunnarson, Administrative Assistant Seana Reichold, Staff Attorney

**Opening:**

Committee Chair Ella Guilford called the meeting to order at 12:01 P.M. The Consistent Standards of Practice subcommittee members and staff were introduced. Commissioner Guilford read the Public Disclosure Statement aloud.

**Announcements:**

- Shana Johnny introduces new staff and support staff; Anthony Partridge is Assistant Director for Regulatory Affairs, Katy Mayes with the Rural Hospital & High School pilot, Rachel Percell in Communications, as New Commission members Jacob Garcia and Norma Perez.
- Ella introduced the Hot Topics.
- Ella introduced Informed Consent.

**Draft Minutes:**

CSPSC agreed to move the June 2 and June 8, 2023, draft minutes to the November WABON business meeting.

**Old Business:**

**Informed Consent Advisory Opinion** – Ella explained that Debbie will present workshops for this process in January, with prior gov delivery notification.

**Commonly Asked Questions (CAQs)** – Shana explained that we are working on these topics, and they are in early draft form. Debbie explained that new language will be added for the cosmetology issue. We made changes on consent and abandonment issues. Diana Meyer expressed appreciation for being able to give input on the document beforehand. Debbie said a person can add your name

when you leave comments. Diana recommends moving it forward to the commission. The balance of documents is in process.

Vote to Approve the Minutes, moved by Quiana and seconded by Diana.

**COVID screening workshop follow-up** – Shana explained that a report was developed in October and a draft letter follow-up is in process for December. Online guidance documents are available. If anyone wants to contribute, provide your email in the chat.

**Consent & Abandonment document** – Discussion consented to move document to the board.

**New Business:**

**CSPSC Orientation Presentation**– Ms. Carlson previewed the PPT presentation.

**CSPSC Position Description Revision work**– Ms. Carlson reviewed the document, and the committee approved it to go to the board.

**Public Comment:** Quiana commented that the meeting went smoothly. Katie Johnson commented on the access issues.

**Ending Items**

**Date of Next Meeting** – February 2, 2023

Adjournment 12:57 PM

**Nursing Care Quality Assurance Commission (NCQAC)**  
**Licensing Subcommittee Minutes**  
**December 19, 2023 1: 00 pm to 2: 00 pm**

**Committee Members:** Dawn Morrell, BSN, CCRN, RN, Chair  
Adam Canary, LPN  
Helen Myrick, Public Member  
Yvonne Strader, RN, BSN, BSPA, MHA  
Jacob Garcia, MBA, MSN, RN, PCCN

**Staff:** Amber Zawislak-Bielaski, MPH, Assistant Director of Licensing  
Shana Johnny, MN, RN, Nurse Practice Consultant, Ad- Hoc  
Karl Hoehn, JD, Assistant Director of Discipline- Legal Services  
Miranda Bayne, Staff Attorney  
Jessilyn Dagum, Policy Analyst  
Lori Underwood, Licensing Supervisor

This meeting was 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 8, 2024**, NCQAC meeting. For a copy of the actual recording, please contact the Public Disclosure Records Center (PDRC) at [PDRC@doh.wa.gov](mailto:PDRC@doh.wa.gov).

**I. 1:00 PM Opening – Dawn Morrell, BSN, CCRN, RN Subcommittee Chair**

- **Roll Call**
- **Call to Order** - Board Member Dawn Morrell, Board Member Helen Myrick, Board Member Yvonne Strader, Board Member Adam Canary, Mr. Karl Hoehn, Ms. Amber Zawislak-Bielaski, Ms. Lori Underwood

**II. Standing Agenda Items**

- **Announcements/Hot Topic/NCQAC Business Meeting Updates** - Board Member Morrell asked the committee if there were any topics to be discussed, no topics were brought forward.
- **Approve Minutes for October 17, 2023** - Board Member Canary moved with a second from Board Member Strader to approve the minutes for October 17, 2023.

**III. Old Business**

- **Temporary Practice Permit Rules** – Ms. Zawislak-Bielaski provided an update on where we were on the Temporary Practice Permit rules. Ms. Dagum completed all her work on the documentation and moved forward with processing. Board member Morrell added that we should hear more about this in the upcoming January business meeting.

**IV. New Business**

- **Governor's Weekly Report** – Ms. Underwood provided an update on the Governor's report. She shared that we remain under the seven days to issue a temporary practice permit and that currently we are at four days. She continued to provide application numbers indicating that we have seen a significant drop

in applications since we became part of the Nurse Licensure Compact (NLC) in July. Ms. Underwood also shared that she had reached out to our Research unit to get an idea of how many multistate nurses we have working here in Washington. The research unit shared that about three thousand, eight hundred one nurses have self-reported as practicing here on their multistate license. Board member Morrell asked if there were any questions regarding the report before moving on to the next agenda. No questions were brought forward.

- **Nurse Licensure Compact Implementation Update** – Ms. Zawislak-Bielaski provided an update on phase two of the NLC implementation. She shared that we have been in communications with our IT department, as well as OLIC, and NCSBNs IT staff. We continue to work together in making sure that our system and NCSBNs system capture the data of the new multistate licenses when we begin issuing them in January. We have been working with OLIC on building the multistate applications in the online portal. Once they have completed their build, they will let us know so we can begin our testing. Ms. Zawislak-Bielaski continued the update by adding that right now, we are in a waiting period for everything to be built and then come together. She also added that we will be having onsite training for our licensing staff before we go live. Board member Morrell asked when our “go live” date would be. Ms. Zawislak-Bielaski replied that our “go live” date will be January 31<sup>st</sup>. Board member Morrell also advised the committee that we already have our first multistate applicant, Board member Quiana Daniels. Board member Morrell also asked if there would be a problem with applicants who do not have a social security number. Mr. Hoehn spoke to this by explaining that we cannot issue a multistate license to individuals who do not have a social security number. Board member Morrell advised that there may be a bill that addresses this. Ms. Zawislak-Bielaski explained that there is draft legislation that may impact that. The bill would require boards to still issue a credential to individuals with no social security number, not a citizen, and their primary state of residence was Washington state. She continued to add that perhaps the plan would be to send some amending language to address that for the compacts. Board member Strader advised that this was a house bill and Ms. Zawislak-Bielaski attempted to research what the name of the bill was. Mr. Hoehn added that this bill should not affect our ability to issue a single state license, only multistate licenses. Board member Strader suggested this be something we watch on the Legislative Panel. Ms. Zawislak-Bielaski advised that this was House Bill 1889.

## **V. Ending Items**

- **Public Comment** - None
- **Review of Actions**
- **Meeting Evaluation** - All
- **Date of Next Meeting** - February 20, 2024
- **Adjournment** 1:14 PM

## Education Subcommittee Meeting Minutes January 31, 2024

### Old Business

#### Holistic admissions for nursing programs-

The Washington Center for Nursing (WCN) has a link on their website with information on holistic admissions. The holistic admissions information is appropriate for nursing program deans and directors as well as students. As new information becomes available on holistic admissions, it will be posted to the WCN website. The WCN website link will be posted on the Nursing Education website under the Deans/Directors Resources.

### New Business

#### SB 5582 1:2 Draft Simulation Rules for Nursing Education

Dr. Babbo provided an overview of process/tentative timeline for moving forward:

**January 31, 2024:** Draft language presented to education subcommittee. The subcommittee will consider moving forward to BON for approval.

**March 8, 2024:** Present the motion to the BON to approve the draft rule language and proceed with the filing of the CR-102 process.

**May 2024:** CR-102 filed for hearing in June or July.

Dr. Haerling explained the 1:2 simulation draft rule process and noted key adjustments were made to the draft rule language based upon input from stakeholders. Dr. Haerling also addressed common misunderstandings (e.g., simulation hours are clinical hours, not skills lab hours).

A PowerPoint presentation was delivered by Dr. Haerling explaining the context of the 1:2 simulation rule development process. Dr. Haerling then reviewed the 1:2 simulation draft rule language.

#### [Evidence-Based Reg. of Simulation Draft Rule PowerPoint](#)

Comments from education subcommittee included:

- The rule development process was well-articulated.
- The rule development group was responsive to comments from stakeholders.
- Congratulations to the group on use of evidence to move this work forward.
- The language evolved as the group listened to feedback from stakeholders.

The education subcommittee recommended moving the 1:2 simulation draft rule language forward to the Board of Nursing (BON) for approval at the March 8, 2024, business meeting.

The education subcommittee chair reminded participants there will be another opportunity for comment at the rules hearing tentatively planned for June or July.

Public comments:

- Do the definitions apply to 1:1 and 1:2?
- LPN, RN to BSN, and BSN programs are called out for 1:2 simulation. What about LPN to BSN programs?
- Does 10% of faculty needing to be CHSE certified include adjunct, FT, PT?
- How will the BON operationalize the process for removing approval of 1:2 simulation for programs who meet the presented criteria? Would there be an immediate removal of the approval or other timeline?
- It's understood schools have 4 years from full approval of a new program to become endorsed or accredited. Is the goal to have all programs endorsed/accredited in the future?
- Research supported 1:5 faculty to student ratio for simulation. Draft rule language allows up to 10 students with one faculty. Budgets are not allocated by the nurse administrator so administration most likely will use the 1 faculty to 10 student ratio due to a lack of understanding of simulation.
- If a faculty member is doing the operational activities, does that mean they can't evaluate the students?
- Was the faculty to student ratio one of the measured outcomes of the research studies?
- If there are two campuses for the program, does there need to be a CHSE faculty on both campuses?
- Does the simulation technician need to be CHSOS certified?
- Appreciate the group listening to feedback and rule language revisions.

Dr. Babbo reminded the group there will be a Information Reference Sheet/Frequently Asked Questions document coming when the 1:2 simulation rules are final to help programs navigate the simulation rules. The Simulation Taskforce have been asked to share resources that may be helpful to programs.

Kim thanks everyone for attending and adjourned the meeting at 1258.





## Letter FROM THE President

### POST-BOARD MEETING UPDATE

Feb. 14, 2024

Greetings Colleagues:

The NCSBN Board of Directors (BOD) convened Feb. 6–7. Fortunately, the weather was warmer than usual for this time of year in Chicago.

A significant responsibility of the BOD is to consider the Finance Committee reports and receive the results of the annual fiscal audit. The audit firm RMS presented to the BOD in person. This was the first time that RMS had performed as NCSBN's auditing firm and they were found to be rigorous and collaborative in their approach. I am pleased to share that the RMS audit report yielded a clean audit with no deficiencies. My thanks to the treasurer, the Finance Committee and NCSBN's Finance staff for their attention to this important process.

As is customary at every meeting a verbal environmental scan was conducted which served to inform the BOD of regulatory issues and themes across our membership. At this time of year many legislatures are in session, so several BOD members reported both positive and concerning legislation, including nurse title protection, APRN bills, licensure, compacts, NRBs regulating other professions and workforce. The BOD agreed that NCSBN's tracking of legislation and communication to the membership was of value and appreciated. Examples of other regulatory matters discussed were Operation Nightingale, licensing issues, limits on NCLEX® testing, success of apprenticeship programs, work on NCSBN ID, medication aide testing, RN prescribing, use of Artificial Intelligence (AI) in the regulatory space and international applicants.

The BOD received an update on remote proctoring and the use of AI which will be presented at the Midyear Meeting. Staff also reported on the status of the Nursys® in Canada initiative. In November 2022, the British Columbia College of Nurses and Midwives (BCCNM) and the College of Nurses of Ontario (CNO) completed their initial licensure load and began submitting daily licensure update files to the Nursys in Canada system, which is separately kept in the Canadian CLOUD territory.

In January 2024, NCSBN launched the first phase that entails cross-system searching and cross-system Speed Memo capabilities between the two Nursys systems. The Nursys administrator will send notification when CNO and BCCNM are ready to start using Speed Memo function. This update ensures that each nurse has one unique nurse identifier (NCSBN ID), regardless of if the nurse is licensed in the U.S., Canada or both. NCSBN, BCCNM and CNO are developing the necessary legal agreements, policies, and procedures for the operationalization and expansion of Nursys in Canada to other Canadian NRBs. The BOD was pleased to learn of the progress related to this initiative.

Federal Affairs staff reported on efforts to build relationships with key individuals at federal agencies in furtherance of NCSBN strategic initiatives and objectives. The BOD also received a report on the status of federal legislation that may have implications for nursing regulation.

## Strategic Leadership Appointments at NCSBN

Dear Members,

We are honored to share an exciting update regarding key leadership roles at NCSBN. These strategic changes will greatly advance our mission and vision while elevating our organizational capabilities. Please join us in congratulating the following individuals on their well-deserved promotions:



### **Laura Doerr - Chief Human Resources Officer (CHRO):**

We enthusiastically name Laura Doerr as our first Chief Human Resources Officer. In her role, Laura will serve as a strategic business partner to Executive Leadership, overseeing all aspects of Organizational Development and Human Resources. With more than 25 years of expertise in aligning human resources strategies to organizational goals, her focus on talent management, employee engagement, and skills development will seamlessly align with our mission and vision. Laura will play a crucial role in cultivating our highly skilled team while fostering a collaborative and growth-oriented culture.



### **Jen Gallagher - Chief Operations Officer (COO):**

We are delighted to announce the promotion of Jen Gallagher to the role of Chief Operations Officer. With more than 20 years of experience and dedication at NCSBN, Jen has been an instrumental part of our greatest operational and testing successes. In her new capacity, she will continue to lead the business operations, ensuring streamlined processes, effective policies and optimal performance. With a deep understanding of NCSBN and a results-driven approach, Jen's expertise will be pivotal as we navigate new initiatives, innovations and solutions.

These appointments are a significant step forward in achieving organizational excellence and mark the beginning of an exciting chapter of growth and leadership.

Thank you,

Phil Dickison, PhD, RN  
 Chief Executive Officer  
 NCSBN

## POST-BOARD MEETING UPDATE, CONTINUED

Midyear Area Meeting proposed agenda topics were discussed. The BOD provided input and direction regarding the topics for these meetings, being mindful not to duplicate Midyear Meeting presentations and to ensure we were responding to topics of interest to the membership.

In a follow-up to the monthly Operation Nightingale calls that NCSBN hosted in 2023 the BOD and legal counsel discussed and considered suggestions and requests from the membership for certain actions on the part of NCSBN. The BOD recognizes that the work associated with processing Operation Nightingale cases is complex and demands increased resources at the individual nurse regulatory boards. The BOD is committed to continuing efforts to assist boards and reduce state burdens while carefully considering the role of NCSBN in these activities. The BOD identified additional information and actions NCSBN could take to support boards, and this information will be communicated soon.

CEO Phil Dickison shared highlights of his first few months in his new role and provided his internal and external goals and progress towards those goals. It was evident to the BOD that Phil is leading with energy, commitment and passion focused on the mission of the organization, building for an even more positive future.

I look forward to seeing many of you in Atlanta at the Midyear Meeting where you will find information and opportunities for discussion on many of the topics that the BOD discussed at their meeting. I encourage you all to give some thought to solicitations from the Leadership Succession Committee and the Awards committee as these represent opportunities to encourage and recognize leaders in our midst. Safe travels to Atlanta.

Warm Regards,

**Jay Douglas, MSM, RN, CSAC, FRE**

President

804.516.9028

[jay.douglas@dhp.virginia.gov](mailto:jay.douglas@dhp.virginia.gov)

INVESTIGATIVE PERFORMANCE MEASURES							
	Dec-22	Dec-23	% of Change		Nov-23	Dec-23	% of Change
<b>Cases Reviewed at CMT</b>	188	167	-11%		127	167	31%
<b>Cases Opened to Investigation</b>	77	68	-12%		57	68	19%
<b>Open Cases in Investigation Queue</b>	431	387	-10%		370	387	5%
<b>Average Caseload per Investigator</b>	48	39	-19%		37	39	5%
<b>Total Investigations Completed</b>	77	67	-13%		76	67	-12%
<b>Percentage of Cases Completed w/in Time Lines Target 77% PM 2.2</b>	64%	79%	15%		66%	79%	13.0%
<b>Percentage of Investigations Opened Beyond 170 days Target 23% PM 2.4</b>	52%	45%	-7.0%		43%	45%	2.0%
<b>Investigations Completed per Investigator PM 3.1</b>	8.6	6.7	-22%		7.6	6.7	-12%
<b>Task Back Assigned</b>	12	9	-25%		5	9	80%

<b>INVESTIGATIVE PERFORMANCE MEASURES</b>	<b>Jan-23</b>	<b>Jan-24</b>	<b>% of Change</b>		<b>Dec-23</b>	<b>Jan-24</b>	<b>% of Change</b>
<b>Cases Reviewed at CMT</b>	213	189	-11%		188	189	1%
<b>Cases Opened to Investigation</b>	66	89	35%		77	89	16%
<b>Open Cases in Investigation Queue</b>	424	436	3%		431	436	1%
<b>Average Caseload per Investigator</b>	47	44	-7%		48	44	-9%
<b>Total Investigations Completed</b>	78	80	3%		77	80	4%
<b>Percentage of Cases Completed w/in Time Lines</b> Target 77% PM 2.2	64%	65%	1%		64%	65%	1%
<b>Percentage of Investigations Opened Beyond 170 days</b> Target 23% PM 2.4	52%	36%	-16%		52%	36%	-16%
<b>Investigations Completed per Investigator</b> <i>PM 3.1</i>	8.7	8.0	-8%		8.6	8.0	-7%
<b>Task Back Assigned</b>	3	12	300%		12	12	0%

**Nursing Care Quality Assurance Commission**  
**Legal Unit Performance Measures**  
**FY 2024 (Q2)**  
**Karl Hoehn, Legal Manager**

<b>Type of Measure</b>	<b>Month</b>	<b>Baseline</b>	<b>Oct</b>	<b>Nov</b>	<b>Dec</b>	<b>Q Avg.</b>
<b>Caseload/ Case volume</b>	Average Caseload per Attorney	<b>45.92</b>	45.57	48.14	45.57	<b>46.43</b>
	Cases Assigned to Legal	<b>41.33</b>	45.00	65.00	19.00	<b>43.00</b>
	TOTAL Finalized Cases	<b>56.33</b>	57.00	45.00	35.00	<b>45.67</b>
<b>Performance</b>	Average of Finalized Cases per Attorney (Target 10 per month)	<b>14.08</b>	8.14	6.43	5.00	<b>6.52</b>
	Percentage of Legal Reviews Sent to RCM in 30 Days or less (Target 77%)	<b>78.33%</b>	87.50%	80.00%	65.00%	<b>78%</b>
	Document drafting time: Percentage of Drafts to AAG or SOA Served in 30 Days or less (Target 77%)	<b>86.67%</b>	40.00%	50.00%	67.00%	<b>52%</b>
<b>Work Type/Complexity</b>	Percentage of Cases involving an ARNP	<b>6.00%</b>	14.10%	14.58%	15.04%	<b>15%</b>
	Number of Cases forwarded to AAG	<b>10.67</b>	3	5	9	<b>5.67</b>
	Finalized with Legal Review only	<b>21.00</b>	26	25	20	<b>23.67</b>
	Finalized by Default or Final Order After Hearing	<b>12.00</b>	9	2	5	<b>5.33</b>
	Finalized by STID, AO or APUC (Settlements)	<b>19.00</b>	12	14	4	<b>10.00</b>
	Other (releases, reinstatements)	<b>4.33</b>	10	4	6	<b>6.67</b>

# WABON LEGAL UNIT PERFORMANCE MEASURES

January - March 2024

Karl Hoehn, Legal Manager

Type of Measure	Performance Measure	Baseline	Jan '24	Feb '24	Mar '24	3 Month Average
Caseload/ Case Volume	Average Caseload per Attorney	45.92	43			14
	Cases Assigned to Legal	41.33	72			24
	TOTAL Finalized Cases	56.33	63			21
Performance	Average of Finalized Cases per Attorney (Target 10 per month)	14.08	9			3
	Percentage of Legal Reviews Sent to RCM in < 30 Days	78.33%	77.78%			77.78%
	Document drafting time: Percentage of Drafts to AAG or SOA Served in < 30 Days	87%	40.00%			40.00%
Work Type/Complexity	Percentage of Cases involving an ARNP	6%	14.80%			14.80%
	Number of Cases forwarded to AAG	10.67	5			2
	Finalized with Legal Review only	21	43			14
Finalization	Finalized by Default or Final Order After Hearing	12	2			1
	Finalized by STID, AO or APUC (Settlements)	19	9			3
	Other (releases, reinstatements)	4.33	9			3



### December 2023 WHPS Graduation Report

<b>Participant: Case ID</b>	<b>Participant: Participation Type</b>	<b>Participant: Program Start Date</b>	<b>Participant: Program Discharge Date</b>	<b>Participant: License Type</b>
1986-04-0890	Order	6/15/2022	12/29/2023	RN
17-3-V/RN-50287	Voluntary	4/17/2017	12/29/2023	RN

## January 2024 WHPS Graduation Report

<b>Participant: Case ID</b>	<b>Participant: Participation Type</b>	<b>Participant: Program Start Date</b>	<b>Participant: Program Discharge Date</b>	<b>Participant: License Type</b>
18-11-V/RN-05422	Voluntary	1/3/2019	1/10/2024	RN
1975-02-1912	Referral Contract	1/2/2020	1/24/2024	RN
1981-05-5663	STID	1/26/2023	1/25/2024	RN

# WHPS Monthly Report - December 2023

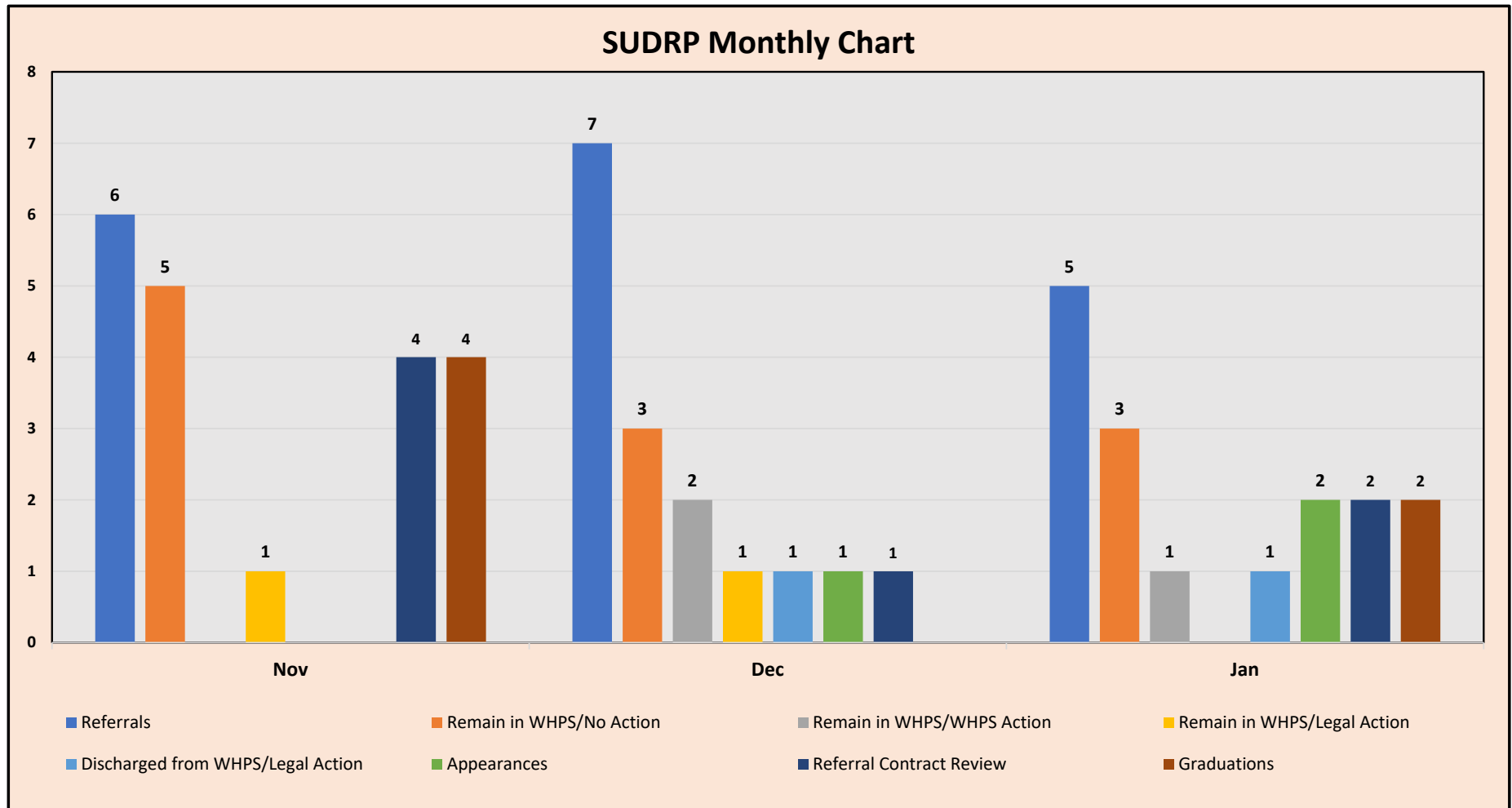
Stage																	
	New Intake		Current Monitoring														
License Type	2022	2023	2022	2023													
ARNP	1		19	17													
RN/LPN	10	6	219	217													
NT																	
Total	11	6	238	234													
Referral Type - Monitoring (In-State)																	
	APUC		Order		Pending		RC		STID		Voluntary		NRE				
License Type	2022	2023	2022	2023	2022	2023	2022	2023	2022	2023	2022	2023	2022	2023			
ARNP	2		1	2		1	8	4		1	5	5					
RN/LPN	9	12	53	55	6	12	85	80	24	21	24	21					
NT																	
Total	11	12	54	57	6	13	93	84	24	22	29	26					
Total Monitoring	217	214															
Referral Type - Monitoring (Out-of-State)																	
	APUC		Order		Pending		RC		STID		Voluntary						
License Type	2022	2023	2022	2023	2022	2023	2022	2023	2022	2023	2022	2023					
ARNP	1			2			2	1			1	1					
RN/LPN			5	3		1	8	6	4	6							
NT																	
Total	1	0	5	5	0	1	10	7	4	6	1	1					
Total Monitoring	21	20															
Discharge Type																	
	Not Appropriate		Offered/ Refused		Referred Back to WABON		Pending Discipline		Voluntary Withdrawal		Successful Completion		Deceased		Medically Discharged		
License Type	2022	2023	2022	2023	2022	2023	2022	2023	2022	2023	2022	2023	2022	2023	2022	2023	
ARNP																	
RN/LPN			2	1						1	6	2					
NT																	
Total	0	0	2	1	0	0	0	0	0	1	6	2	0	0	0	0	
Total Discharge	8	4															
Performance Measures																	
					2022	2023											
Case Manager Caseload (Intake & Monitoring)			Melissa Fraser		50	50											
			Heidi Collins		46	30											
			Lori Linenberger		47	50											
			Shelley Mezek		57	53											
			Alicia Payne		55	51											
Average from Inquiry to Intake - Target 7 Days					5	2											
Average from Intake to Monitoring - Target 45 Days					50	30											
Employment Measures (In-State)																	
	2022				2023												
License Type	Employed		Unemployed		Employed		Unemployed										
ARNP	13		3		13												
RN/LPN	159		42		164		37										
NT																	
Total	172		45		177		37										
Percentage - Target 72%	79%		21%		83%		17%										
Grand Total	217				214												

# WHPS Monthly Report - January 2024

Stage																	
	New Intake		Current Monitoring														
License Type	2023	2024	2023	2024													
ARNP	1	1	18	17													
RN/LPN	5	8	213	218													
NT																	
Total	6	9	231	235													
Referral Type - Monitoring (In-State)																	
	APUC		Order		Pending		RC		STID		Voluntary						
License Type	2023	2024	2023	2024	2023	2024	2023	2024	2023	2024	2023	2024					
ARNP	2		2	2		1	7	4		1	4	5					
RN/LPN	9	12	52	56	5	12	81	80	25	20	23	22					
NT																	
Total	11	12	54	58	5	13	88	84	25	21	27	27					
Total Monitoring	210	215															
Referral Type - Monitoring (Out-of-State)																	
	APUC		Order		Pending		RC		STID		Voluntary						
License Type	2023	2024	2023	2024	2023	2024	2023	2024	2023	2024	2023	2024					
ARNP				2			2	1			1	1					
RN/LPN	1		5	3		1	8	6	4	6							
NT																	
Total	1	0	5	5	0	1	10	7	4	6	1	1					
Total Monitoring	21	20															
Discharge Type																	
	Not Appropriate		Offered/ Refused		Referred Back to NCQAC		Pending Discipline		Voluntary Withdrawal		Successful Completion		Deceased		Medically Discharged		
License Type	2023	2024	2023	2024	2023	2024	2023	2024	2023	2024	2023	2024	2023	2024	2023	2024	
ARNP	1										2						
RN/LPN	2		3		1	1			2		5	3					
NT																	
Total	3	0	3	0	1	1	0	0	2	0	7	3	0	0	0	0	
Total Discharge	16	4															
Performance Measures																	
					2023	2024											
Case Manager Caseload (Intake & Monitoring)			Melissa Fraser		47	51											
			Heidi Collins		43	30											
			Lori Linenberger		42	52											
			Shelley Mezek		50	51											
			Alicia Payne		49	51											
Average from Inquiry to Intake - Target 7 Days					1	3											
Average from Intake to Monitoring - Target 45 Days					38	49											
Employment Measures (In-State)																	
		2023				2024											
License Type		Employed		Unemployed		Employed		Unemployed									
ARNP		12		3		13											
RN/LPN		156		42		168		34									
NT																	
Total		168		45		181		34									
Percentage - Target 72%		79%		21%		84%		16%									
Grand Total		213				215											

Washington Health Professional Services Significant Non-Compliance Report - December 2023												
#	Participant Case ID	Program Start Date	Entry Reason	Anticipated Completion Date	Incident Date	Incident Type	Drug(s)	WHPS Action(s) Taken	Referred to SUDRP	Excused by Asst. Director	Within First 90 days	Drug of Choice
1	1968-07-5338B	5/25/2022	Voluntary	5/24/2027	12/28/2023	Positive Drug Screen - Genotox	Buprenorphine	Additional Test Scheduled; Correspondence with Nurse				amphetamine
2	1968-10-4976	8/7/2021	Voluntary	8/6/2026	12/26/2023	Missed Test/No Show		Additional Test Scheduled; Correspondence with Nurse; Referred for Evaluation; WSM Notified				alcohol
3	1974-03-0509	3/25/2020	Voluntary	4/16/2025	12/13/2023	Positive Drug Screen - UDS	Barbiturates	Correspondence with Nurse				alcohol
4					12/6/2023	Positive Drug Screen - UDS	Barbiturates	Correspondence with Nurse				alcohol
5	1977-09-9231	12/2/2020	Referral Contract	12/1/2025	12/4/2023	Missed Test/No Show		Additional Test Scheduled; Correspondence with Nurse				alcohol
6	1979-01-7975	2/25/2021	Referral Contract	3/3/2025	12/28/2023	Missed Test/No Show		Additional Test Scheduled				heroin
7	1981-04-9674	10/11/2023	RC	10/10/2028	12/12/2023	Positive Drug Screen - UDS	Alcohol	Counselor Notified; Referred for Evaluation			YES	opioids
8	1982-01-7156	1/6/2023	RC	1/5/2028	12/14/2023	Positive Drug Screen - Peth	Alcohol	Correspondence with Nurse; PSG Facilitator Notified; Referred for Evaluation				alcohol
9					12/26/2023	Missed Test/No Show		Additional Test Scheduled				alcohol
10	1986-05-0695B	2/3/2022	Voluntary	2/3/2027	12/27/2023	Missed Test/No Show		Additional Test Scheduled				amphetamine
11	1990-02-2782	6/5/2023	APUC	12/6/2027	12/8/2023	Missed Test/No Show		Self Test				opioids

Washington Health Professional Services Significant Non-Compliance Report - January 2024												
#	Participant Case ID	Program Start Date	Entry Reason	Anticipated Completion Date	Incident Date	Incident Type	Drug(s)	WHPS Action(s) Taken	Referred to SUDRP	Excused by Asst. Director	Within First 90 days	Drug of Choice
1	1958-05-7067B	12/29/2023	Pending	12/28/2028	1/17/2024	Positive Drug Screen - UDS	Alcohol	Correspondence with Nurse; Referred for Evaluation; Admitted Relapse			YES	Alcohol
2					1/16/2024	Relapse		Counselor Notified; PSG Facilitator Notified				
3	1966-03-5835	4/28/2021	Voluntary	4/27/2026	1/17/2024	Positive Drug Screen - Peth	Alcohol	Additional Test Scheduled; Ceased/Removed from Practice; Correspondence with Nurse; MRO Review Requested; PSG Facilitator Notified; Referred for Evaluation; WSM Notified				Alcohol
4	1966-06-5815	8/19/2022	STID	8/8/2024	1/11/2024	Positive Drug Screen - Genotox	Morphine	Correspondence with Nurse; MRO Review Requested				no use reported
5	1971-02-6602C	10/3/2022	STID	7/17/2027	1/22/2024	Missed Test/No Show		Additional Test Scheduled; Correspondence with Nurse; PSG Facilitator Notified; Testing Frequency Increased				alcohol
6					1/23/2024	Missed Test/No Show		Additional Test Scheduled; PSG Facilitator Notified; Testing Frequency Increased				
7	1971-08-7471	10/12/2022	RC	7/19/2027	1/30/2024	Positive Drug Screen - Peth	Alcohol	Additional Test Scheduled; Correspondence with Nurse; MRO Review Requested; PSG Facilitator Notified; Referred for Evaluation; Testing Frequency Increased; WSM Notified				opioid
8	1973-01-8928	10/11/2021	RC	10/30/2026	1/22/2024	Positive Drug Screen - UDS	Alcohol	Additional Test Scheduled; MRO Review Requested; WSM Notified				alcohol
9	1975-01-5562C	11/2/2021	Order	11/1/2026	1/10/2024	Missed Test/No Show		Self Test				heroin
10	1976-09-8041	6/30/2023	Order	6/29/2026	1/2/2024	Positive Drug Screen - Peth	Alcohol	Ceased/Removed from Practice; Correspondence with Nurse; Counselor Notified; PSG Facilitator Notified; Referred for Evaluation; Referred to SUDRP; WSM Notified; Admitted	1/23/2024			alcohol
11	1982-01-7156	1/6/2023	RC	1/5/2028	1/20/2024	Relapse	Alcohol	Correspondence with Nurse; Counselor Notified; PSG Facilitator Notified; Referred to SUDRP; Admitted Relapse	1/23/2024			alcohol
12	1986-05-0695B	2/3/2022	Voluntary	2/3/2027	1/11/2024	Missed Test/No Show		Additional Test Scheduled; Correspondence with Nurse; WSM Notified				amphetamine
13	1991-03-8783	11/7/2023	APUC	11/6/2024	1/12/2024	Missed Test/No Show		Correspondence with Nurse; Self Test				methamphetamine





## WHPS Monthly SUDRP Report - Dec 2023

Total SUDRP Cases Reviewed

7

### SUDRP Referral Reasons

	Positive Drug Screen	Missed Test	Multiple Missed Check-ins	Non-Compliance (Other)
Total	5	1	0	1
Total Referrals	7			

### Remain in WHPS

	No Action	WHPS Action
Total	3	2
Total WHPS Action	5	

### Remain in WHPS with Legal Action

	Legal: SOC	Legal: STID	Referred for Investigation
Total	0	0	1
Total Legal Action	1		

### Discharged from WHPS with Legal Action

	Legal: SOC	Legal: STID	Referred for Investigation
Total	1	0	0
Total Legal Action	1		

### Nurse Appearances

Total Appearances	1
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### Referral Contract Review

	Approved	Denied
Total	1	0
Total RC Review	1	

### Graduations

	Order	STID	APUC	RC
Total				
Total Graduations	0			

### Applications Reviewed

	Approved	Denied
Total		
Total Reviewed	0	

## WHPS Monthly SUDRP Report -January 2024

Total SUDRP Cases Reviewed

5

### SUDRP Referral Reasons

	Positive Drug Screen	Missed Test	Multiple Missed Check-ins	Non-Compliance (Other)
Total	3	1		1
Total Referrals	5			

### Remain in WHPS

	No Action	WHPS Action
Total	3	1
Total WHPS Action	4	

### Remain in WHPS with Legal Action

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

### Discharged from WHPS with Legal Action

	Legal: Statement of Charges	Legal: STID	Referred for Investigation
Total	1		
Total Legal Action	1		

### Nurse Appearances

Total Appearances	2
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### Referral Contract Review

	Approved	Denied
Total	2	
Total RC Review	2	

### Graduations

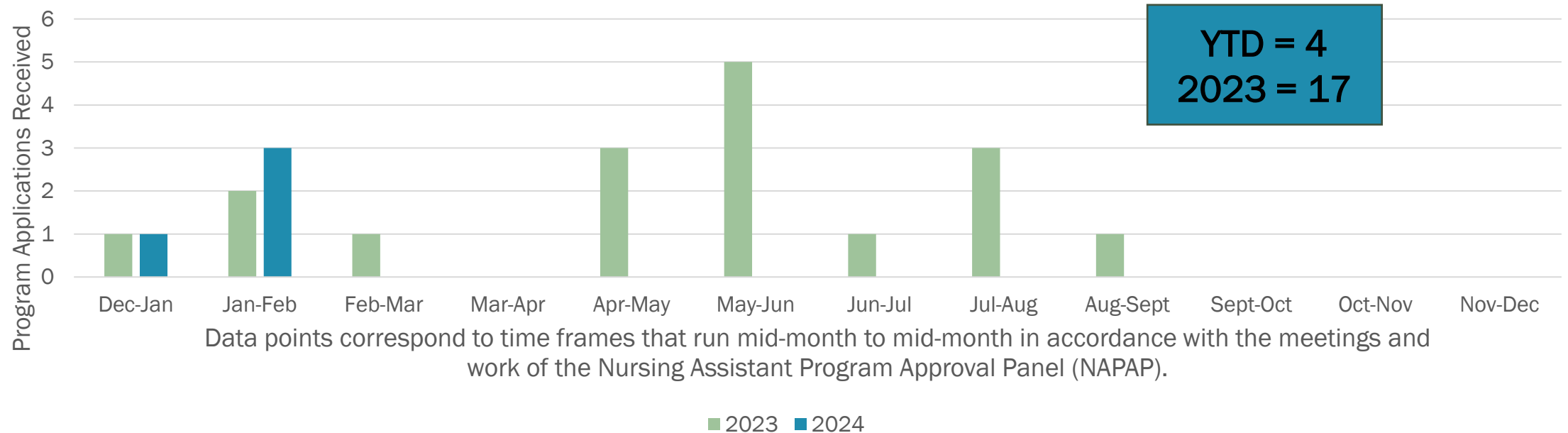
	Order	STID	APUC
Total		1	1
Total Graduations	2		



# NAPAP Performance Measures

2024

# Number of New Program Applications

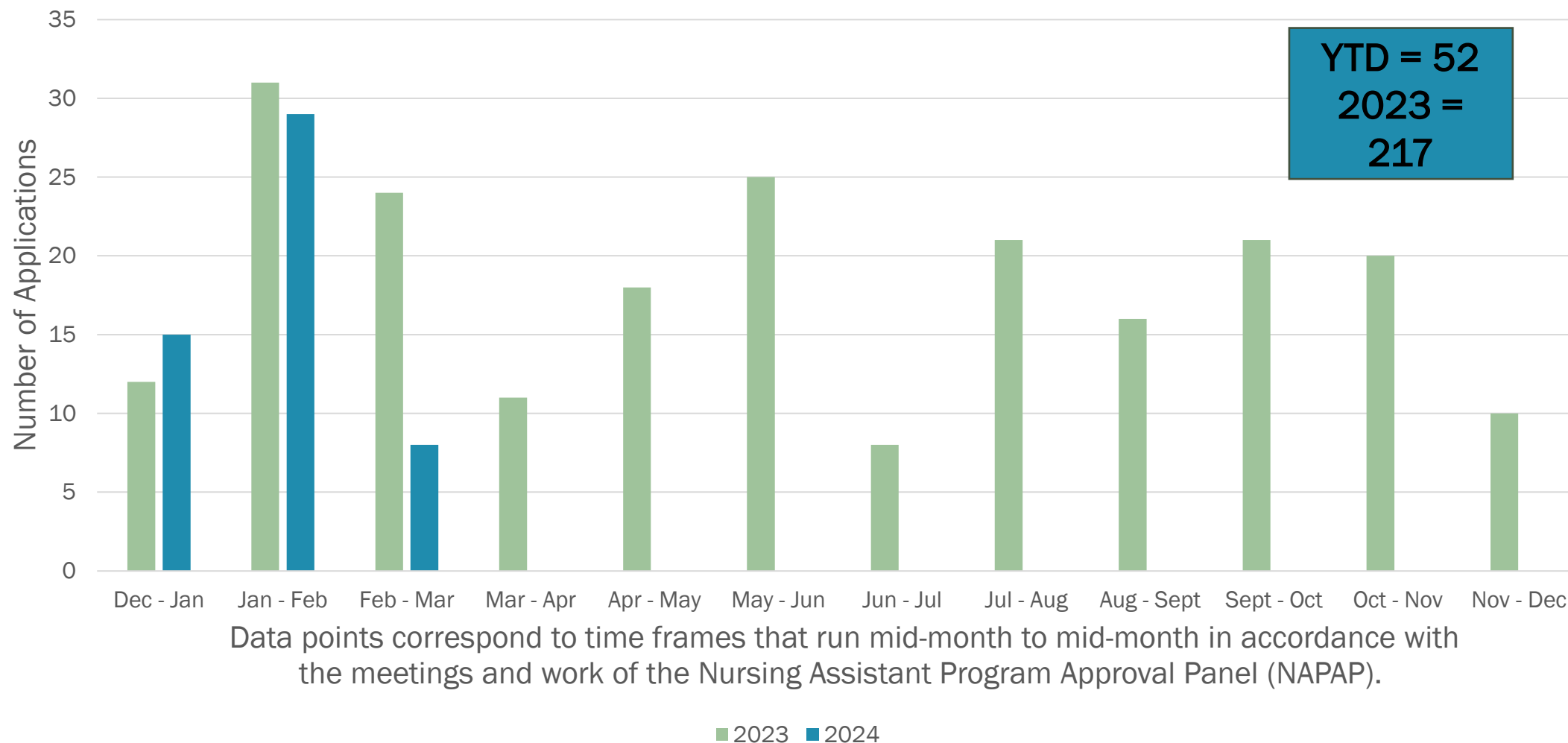


## Performance Measures:

- Performance Measures – Average number of days (receipt to evaluation response) YTD = 6
- Target  $\leq 30$  Days

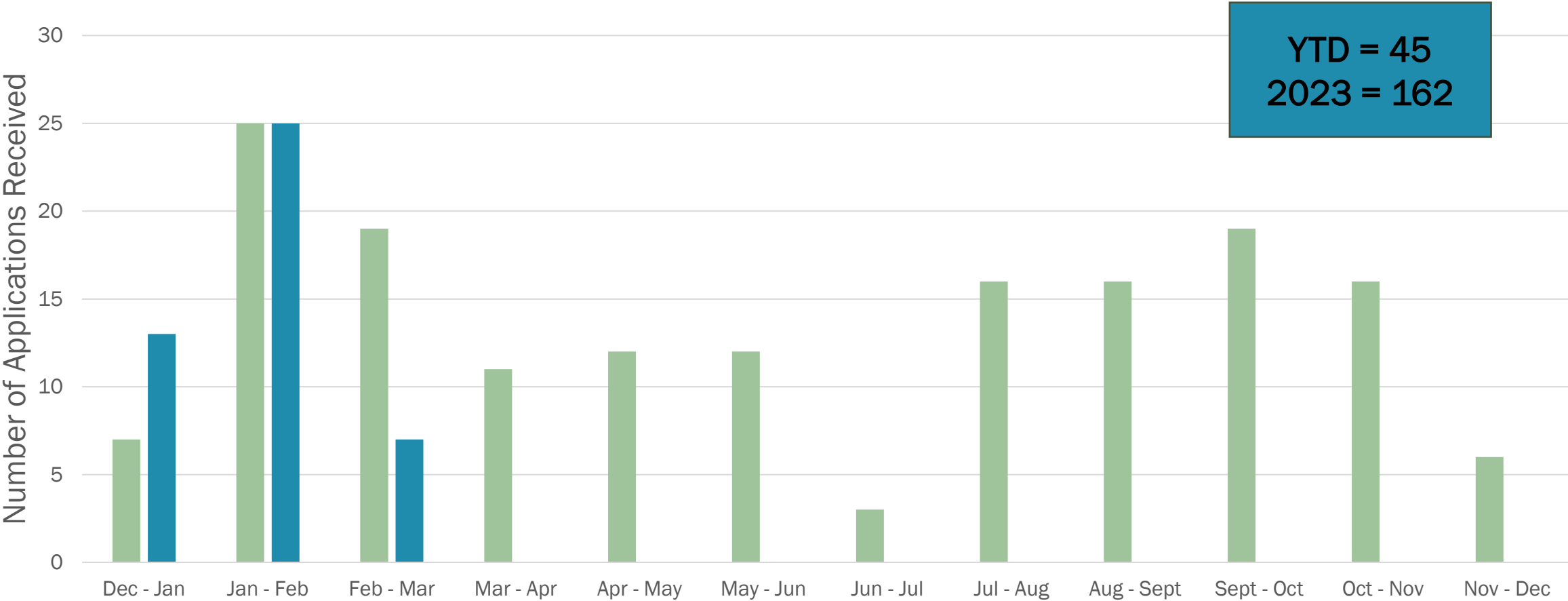
# Number of Program Director/Instructor Applications

*(For Existing and New Program Applications Combined)*



Data points correspond to time frames that run mid-month to mid-month in accordance with the meetings and work of the Nursing Assistant Program Approval Panel (NAPAP).

# Number Program Director/Instructor Applications *(For Existing Programs)*



Data points correspond to time frames that run mid-month to mid-month in accordance with the meetings and work of the Nursing Assistant Program Approval Panel (NAPAP).

# Performance Measure for Existing Programs

## Instructor and Director Applications



Target  $\leq 5$  Less Day

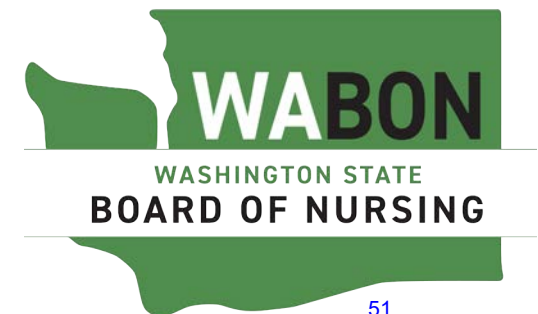
Average number of days  
from receipt to evaluation  
response YTD = 1 Day

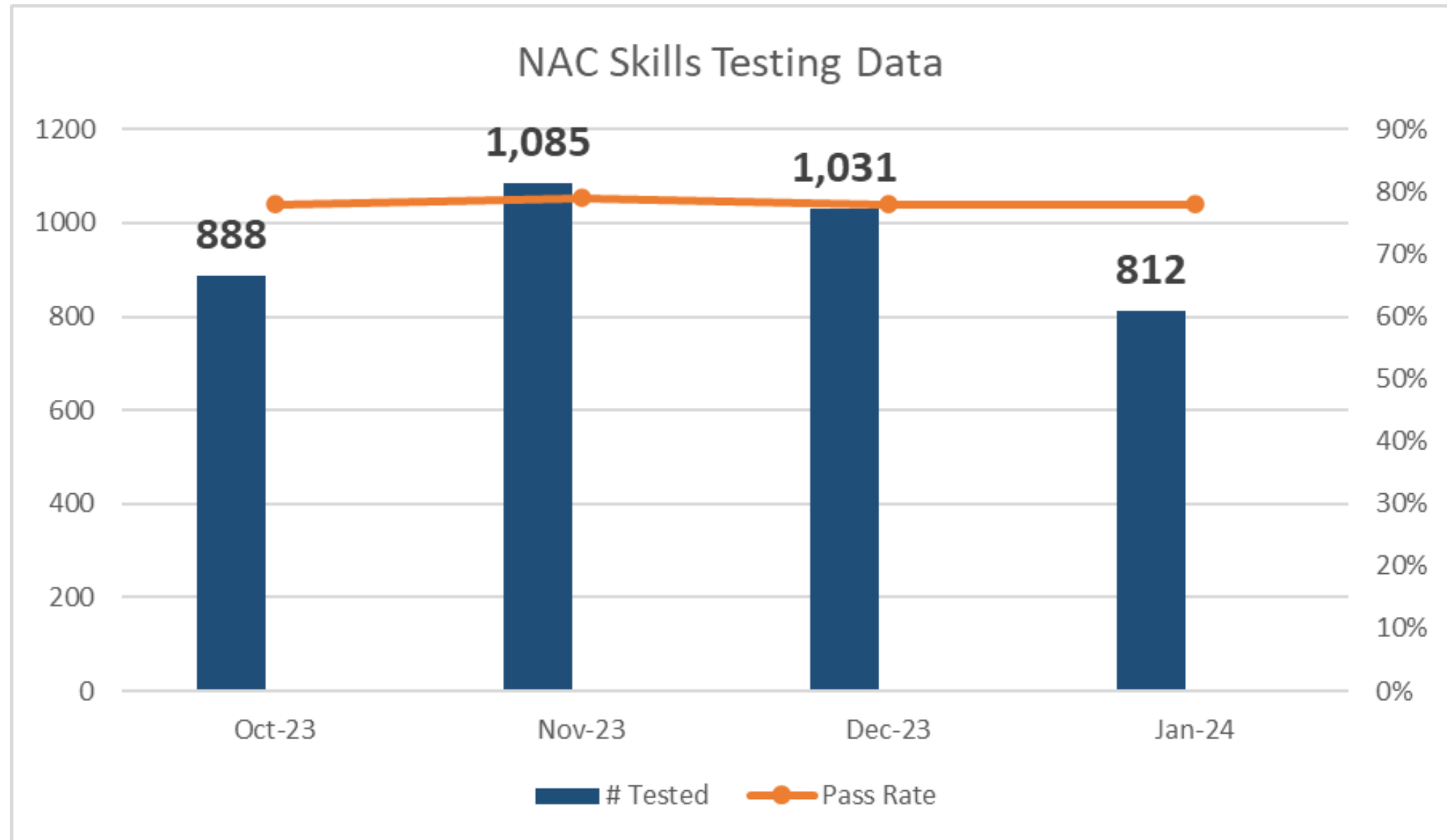




# Preliminary Stats: Skills Testing

WABON Business Meeting  
March 8, 2024





# Other Testing Information

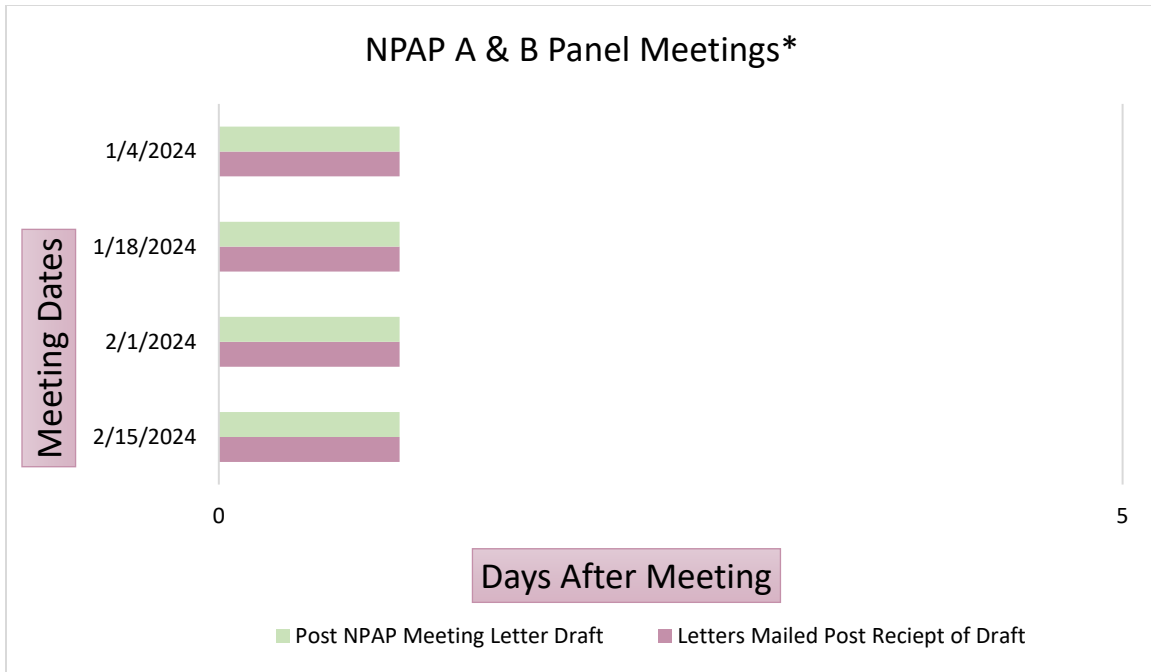
2 formal accommodations

13 grievances filed Oct-Jan  
(0.3% of test takers)

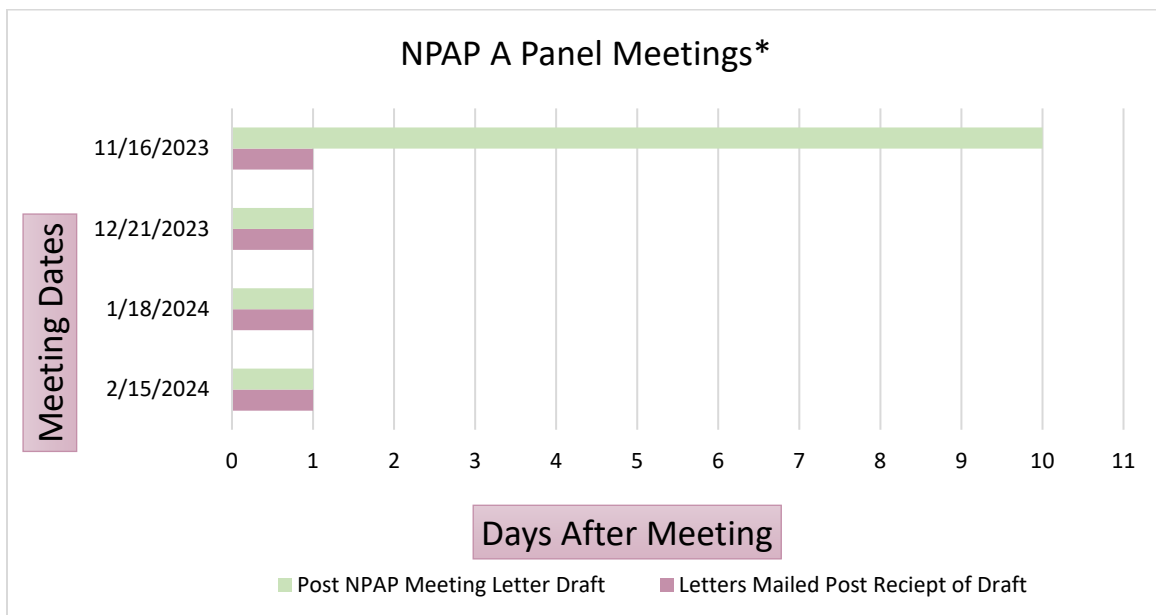
- 7 substantiated
- 6 unsubstantiated

No show Data:

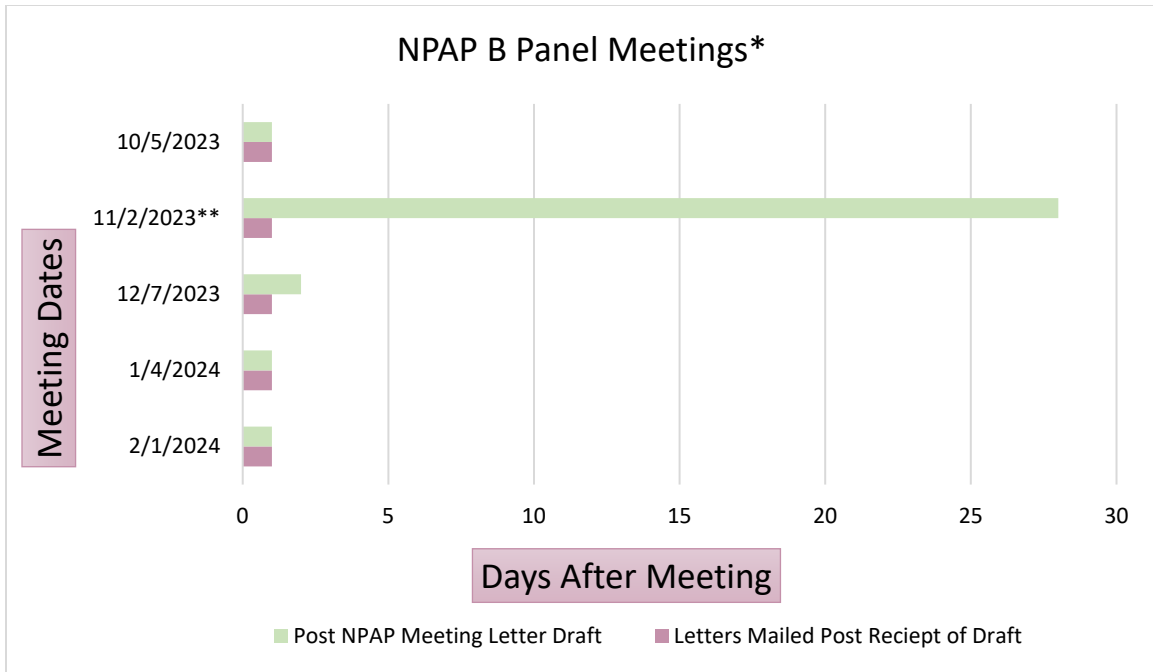
- 6% in Oct
- 6% in Nov
- 9% in Dec
- 5% in Jan



*\*Letters mailed within 30 days of NPAP meeting*

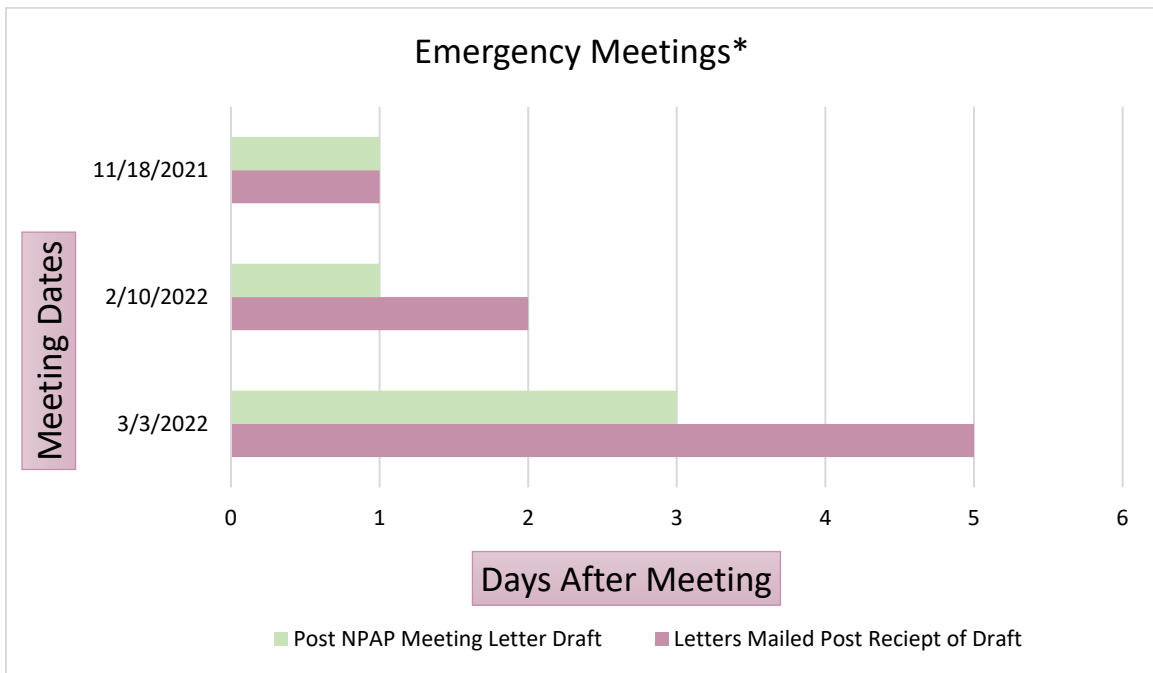


*\*Letters mailed within 30 days of NPAP meeting*



*\*\*Outlier due to audit found that one letter had not been sent to one program.*

*\*Letters mailed within 30 days of NPAP meeting*



*\*Letters mailed within 30 days of NPAP meeting*



# Washington State Board of Nursing (WABON)

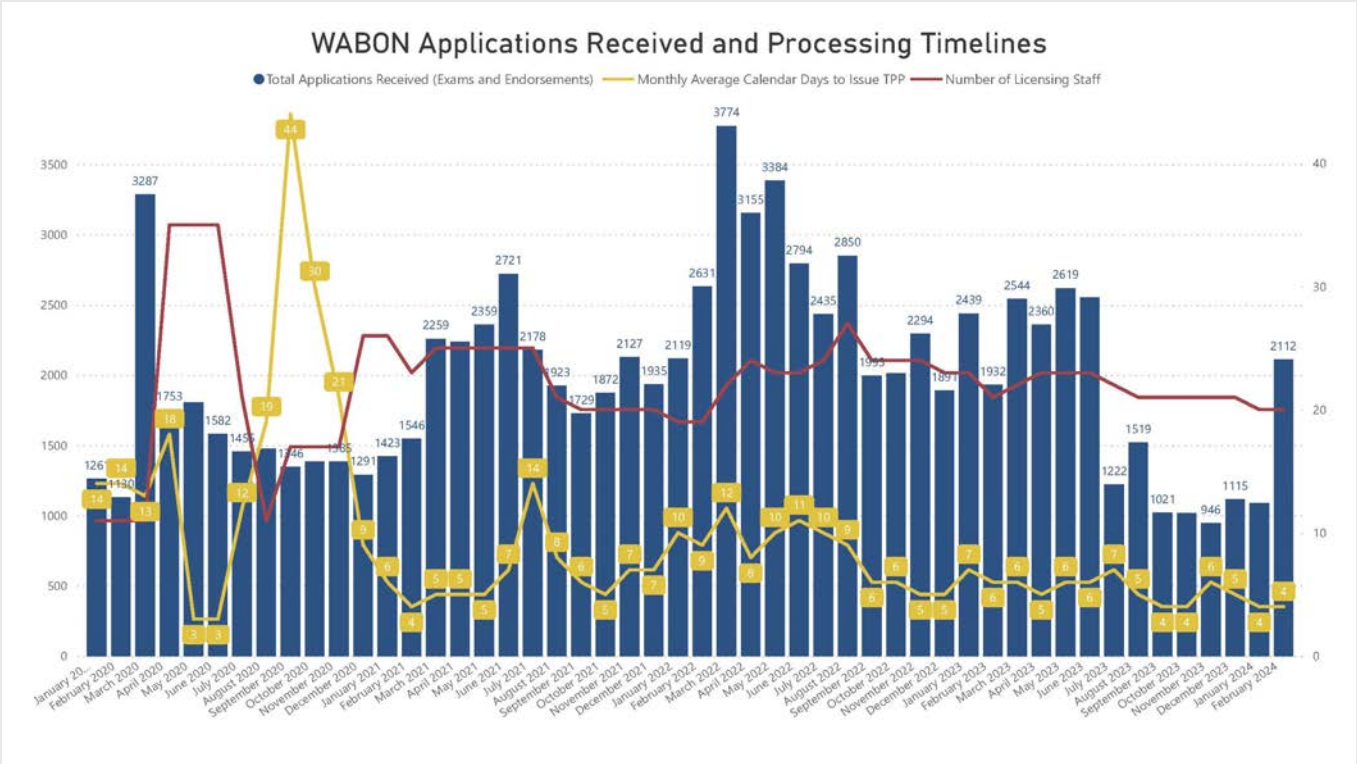
## Nurse Licensure Timelines

III.D.

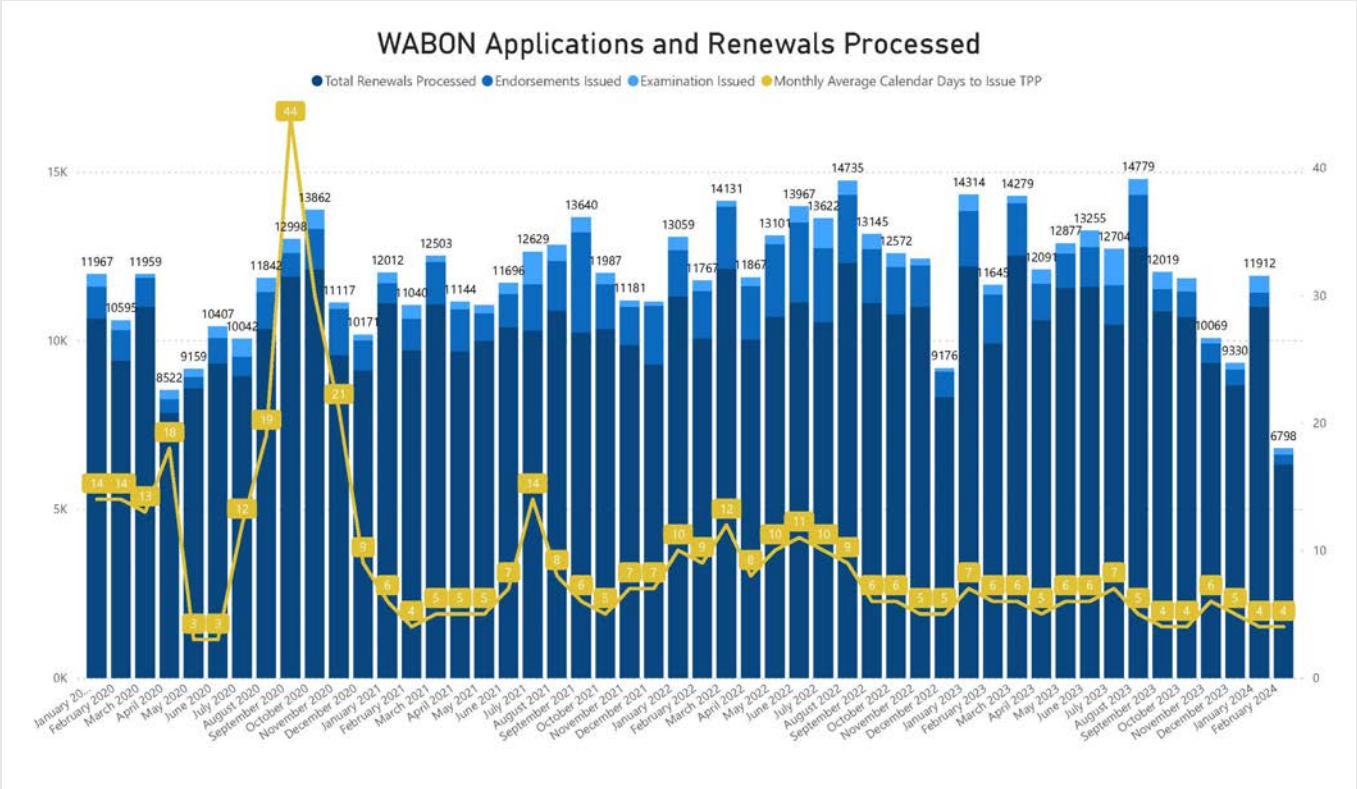
Update: Monday, February 19, 2024

For the week of February 19, 2024, the current processing time to issue a complete temporary practice permit (TPP) is six days (including weekends and holidays).

The first chart below reflects the monthly nursing application volumes, application processing times, and staffing levels for WABON since January 2020. The WABON received 1,089 new applications during January 2024. **Washington state began issuing multistate licenses (MSLs) on January 31, 2024. WABON has received 1,480 MSL upgrade applications from Washington nurses with a current active single-state license since January 31, 2024.**



The second chart on this report reflects the monthly outputs from the WABON. In January 2024, the WABON issued a total of 972 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 WABON. The average days to process complete TPPs is based upon applications received that do not require an application deficiency email to the applicant, other than to complete the fingerprint process. Deficient applications are omitted from the report since this delay is outside of the WABON's control.

WABON Business Meeting  
March 8, 2024

56

**January 29, 2024**

**Attendees:** Alison Bradywood, Tracy Rude, Bethany Mauden, Frank Kohel, Fawzi Belal, Jonnita Thompson, Sofia Aragon.

<b>Topics</b>	<b>Discussion</b>	<b>Action Needed</b>
Deliverables Feedback	<p>Alison reported WABON received six deliverables at the end of 2023, some concerns noted there was a misnumbering that was updated by Bethany.</p> <p>Alison discussed the evaluation of the BIOPOC Nursing Leadership Symposium Evaluation, CNEWS and Deans and Directors suggestions of the evaluators.</p> <p>Frank discussed the format of the CNEWS group and WCNs input into the agenda and goals of the group</p>	Bethany to review contract to update check in process to corrected numbering.
Contract Follow up	<p>Frank gave a suggestion for correction to the language of the contract. - 4.3 Diversity - CNEWS - deliverable report (6.1, 6.4).</p> <p>WABON and Fiscal notes were updated.</p>	Frank to send updated contract to the group.
Financials and Payments	Frank reported the payments have been received and are going well.	
Other	None.	



**Travel Report**  
**Federation of Associations of Regulatory Boards (FARB)**  
**2024 FARB Forum**

25 January – 27 January 2024  
Fort Worth, Texas

Karl Hoehn

**PURPOSE:** The FARB Forum is an annual conference sponsored by the Federation of Associations of Regulatory Boards. The intended audience is broad, including board members, professional regulators, as well as legal practitioners working in the regulatory field.

**OUTCOME:** I attended all the sessions. Among the topics discussed were:

1. Recruiting and Maintaining Engaged Board and Commission Members
2. The Atkinson Lecture: The State of Regulation
3. Meeting the Needs of All Test Takers (Diverse Population)
4. Partner Presentation: Make the Case for Your Board
5. The Cost of Misinformation and How to Avoid Paying the Price - Knowing how to respond to mis- and disinformation in the age of social media
6. Partner Presentation: One Year Later: Charting the Growth & Potential of Generative AI and ChatGPT
7. NextGen Opportunities Leaders: Embracing Change
8. The Cost of Regulating in the Technology Age
9. Reflections: Past, Present, Future of FARB
10. Helping the Helpers: How to Support Your Staff as They Help Others
11. Becoming Your Best Advocate—Working with Legislators and Industry Stakeholders
12. The Importance of Emotional Intelligence for Employee Retention in a Changing Workforce
13. Developing Leaders & Passing Along Knowledge -Mentorship, TEDC

**RECOMMENDATION:** In my opinion, this was a valuable and interesting program. I would recommend continued participation by board members or staff.

**NCSBN Scientific Symposium**  
**From Data to Policy**  
**January 23<sup>rd</sup> – 24<sup>th</sup>, 2024**  
**The Scott, Scottsdale AZ**

**Emma Cozart, Data Consultant**

**PURPOSE:**

The National Council of State Boards of Nursing (NCSBN) held its Scientific Symposium to “present diverse national and international studies that advance the science of nursing policy and increase the body of evidence for regulatory decision making.” The symposium was aimed at nurse regulators, researchers, educators, and practitioners.

**OUTCOMES:**

Sessions attended included, but was not limited to:

- The 2022 National Nursing Workforce Study
- Characterizing the Telehealth Nursing Workforce in 2022
- An investigation into the potential for Artificial Intelligence to support regulatory decision making in complaints about nurses in the US, UK, and Australia
- National Database Quality Indicators of Nursing Education Programs
- The Need for Licensure Compacts - Highlights of the APRN and NLC Survey Findings
- Exploration of the Licensed Practical Nurse Workforce
- Impact of the COVID-19 Pandemic on the APRN in the US

Applicable information and resources acquired on, but not limited to:

1. Identifying root causes of workforce issues and performing research to better inform policy to address these workforce issues.
2. Analyzing data on the nursing workforce and current national trends.
3. Collecting and analyzing quality indicators of nursing education programs as well as a national overview of programs in the 2022-2023 academic year.

4. Characterizing the telehealth workforce and how it has evolved since the pandemic.
5. The usage of artificial intelligence in nursing regulation and potential implications for the future of nurse discipline.

**RECOMMENDATION:**

This symposium is well-suited for nursing researchers, leaders, educators, and policy makers. Speakers included researchers and leaders from NCSBN and various boards of nursing, centers for nursing, and universities from across the globe. This blend of both researchers and regulators provided a unique mix of individuals that can provide valuable insight into advancing the nursing workforce through data, research, policy, and regulation.

I would recommend continued participation in the NCBSN Scientific Symposium in the future, and, if given the opportunity, for two attendees from both a research-related background and a rules-related background attend to together to take full advantage of both the data-oriented sessions as well as the policy and regulation-oriented sessions.

## Washington State Board of Nursing

NPAP DECISION SUMMARY REPORT Date: February 1, 2024 &amp; February 15, 2024 Updated: February 16th

Actions	Number Added for this reporting period	2024 Panel Actions YTD	2023 Panel Actions YTD	2022 Panel Actions YTD	2021 Totals	Instate Approved Programs	Out of State Approved Programs
Letter of Determination:						7 LPN Programs 25 ADN Programs	4 ADN Programs 2 LPN-BSN Programs
Intent to Withdraw Approval						13 RNB Programs	10 BSN Programs
Conditional Approval			2	1	2	17 BSN Programs	25 RNB Programs
Deny Approval					3	121 Post BSN Programs	442 MSN Programs
Letter of Decision:						4 Refresher Programs	206 DNP Programs
Approval – Programs	1	7	80	21	30	6 LPN to BSN	1 RN Refresher Program
Deny Approval – Program		1					
Approval – Sub Change Request	1	4	34	35	20	5 PVR	1 LPN Refresher Program
Plan of Correction (POC) Required			8	4	2	8 LPN to ADN	10 Nurse Tech
Acceptance of Submitted Documents or POC	4	14	75	60	64		
Additional Documents or Actions Required			2	1	4		
Deferred Action		2	10	9	12		
Removal of Conditional Approval							
Limit Student Enrollment			1	1	1		
Voluntary Closure			1		1		
Require Monitoring Report	1	1	13	8			
Site Visit Report	2	2	11	10	3		

Removal of Moratorium on admissions					
Covid-19 Curriculum Adjustments					7
Other			1	3	2
Other-Acknowledge Receipt of POC			2		
Letter of Concern				1	
Approvals-Miscellaneous (non-program)			3	3	2
<b>Monitoring Report:</b>					
Accept			22	1	
Not Accept					
Deferred					
<b>Out-of-State DL Student Waivers:</b>					
Accept					
Deny					
Deferred					
<b>Complaints:</b>					
Open		1	8	2	3
Closed			3	3	3
Defer					
<b>Complaint Investigation Reviewed:</b>					
Accept Investigation Report			4	1	3
No Action Required			1	1	
Action required					
<b>Licensing Education Exemption (Waiver) Request:</b>					
Exemption Request Approved			1	4	5
Exemption Request Denied				2	1

### Snapshot of Approved Nursing Assistant Training Programs (February 2024)

Number of Nursing Assistant Training Programs (All Types)	197
• Traditional Programs	155
• Home Care Aide Alternative/Bridge Programs	23
• Medical Assistant Alternative/Bridge Programs	10
• Medication Assistant Certification Endorsement (MACE) Programs	9

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

Comments: Program numbers have ranged steadily between 180-200 total over last eight years with the exception of two brief peaks just over 200 in 2019 and 2022.

## NAPAP REPORT 2024

Activity	JAN 8	FEB 12	MAR 11	APR 8	MAY 13	JUNE 10	JULY 8	AUG 12	SEP 9	OCT 14	NOV 11	DEC 9	YTD
Programs Applications Approved	2	1											3
Program Applications Deferred													
Program Applications Denied													
Program Change Requests Approved	1												1
Program Change Requests Deferred													
Program Change Requests Denied													
Program Complaints Reviewed	2	3											5
Program Complaints Opened	1	1											2
Program Complaints Closed	1	1											2
Site Visit Summaries Reviewed		1											1
Investigative Reports Reviewed		1											1
POC/DPOC or Program Condition Reviewed	2	1											3
Additional Documents/Program Actions Required	2												2
Intent to Change Program Status (Full to Conditional or Conditional to Full)													
Intent to Withdraw Program Approval													
Program Director/Instructor Applications Requiring Panel Review													
Other Review or Process Decisions	5	12											17



STATE OF WASHINGTON  
DEPARTMENT OF HEALTH  
Washington State Board of Nursing  
P.O. Box 47864  
Olympia, WA 98504-7864

March 8, 2024  
Election of Officers  
Slate of Candidates

**Chair**

Dawn Morrell

**Vice Chair**

Quiana Daniels

**Secretary/Treasurer**

MaiKia Moua

Sharon Ness



# WABON

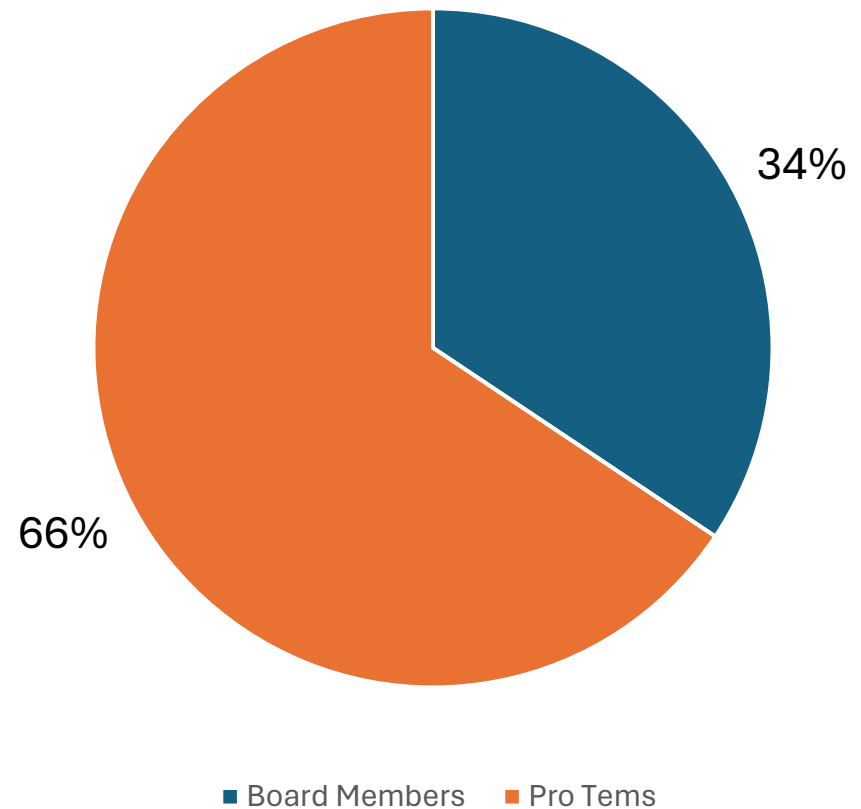
# Annual Board Survey 2023

Preliminary Results

Lohitvenkatesh Oswal, Research Assistant

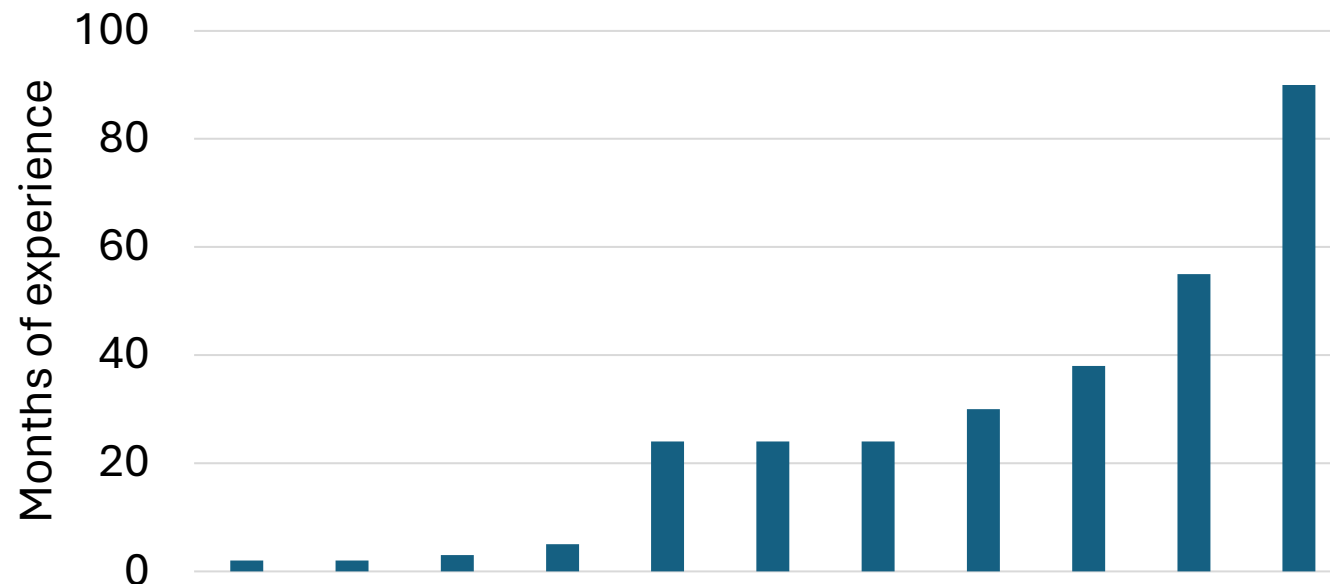
# Responses

- 11 out of 13 current board members represented
- 21 pro tems represented
- 1 board member reported having experience as a Pro Tem member.
- 4 Pro Tem members reported having experience as a Board member.



# Experience with WABON

- Board members had an average of 27 months (2.25 years) of experience in their position.



# Board Member Results

- Response options for questions were Strongly Agree, Agree, Neutral, Disagree, Strongly Disagree, where Agree is a positive response.
- Overall, the responses were very positive.

Option	# of responses
Strongly Agree	230
Agree	160
Neutral	44
Disagree	6
Strongly Disagree	0

# Board Member Results

- This section asked questions about **how well are you able to do your role as a board member.**
  - I am able to complete the work activities asked of me.
  - I feel staff are aware of the level of work I am responsible for.
  - I feel staff recognize where I have limitations or time constraints and work with me.

Option	# of responses
Strongly Agree	17
Agree	10
Neutral	6
Disagree	0
Strongly Disagree	0

# Board Member Results

- This section asked how well you **understand the different member roles of the Board.**

- Chair
- Vice Chair
- Secretary/Treasurer
- Board Member
- Pro Tem

Option	# of responses
Strongly Agree	22
Agree	27
Neutral	3
Disagree	3
Strongly Disagree	0

# Board Member Results

- This section asked about Board **business meetings**, including questions on:
  - How useful are the Board meeting materials?
  - How well are the Board meetings run?
  - How well is decision making done in the Board meetings?
  - How do you feel about participating in the Board Business meetings?

Option	# of responses
Strongly Agree	101
Agree	66
Neutral	15
Disagree	3
Strongly Disagree	0

# Board Member Results

- This section asked **how valued do you feel as a member of the Board?**
  - I am treated with respect.
  - I feel valued for my skills and expertise.
  - I feel a sense of connection and belonging.
  - Interactions with others are positive and constructive.
  - My ideas and suggestions are sought out.
  - I have resources to support my learning and growth.

Option	# of responses
Strongly Agree	37
Agree	23
Neutral	6
Disagree	0
Strongly Disagree	0



# Board Member Results

- This section asked: **How well does the Board work together?**
  - Members work well together.
  - Collaboration and communication are constructive and actionable.
  - There is intentional learning and application of race equity and health equity in our work.

Option	# of responses
Strongly Agree	9
Agree	19
Neutral	5
Disagree	0
Strongly Disagree	0

# Board Member Results

- This section asked about **how well subcommittees run**.
  - I understand the goals and objectives of subcommittees I participate in.
  - The subcommittees makes collective judgments about important matters.
  - Subcommittee meetings allow for candid and constructive discussion.
  - I know which staff member to reach out to with questions or needs.

Option	# of responses
Strongly Agree	26
Agree	8
Neutral	4
Disagree	0
Strongly Disagree	0

# Board Member Results

- This section asked about **how well panels and other Board groups run.**
  - I understand the goals and objectives of the groups I participate in.
  - The groups makes collective judgments about important matters.
  - Group meetings allow for candid and constructive discussion.
  - I know which staff member to reach out to with questions or needs.

Option	# of responses
Strongly Agree	18
Agree	7
Neutral	5
Disagree	0
Strongly Disagree	0

# Questions?

You can contact me at [Lohitvenkatesh.Oswal@doh.wa.gov](mailto:Lohitvenkatesh.Oswal@doh.wa.gov).

**2023-2025 BIENNIUM:**

This report covers the period of July 1, 2023, through January 31, 2024, seven months into the biennium, with seventeen months remaining. The WABON budget is underspent by almost 15% or about \$1.5M and the current revenue balance is just over \$1.2M.

**REVENUES FROM FEES:**

The recommended revenue balance or “reserve” should be 12.5% of biennial budgeted allotments, or approximately \$4.7M. WABON began the biennium operating below the recommended reserve balance due to the \$7.5M HELMS payments made through June 2023. Revenue projections for the biennium were adjusted to account for the anticipated \$2.5M loss in fee revenues from implementation of phase one of the NLC in July 2023. To date, revenues from fees have lagged adjusted projections by 4.8%, or just over \$440K. Phase two and full implementation of the NLC occurred on January 31, 2024, when WABON began issuing MSLs and collecting the additional fees for the new MSL credentials (\$65 one-time fee for initial MSL and \$20 fee for renewal of MSL).

**EXPENDITURES:**

Highlights:

- **Direct Charges:** Payroll issues previously reported have been resolved. Actual direct expenditures are trending below budget as anticipated. Major savings are in salaries and benefits due to open positions and AG costs which have been trending below expectations.
- **Service Unit Charges:** During the budget creation process, each service unit is calculated based on an agreed upon methodology and in general, service units were overestimated this biennium. As a result, actual expenditures are tracking well below budget. Some charges are based solely on actual files or units processed (Background Checks, Adjudicative Services, OLIC). Others are calculated using a weighted system (ACO, Public Disclosure, Call Center). FBI Background Checks were not posted in time for FM07; however, an adjustment for a double posting of FM06 was processed resulting in the credit shown in FM07. We anticipate the trend of underspending budget will continue for the remainder of the fiscal year.
- **Indirect Charges:** As a result of the overestimation of the budgeted service units, budgeted indirect expenditures are also overestimated. When indirect charges are applied to actual expenditures, actuals will trend below estimates. Trend is expected to continue for the remainder of the fiscal year.

**FISCAL OUTLOOK:**

Full implementation of the NLC occurred on January 31, 2024, and WABON is now issuing WA MSLs and collecting the additional fees for the new credentials. The revenue from the new credential will begin to offset and hopefully outpace the loss of revenue from nurses with active MSLs in other states not renewing their WA single state licenses. There will be one final HELMS payment due in June 2024 that will endanger WABON to operate with a negative fund balance but is not a certainty. Continued close accounting of expenses and generation of additional revenue from the new fees may prevent this outcome.

**IMPORTANT TO NOTE:** The \$4.5M in additional allotment gained from the approval of the decision package in FY23 is NOT reported in the 2023-2025 biennial budget allotments. The result is a far more accurate picture of what our budget should look like compared to actual expenditures.



Washington State Board of Nursing  
**Adjusted Budget Status Report**  
 02G Health Professions Account  
 For the period July 1, 2023 through January 31, 2024

EXPENDITURES TYPES	BIENNIAL BUDGET	ALLOT BTD thru FM05	EXP BTD thru FM05	PREV FM ALLOT	PREV FM Expense	Current FM ALLOT	Current FM Expense	BUDGET/ALLOTMENT TO-DATE	EXPENDITURES TO-DATE	VARIANCE TO-DATE	% SPENT TO-DATE
<b>DIRECT EXPENDITURES:</b>											
FTEs (total)	87.70	88.39	54.57	89.39	84.09	89.39	104.20	88.39	81.47	-6.92	92.17%
Staff Salaries & Benefits	\$ 21,095,128	\$ 4,295,833	\$ 3,973,056	\$ 857,409	\$ 839,298	\$ 857,409	\$ 853,765	\$ 6,010,651	\$ 5,777,288	\$ (233,363)	96.12%
Commission Salaries	\$ 611,112	\$ 127,270	\$ 129,752	\$ 25,454	\$ 20,792	\$ 25,454	\$ 21,847	\$ 178,178	\$ 172,391	\$ (5,787)	96.75%
Goods & Services	\$ 874,423	\$ 199,253	\$ 128,973	\$ 32,888	\$ 31,091	\$ 32,888	\$ 23,348	\$ 265,029	\$ 183,412	\$ (81,617)	69.20%
Rent	\$ 1,011,050	\$ 203,888	\$ 90,513	\$ 42,658	\$ 23,342	\$ 42,658	\$ 28,218	\$ 289,204	\$ 142,073	\$ (147,131)	49.13%
Attorney General (AG)	\$ 1,702,439	\$ 372,439	\$ 205,759	\$ 70,000	\$ -	\$ 70,000	\$ 103,325	\$ 512,439	\$ 309,084	\$ (203,355)	60.32%
Travel	\$ 139,704	\$ 29,105	\$ 31,219	\$ 5,821	\$ 1,655	\$ 5,821	\$ 4,221	\$ 40,747	\$ 37,095	\$ (3,652)	91.04%
Equipment	\$ 154,134	\$ 89,551	\$ 22,355	\$ -	\$ 25,029	\$ -	\$ 84	\$ 89,551	\$ 47,468	\$ (42,083)	53.01%
IT Support & Software Licenses	\$ 473,073	\$ 92,721	\$ 84,897	\$ 19,411	\$ 326	\$ 19,411	\$ 58,855	\$ 131,543	\$ 144,079	\$ 12,536	109.53%
<b>TOTAL DIRECT</b>	<b>\$ 26,061,063</b>	<b>\$ 5,410,060</b>	<b>\$ 4,666,523</b>	<b>\$ 1,053,641</b>	<b>\$ 941,534</b>	<b>\$ 1,053,641</b>	<b>\$ 1,093,665</b>	<b>\$ 7,517,342</b>	<b>\$ 6,812,889</b>	<b>\$ (704,453)</b>	<b>90.63%</b>
<b>SERVICE UNITS:</b>											
FBI Background Checks (TA090)	\$ 767,864	\$ 193,310	\$ 97,682	\$ 38,662	\$ 99,853	\$ 38,662	\$ (49,927)	\$ 270,634	\$ 147,609	\$ (123,025)	54.54%
Office of Professional Standards (TA020)	\$ 571,764	\$ 116,770	\$ 42,051	\$ 24,137	\$ 25,512	\$ 23,354	\$ 18,443	\$ 164,261	\$ 86,006	\$ (78,255)	52.36%
Adjudication Clerk (TA010)	\$ 346,400	\$ 71,018	\$ 7,303	\$ 14,331	\$ 5,722	\$ 14,184	\$ -	\$ 99,533	\$ 13,024	\$ (86,509)	13.09%
HP Investigations (TA040, 070, 100)	\$ 81,092	\$ 18,600	\$ 8,330	\$ 3,720	\$ 2,548	\$ 3,720	\$ 1,259	\$ 26,040	\$ 12,137	\$ (13,903)	46.61%
Legal Services (TA140, 150, 210)	\$ 44,864	\$ 11,520	\$ 4,449	\$ 2,304	\$ 814	\$ 2,304	\$ 984	\$ 16,128	\$ 6,247	\$ (9,881)	38.74%
Call Center (TA030)	\$ 58,038	\$ 12,965	\$ 12,915	\$ 2,590	\$ 3,076	\$ 2,590	\$ 2,902	\$ 18,145	\$ 18,894	\$ 749	104.13%
Public Disclosure (TA180)	\$ 504,940	\$ 87,399	\$ 73,993	\$ 22,369	\$ (5,588)	\$ 21,655	\$ 27,001	\$ 131,423	\$ 95,406	\$ (36,017)	72.59%
Revenue Reconciliation (TA200)	\$ 126,343	\$ 31,184	\$ 27,272	\$ 6,230	\$ 7,601	\$ 6,230	\$ 7,556	\$ 43,644	\$ 42,429	\$ (1,215)	97.22%
Online Healthcare Provider Lic - Staff (TA130)	\$ 507,012	\$ 104,360	\$ 79,230	\$ 20,872	\$ 15,824	\$ 20,872	\$ 25,907	\$ 146,104	\$ 120,962	\$ (25,142)	82.79%
Online Healthcare Provider Lic - Contract (TE8000)	\$ 289,734	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	0.00%
Suicide Assessment Study (TA120)	\$ 30,927	\$ 6,350	\$ -	\$ 1,270	\$ -	\$ 1,269	\$ -	\$ 8,889	\$ -	\$ (8,889)	0.00%
<b>TOTAL SERVICE UNITS</b>	<b>\$ 3,328,978</b>	<b>\$ 653,476</b>	<b>\$ 353,225</b>	<b>\$ 136,485</b>	<b>\$ 155,363</b>	<b>\$ 134,840</b>	<b>\$ 34,125</b>	<b>\$ 924,801</b>	<b>\$ 542,714</b>	<b>\$ (382,087)</b>	<b>58.68%</b>
<b>INDIRECT CHARGES:</b>											
Agency Indirects (16.9%)	\$ 5,067,462	\$ 1,013,573	\$ 772,106	\$ 200,603	\$ 168,165	\$ 200,325	\$ 190,687	\$ 1,414,502	\$ 1,130,958	\$ (283,543)	79.95%
HSQA Division Indirects (11.3%)	\$ 3,386,527	\$ 677,040	\$ 507,720	\$ 134,099	\$ 110,543	\$ 133,913	\$ 125,396	\$ 945,053	\$ 743,659	\$ (201,394)	78.69%
<b>TOTAL INDIRECTS (28.2%)</b>	<b>\$ 8,453,989</b>	<b>\$ 1,690,613</b>	<b>\$ 1,279,826</b>	<b>\$ 334,703</b>	<b>\$ 278,708</b>	<b>\$ 334,239</b>	<b>\$ 316,083</b>	<b>\$ 2,359,555</b>	<b>\$ 1,874,617</b>	<b>\$ (484,938)</b>	<b>79.45%</b>
<b>GRAND TOTAL</b>	<b>\$ 37,844,030</b>	<b>\$ 7,754,149</b>	<b>\$ 6,299,574</b>	<b>\$ 1,524,829</b>	<b>\$ 1,375,605</b>	<b>\$ 1,522,720</b>	<b>\$ 1,443,873</b>	<b>\$ 10,801,698</b>	<b>\$ 9,230,220</b>	<b>\$ (1,571,478)</b>	<b>85.45%</b>

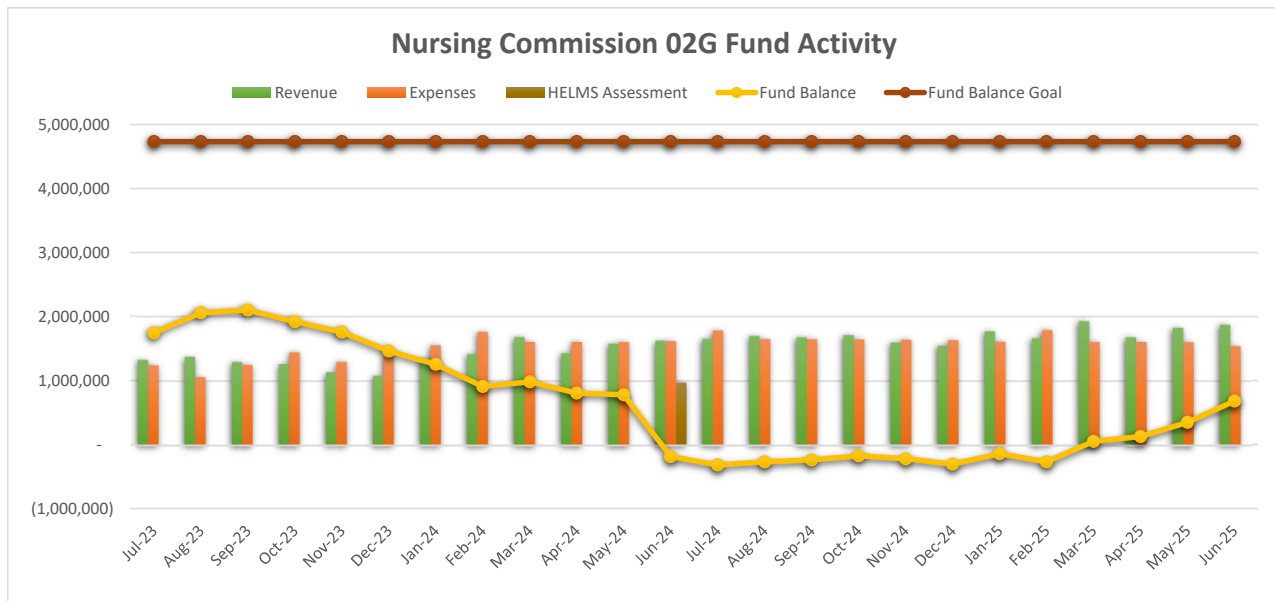
**NURSING REVENUE**

BEGINNING REVENUE BALANCE	\$ 1,659,304
21-23 REVENUE TO-DATE	\$ 8,823,823
21-23 HELMS ASSESS. TO-DATE	
21-23 EXPENDITURES TO-DATE	\$ 9,230,220
<b>ENDING REVENUE BALANCE</b>	<b>\$ 1,252,907</b>



# Washington State Board of Nursing 2023-25 Fund Balance Summary 02G Health Professions Account

FM	Month	Actual / Projected Revenue	Actual / Projected Expenses	Projected HELMS Assessment	Actual / Projected Fund Balance	Fund Balance Goal	% of Fund Balance Goal
1	Jul-23	1,327,757	1,243,464		1,743,597	4,730,504	36.9%
2	Aug-23	1,376,149	1,060,505		2,059,241	4,730,504	43.5%
3	Sep-23	1,293,656	1,250,861		2,102,036	4,730,504	44.4%
4	Oct-23	1,262,547	1,446,363		1,918,220	4,730,504	40.6%
5	Nov-23	1,136,355	1,298,381		1,756,195	4,730,504	37.1%
6	Dec-23	1,080,094	1,375,605		1,460,683	4,730,504	30.9%
7	Jan-24	1,347,265	1,555,041		1,252,907	4,730,504	26.5%
8	Feb-24	1,418,168	1,763,753		907,322	4,730,504	19.2%
9	Mar-24	1,680,619	1,607,994		979,947	4,730,504	20.7%
10	Apr-24	1,432,190	1,607,872		804,265	4,730,504	17.0%
11	May-24	1,580,088	1,606,857		777,496	4,730,504	16.4%
12	Jun-24	1,628,158	1,620,375	974,974	(189,695)	4,730,504	-4.0%
13	Jul-24	1,655,363	1,784,611		(318,943)	4,730,504	-6.7%
14	Aug-24	1,699,046	1,650,251		(270,148)	4,730,504	-5.7%
15	Sep-24	1,678,319	1,649,170		(241,000)	4,730,504	-5.1%
16	Oct-24	1,712,455	1,648,378		(176,923)	4,730,504	-3.7%
17	Nov-24	1,596,617	1,642,079		(222,385)	4,730,504	-4.7%
18	Dec-24	1,550,117	1,634,774		(307,043)	4,730,504	-6.5%
19	Jan-25	1,772,641	1,609,299		(143,701)	4,730,504	-3.0%
20	Feb-25	1,664,881	1,792,460		(271,281)	4,730,504	-5.7%
21	Mar-25	1,928,319	1,607,796		49,242	4,730,504	1.0%
22	Apr-25	1,678,949	1,605,150		123,041	4,730,504	2.6%
23	May-25	1,827,053	1,603,929		346,164	4,730,504	7.3%
24	Jun-25	1,875,205	1,542,573		678,796	4,730,504	14.3%
FY1	Totals To	16,563,046	17,437,071	-			
FY2	Date	20,638,965	19,770,475	-			
Bien		37,202,011	37,207,546	-			

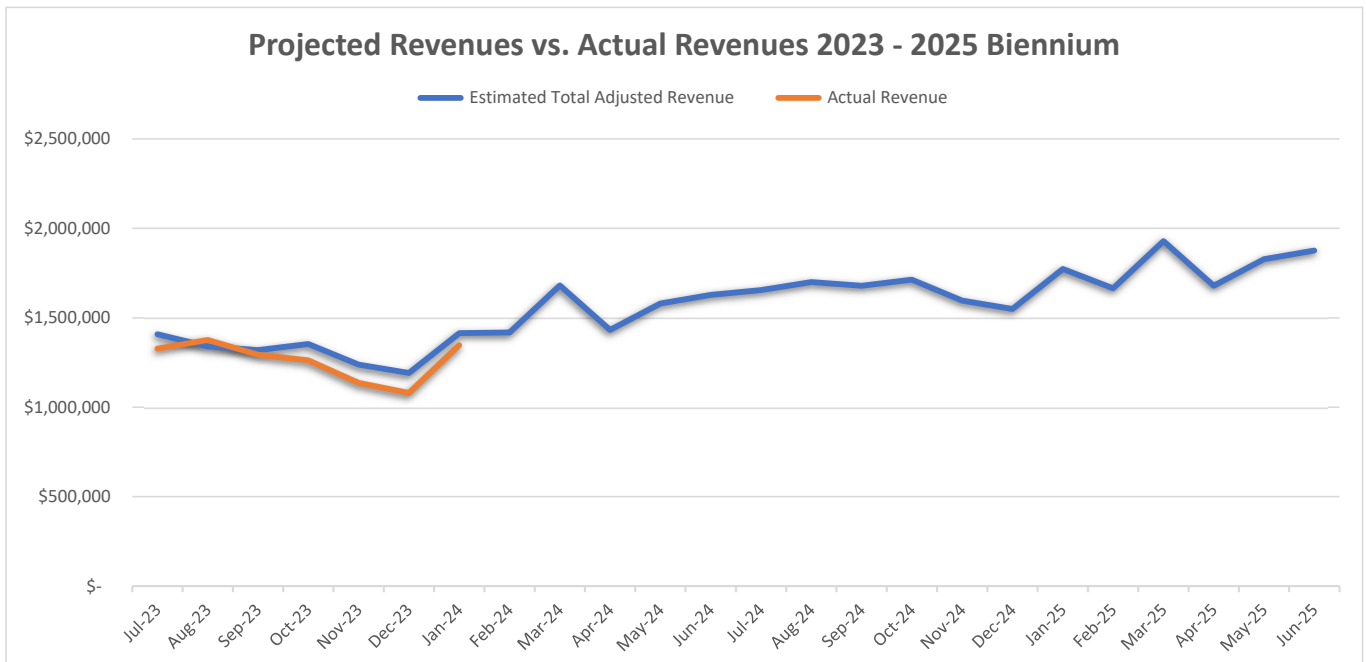


Notes:

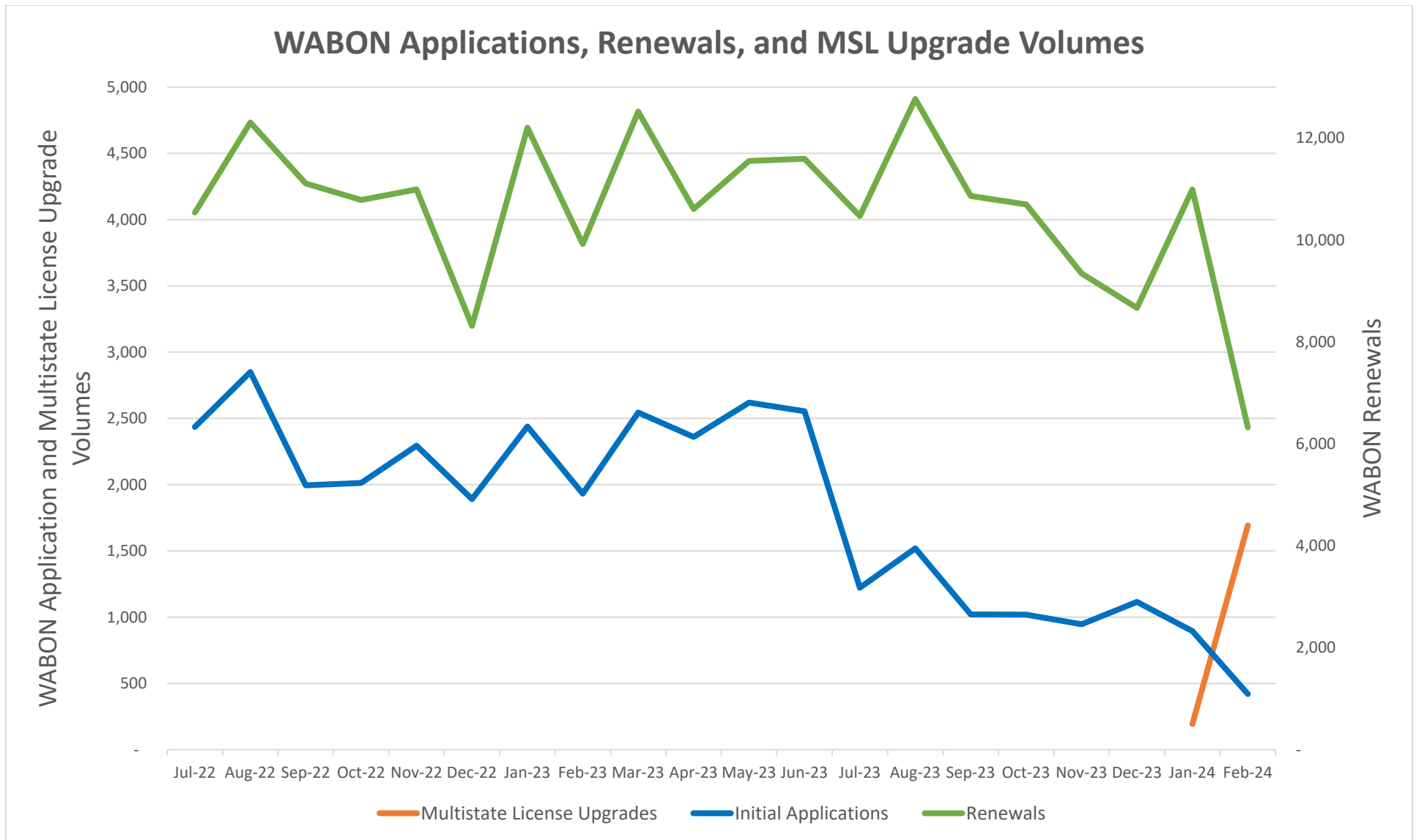
1 Fund Balance Goal is 12.5% of biennial allotments or three month's operating expenses

Washington Board of Nursing  
23-25 Cumulative Fee Revenue Report  
Revenue Source Code:

FM	Month	Original Estimated	Adjustments (Fee Changes)	Estimated Total Adjusted Revenue	Actual Revenue	Cumulative Total	Variance	% of Estimated
1	Jul-23	\$ 1,408,650		\$ 1,408,650	\$ 1,327,757	\$ 1,327,757	\$ (80,893)	94.26%
2	Aug-23	\$ 1,452,103	\$ (111,791)	\$ 1,340,312	\$ 1,376,149	\$ 2,703,906	\$ 35,837	102.67%
3	Sep-23	\$ 1,431,606	\$ (111,791)	\$ 1,319,815	\$ 1,293,656	\$ 3,997,562	\$ (26,159)	98.02%
4	Oct-23	\$ 1,465,311	\$ (111,791)	\$ 1,353,520	\$ 1,262,547	\$ 5,260,109	\$ (90,973)	93.28%
5	Nov-23	\$ 1,349,904	\$ (111,791)	\$ 1,238,113	\$ 1,136,355	\$ 6,396,465	\$ (101,758)	91.78%
6	Dec-23	\$ 1,303,228	\$ (111,791)	\$ 1,191,437	\$ 1,080,094	\$ 7,476,558	\$ (111,343)	90.65%
7	Jan-24	\$ 1,525,928	\$ (111,791)	\$ 1,414,137	\$ 1,347,265	\$ 8,823,823	\$ (66,872)	95.27%
8	Feb-24	\$ 1,418,168		\$ 1,418,168		\$ 8,823,823		0.00%
9	Mar-24	\$ 1,680,619		\$ 1,680,619		\$ 8,823,823		0.00%
10	Apr-24	\$ 1,432,190		\$ 1,432,190		\$ 8,823,823		0.00%
11	May-24	\$ 1,580,088		\$ 1,580,088		\$ 8,823,823		0.00%
12	Jun-24	\$ 1,628,158		\$ 1,628,158		\$ 8,823,823		0.00%
13	Jul-24	\$ 1,408,650	\$ 246,713	\$ 1,655,363		\$ 8,823,823		0.00%
14	Aug-24	\$ 1,452,333	\$ 246,713	\$ 1,699,046		\$ 8,823,823		0.00%
15	Sep-24	\$ 1,431,606	\$ 246,713	\$ 1,678,319		\$ 8,823,823		0.00%
16	Oct-24	\$ 1,465,742	\$ 246,713	\$ 1,712,455		\$ 8,823,823		0.00%
17	Nov-24	\$ 1,349,904	\$ 246,713	\$ 1,596,617		\$ 8,823,823		0.00%
18	Dec-24	\$ 1,303,404	\$ 246,713	\$ 1,550,117		\$ 8,823,823		0.00%
19	Jan-25	\$ 1,525,928	\$ 246,713	\$ 1,772,641		\$ 8,823,823		0.00%
20	Feb-25	\$ 1,418,168	\$ 246,713	\$ 1,664,881		\$ 8,823,823		0.00%
21	Mar-25	\$ 1,681,606	\$ 246,713	\$ 1,928,319		\$ 8,823,823		0.00%
22	Apr-25	\$ 1,432,236	\$ 246,713	\$ 1,678,949		\$ 8,823,823		0.00%
23	May-25	\$ 1,580,340	\$ 246,713	\$ 1,827,053		\$ 8,823,823		0.00%
24	Jun-25	\$ 1,628,492	\$ 246,713	\$ 1,875,205		\$ 8,823,823		0.00%
FY1	To-Date		\$ -					
	Total	\$ 17,675,953	\$ (670,746)	\$ 17,005,207	\$ 8,823,823	\$ 9,265,984	\$ (442,161)	95.23%
FY2	To-Date							
	Total	\$ 17,678,409	\$ 2,960,556	\$ 20,638,965	\$ -		\$ -	0.00%
BIEN	To-Date		\$ -					
	Total	\$ 35,354,362	\$ 2,289,810	\$ 37,644,172	\$ 8,823,823		\$ (442,161)	23.44%







The blue line reflects the total volume of applications received between July 2022 through February 2024 (data collected 2/22/2024). The green line reflects the volume of renewals received during the same timeframe. This includes registered nurses, licensed practical nurses, advanced registered nurse practitioners, and nursing technicians. The orange line reflects the total volume of registered nurses and licensed practical nurses, with an active Washington single state license, who have applied to upgrade to a Washington multistate license (MSL). WABON began accepting nurses with an out of state MSL to practice in Washington state on July 24, 2023. WABON began accepting applications and issuing MSLs on January 31, 2024. Please note, the orange line indicates MSL application count, but these nurses are not new to the Washington state nursing population.

# Strategic Plan – Practice Update

## Data Driven Practice

- Early Remediation (ER) Data
- Practice Inquiries
- Student Nurse Practice Errors





# Diversity, Equity, Inclusion & Belonging (DEI-B)

# Updates

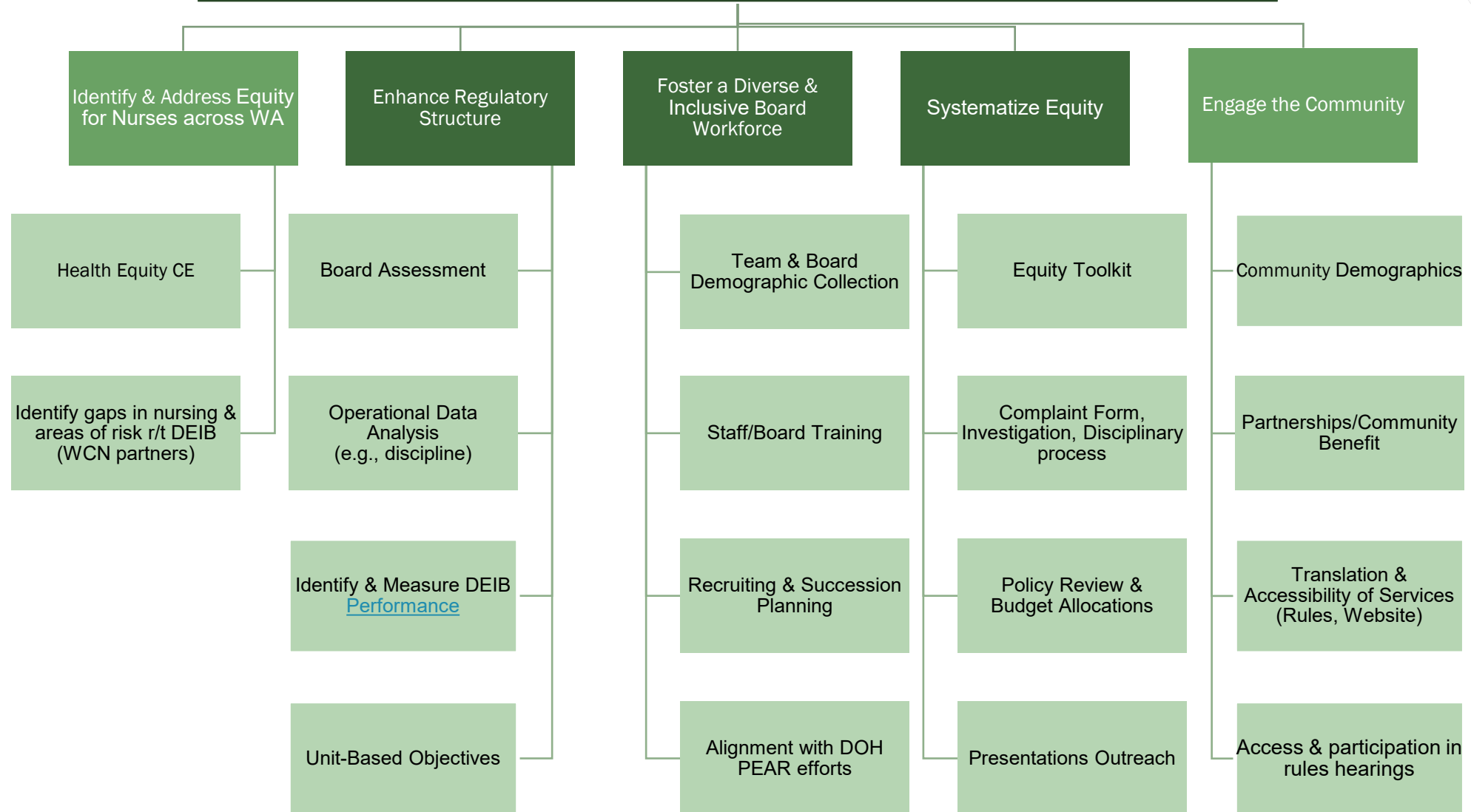
- Defined DEI-B task force mission statement, invited members, identified goals, and continue to plan how to achieve goals.
- Identified current and on-going DEI-B initiatives internally and externally.
- Surveyed other state boards of nursing regarding their DEI-B priorities and initiatives.
- Completed an initial review of Washington's nursing workforce race and ethnicity demographic data.

# Goals

- **Internal Improvement:** Enhance diversity, equity, inclusion, and belonging within the operations and culture of the Washington State Board of Nursing.
- **External Engagement:** Promote diversity, equity, inclusion, and belonging within Washington's nursing workforce and population.
- **Data-Driven Decision Making:** Utilize data and research to identify disparities, track progress, and inform DEI-B initiatives and strategies.
- **Interested Party Collaboration:** Foster partnerships and collaboration with interested parties, including nursing associations, educational institutions, healthcare providers, community organizations, and state/federal government agencies, to advance DEI-B objectives.



# WABON Equity, Diversity, Inclusion, & Belonging 2023-2025 Strategic Priorities



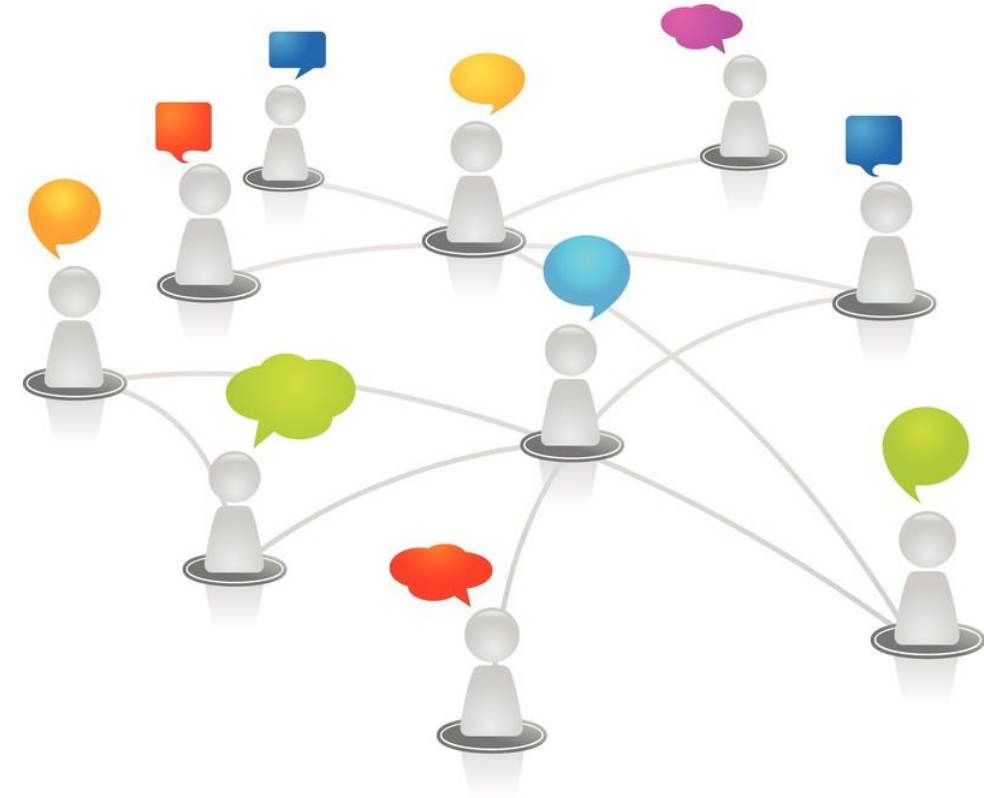
# Next Steps

- Set specific, measurable, achievable, relevant, and time-bound (SMART) goals for enhancing DEI-B within WABON and the nursing workforce.
- Identify unit and subcommittee opportunities for improvement.
- Conduct baseline assessment for DEI-B using established tool.

# Questions?



# Policies & Procedures, Pitfalls of social media



Penny Tovar, pro-tem member of Communications Committee  
Amy Sharar, Public Information Officer

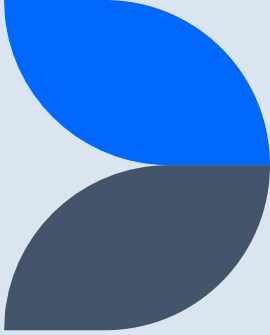
# Agenda

- Pitfalls of social media and how to respond
- Policies and procedures of social media conduct

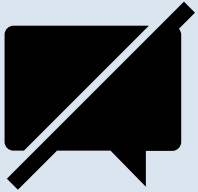
# Pitfalls

of social media

# Possible pitfalls of social media



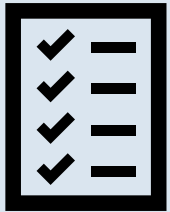
# Negative comments



No response



Delete the comment



Apply filters



Automated response

# Spamming

- Report the user for spam
- No need to message user personally



# Messages

- Short, concise, factual responses that address the question



# Reposts

- Put watermark and borders on all WABON post
- Reports users if repost is meant to solicit negative feedback



“

Thank you for your inquiry, to properly assist you, we will redirect you to the following department: \_\_\_\_\_. They will assist you in addressing your concern. Thank you and we hope you have a great day!

”

# Summary

The pitfalls of social media can be navigated properly with policies and procedures that define conduct that is appropriate/inappropriate, with an outline of pre-approved automated messages and responses to specific situations and interactions.



# Policies and Procedures

of social media conduct

# Social Media Policy Statement

WABON will use social media tools when appropriate to increase accessibility to public health and nursing information. Social media use must support WABON's purpose of protecting 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 purpose of WABON includes establishing, monitoring and enforcing licensing, consistent standards of practice, continuing competency mechanisms, and discipline.

Social media usage must comply with applicable policies, standards and guidelines. The Department of Health's Social Media Guidelines and associated standards provide direction on the oversight, development, maintenance, and record retention of social media sites created and maintained by the Washington State Department of Health, and WABON's social media procedures fall under this purview. All social posts and correspondence are subject to public disclosure and records retention.

For represented employees the collective bargaining agreements (CBA) supersede specific provisions of agency policies with which it conflicts.

# Procedure: Social Media Management

**Who** – defines audiences, contacts within WABON

**What** – identifies the types of posts, appropriate posts

**When** – identifies the frequency of posts

**Where** – clarifies what posts will be used on which platforms

**How** – identifies purpose, how the posts are decided on

**Checklist** – a way to confirm the post meets specific criteria, such as supports WABON's purpose, maintains ethical standards, protects the rights of individuals/property/copyright or trademarks



# Procedure: Social Media Usage/Interaction

## Employee Usage for Work Purposes

- Who has access to platforms for posting, responding
- Employee request form for social posts

## Employee Personal Use While Working

## Other Use of Social Media

## Interaction on Platforms

- When to respond to posted comments
  - Where to respond, i.e. on the post thread, private message
- Designated contacts for correspondence
- Automated responses
  - When to use, when not to use



# Questions?

# Executive Office of Policy, Planning and Evaluation Federal and Regulatory Affairs Team

V.I.C.1

## Rule Making

### What is Rule Making?

Whenever the agency creates, changes (amends), or deletes (repeals) a rule it must use the rule making process. All Department of Health and State Board of Health rules fall under Title 246 WAC, and must comply with the Administrative Procedure Act (chapter 34.05 RCW).

### Laws vs Rules – What is the difference?

#### Law – Revised Code of Washington (RCW)

The agency must have statutory authority or permission to do something. The RCW is the compilation of permanent **laws** (statutes) now in force. **Laws** are enacted by the Legislature, and signed by the Governor, or enacted via the initiative process.

#### Rules – Washington Administrative Code (WAC)

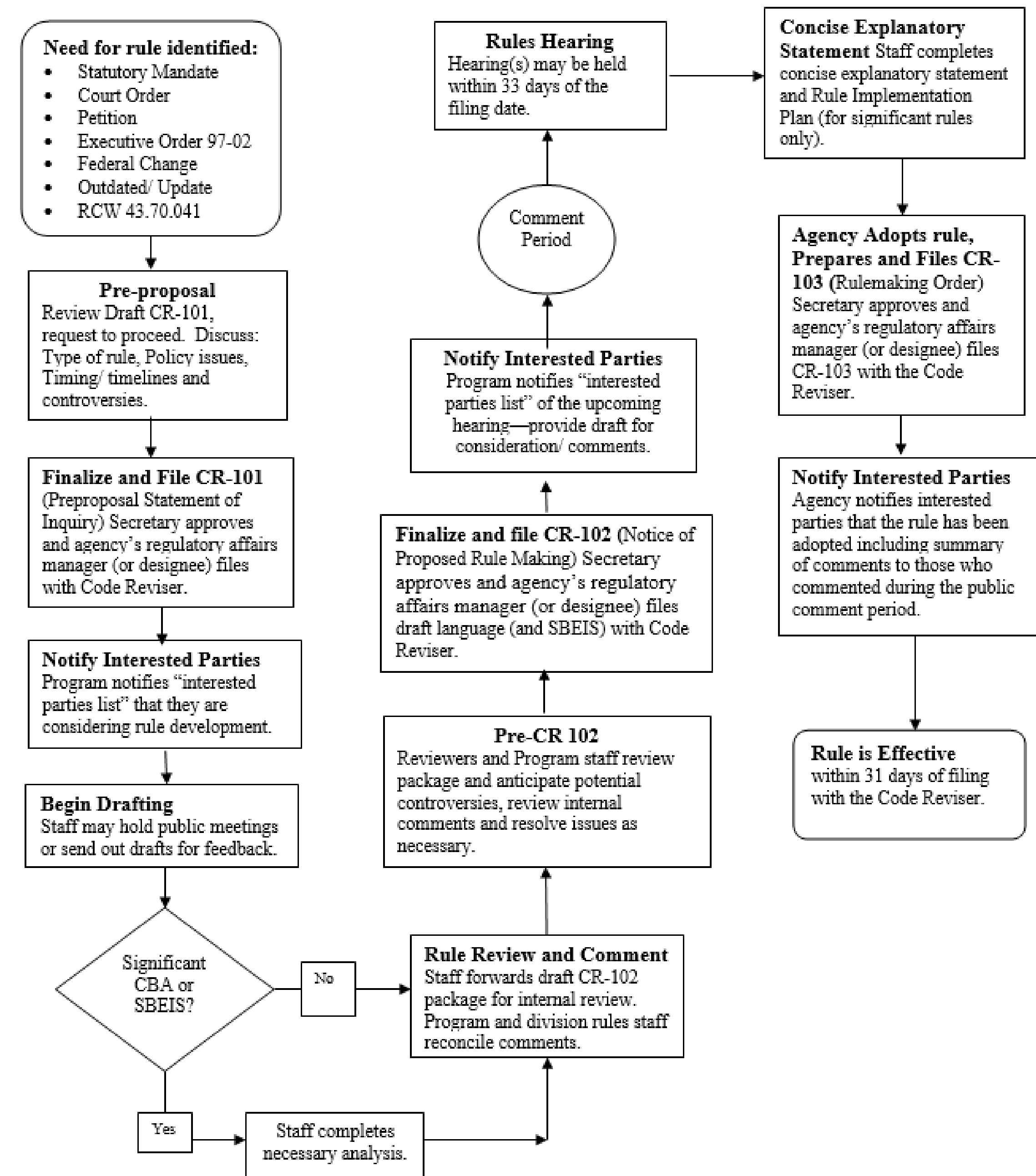
The agency uses **rules** to implement laws and policies. A **rule** is an order, directive, or regulation that agencies use to:

- ✓ Subject a person to a penalty or sanction if that person violates a regulation
- ✓ Set qualifications for conveying privileges to people or entities
- ✓ Set procedures or practices for agency hearings
- ✓ License or permit individuals or entities and revoke licenses or permits
- ✓ Set project or material standards for goods before they can be sold or distributed in Washington

### What Types of Rule Making Processes Can Be Used?

- ✓ Standard/Basic
- ✓ Abbreviated – Exception, Expedited, Emergency

#### Basic Rule Process



### Other Rulemaking Activities

Rule Making Petition Response

Policy Statements

Interpretive Statements

E-mail: [WABONRules@doh.wa.gov](mailto:WABONRules@doh.wa.gov)

Phone: (360) 236-3538

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

## EMERGENCY RULES (120-Day Limit)

#	RULE	WASHINGTON ADMINISTRATIVE CODE (WAC)	PURPOSE	LAST FILING DATE Washington State Register (WSR)
1	Initial Out-of-State Exam and Endorsement Licensing Rules	WAC 246-840-030 WAC 246-840-090	Amending specific rule language to clarify licensure requirements for registered nursing (RN) and licensed practical nursing (LPN) applicants applying for initial licensure via an out-of-state traditional nursing education program approved by another U.S. nursing board and applicants applying via interstate endorsement.	WSR: <a href="#">24-02-059</a> File: 12/29/2023

## CURRENT RULES IN PROGRESS (STANDARD RULEMAKING)

#	RULE	WASHINGTON ADMINISTRATIVE CODE (WAC)	PURPOSE	CR-101 PREPROPOSAL	RULE WORKSHOPS	CR-102 PROPOSED & CR-105 (EXPEDITED)	RULE HEARING	CR-103P PERMANENT
1	Initial Out-of-State Exam and Endorsement Licensing	Amendments to: WAC 246-840-030 WAC 246-840-090 And other relevant rule sections in Chapter 246-840 WAC	Moving emergency rule language into permanent rule. Amending specific rule language to clarify licensure requirements for registered nursing (RN) and licensed practical nursing (LPN) applicants <u>applying for initial licensure via an out-of-state traditional nursing education program approved by another U.S. nursing board and applicants applying via interstate endorsement.</u>	WSR: <a href="#">23-11-143</a> File: 5/24/2023	6/22/2023 6/29/2023	WSR: <a href="#">24-03-103</a> File: 1/18/2024	3/8/2024	
2	Nursing Credential Opportunities	Amendments to: WAC 246-840-517 WAC 246-840-534 And other relevant rule sections in Chapter 246-840 WAC	<a href="#">SB 5582-S2.SL.pdf (wa.gov)</a> Reducing barriers and expanding educational opportunities to increase the supply of nurses in Washington. The Washington State Board of Nursing (board) is considering amendments to nursing education rules in response to Engrossed Second Substitute Senate Bill (E2SSB) 5582 (Chapter 126, Laws of 2023). The board is considering amending WAC 246-840-517, 246-840-534, and other related rule sections.	WSR: <a href="#">23-17-011</a> File: 8/4/2023	9/26/2023 10/5/2023 10/16/2023 10/17/2023 10/26/2023 11/20/2023 12/4/2023	Board reviews draft language		

#	RULE	WASHINGTON ADMINISTRATIVE CODE (WAC)	PURPOSE	CR-101 PREPROPOSAL	RULE WORKSHOPS	CR-102 PROPOSED & CR-105 (EXPEDITED)	RULE HEARING	CR-103P PERMANENT
3	Substance Use Disorder Monitoring Program Participation	Amendments to: WAC 246-840-750 through WAC 246-840-780 And potential new rule sections in Chapter 246-840 WAC.	<p>HB <a href="#">1255-S.SL.pdf (wa.gov)</a> Reducing stigma and incentivizing health care professionals to participate in a substance use disorder monitoring and treatment program.</p> <p>The Washington State Board of Nursing (board) is considering amendments to current rule sections relating to the board's substance use disorder (SUD) monitoring program in response to Substitute House Bill (SHB) 1255 Nursing — Substance Use Disorder Monitoring Program Participation (chapter 141, Laws of 2023). The board is also considering creating new rule sections to establish a stipend program as directed by SHB 1255.</p>	WSR: <a href="#">23-17-074</a> File: 8/14/2023	12/13/2023 12/15/2023	In progress		
4	Blood Glucose Delegation	Amendments to: WAC 246-840-930 WAC 246-840-940	<p>HB <a href="#">1124-S.PL.pdf (wa.gov)</a> <b>Nurse Delegation of Glucose Monitoring, Glucose Testing, and Insulin Injections.</b> Identifies two areas that require WABON rulemaking:</p> <p>Expands the allowance for the RN to delegate glucose monitoring and testing beyond community-based and home settings to all settings where the NA-R/NA-C and HCAs work.</p> <p>Removes from statute the timelines for RN supervision and evaluation of the delegated task of administering insulin and directs the board to determine the interval in rule.</p>	WSR: <a href="#">23-02-037</a> Filed: 12/29/2022	2/1/2023 and 2/6/2023.  Note: Additional workshops were held 5/15/2023 and 5/19/2023.	In progress		
5	ARNP Education Requirements	Amendments to: WAC 246-840-010 WAC 246-840-340 WAC 246-840-342 And other related rule sections in Chapter 246-840 WAC	<p>On July 14, 2023, the board received a letter of determination from the JARRC recommending that the board:</p> <p><b>(1) define the term “graduate degree” in chapter 246-840 WAC and</b>  <b>(2) provide for the exemptions to education requirements for Advanced Registered Nurse Practitioner license applicants in board Procedures B35.01 and B9.06 by rule.</b></p> <p>On September 7, 2023, at the board's business meeting, the board held a public hearing to fully consider all written and oral submissions regarding the July 5, 2023, JARRC finding and moved to initial the rulemaking process with a CR-101.</p>	WSR: 24-05-022 Filed: 2/9/2024	In progress			



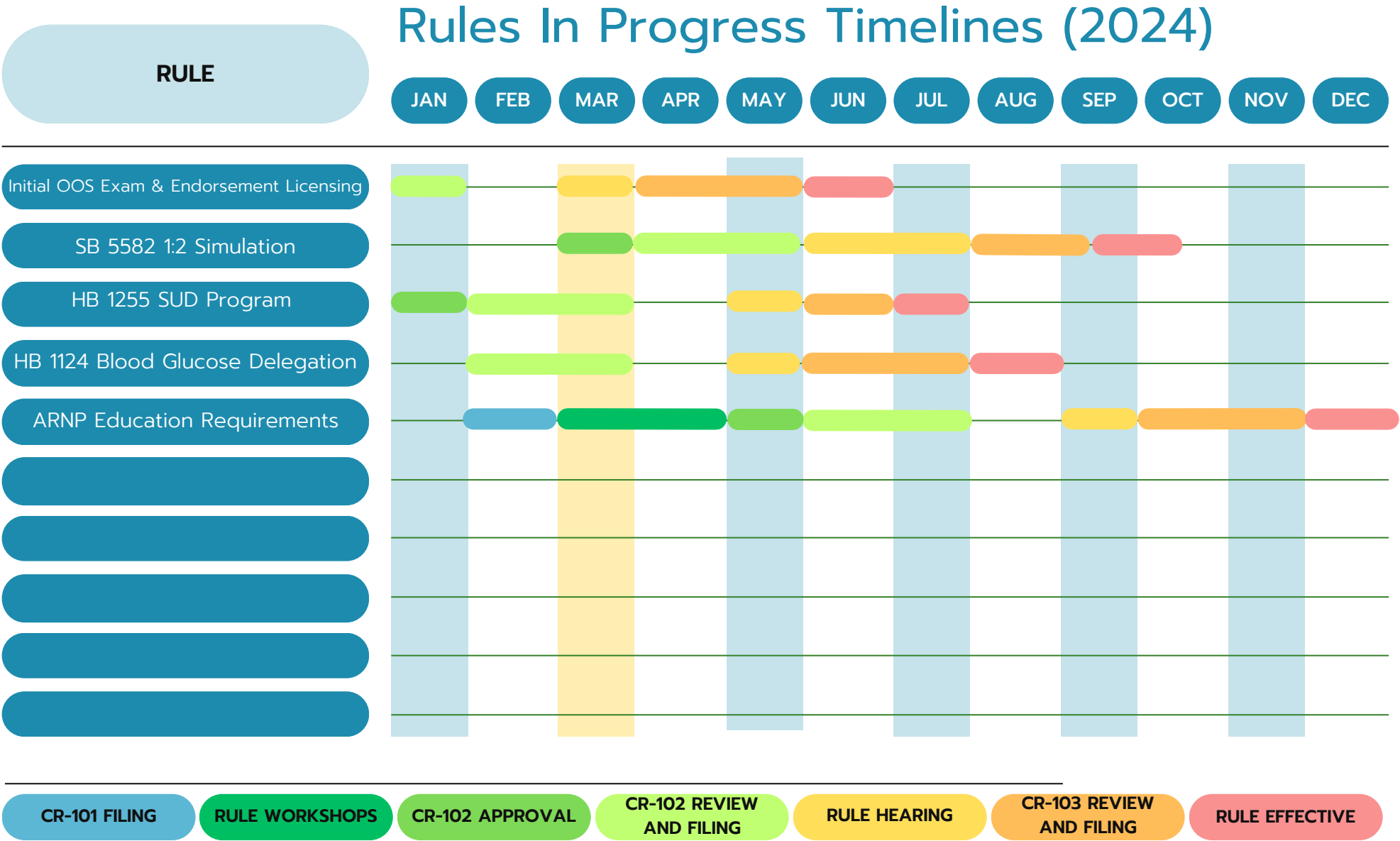
## RECENTLY FILED RULES (EFFECTIVE 2021-2024)

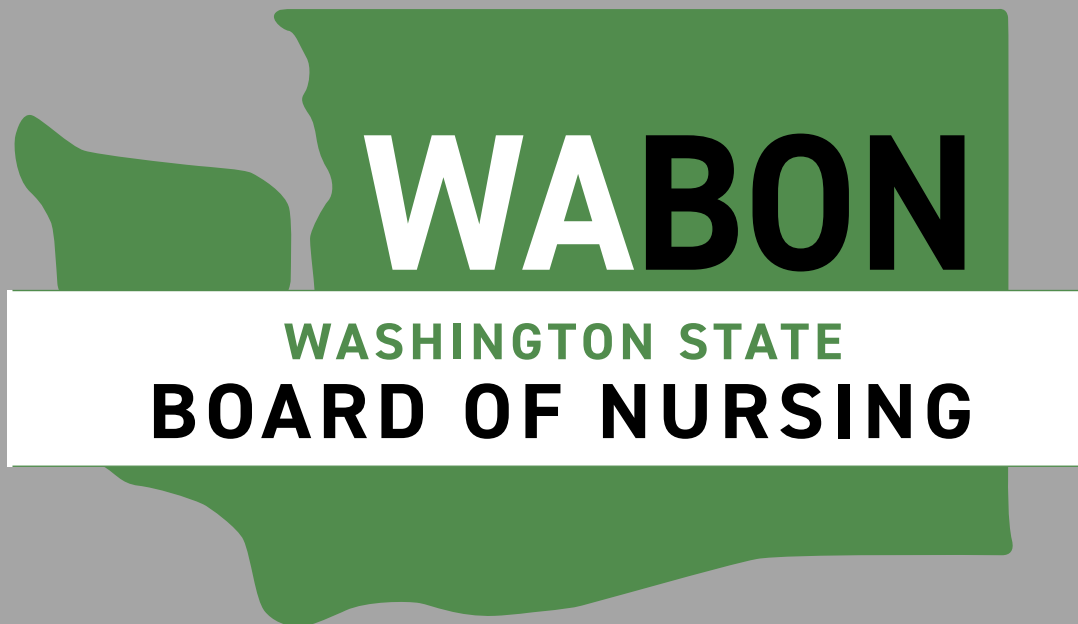
#	RULE	WASHINGTON ADMINISTRATIVE CODE (WAC)	PURPOSE	CR-101 PREPROPOSAL	RULE WORKSHOPS	CR-102 PROPOSED & CR-105 (EXPEDITED)	RULE HEARING	CR-103P/CR-103E PERMANENT/ EMERGENCY
1	Nursing Temporary Practice Permits	Amendments to: WAC 264-840-095	<p>Temporary practice permit effective dates for licensed practical nurses (LPN) and registered nurses (RN). The Washington State Board of Nursing (board) is adopting amendments to WAC 246-840-095, Temporary Practice Permits, reducing the length of time a temporary practice permit is effective and updating criteria to issue a temporary practice permit in order to align the internal board process with rule language and implement Second Substitute House Bill (2SHB) 1009 (chapter 165, Laws of 2023), Military Spouses—Professional Licensing and Employment.</p> <p>The board is adopting amendments to <b>reduce the length of time a temporary practice permit is active from 180 days, after the temporary practice permit is issued, to 60 days</b> to align WAC 246-840-095 with the current practice of the board and promote completion of the licensure process. The amendments also reduce the extension of the temporary practice permit from 180 days to 30 days.</p>	WSR: <a href="#">22-06-057</a> Filed: 2/25/2022	7/7/22, 8/4/22, and 9/19/22.	WSR: <a href="#">23-21-071</a> Filed: 10/12/2023	11/29/2023	<p>WSR: 24-03-055 Filed: 1/11/2024</p> <p>Effective: 2/11/2024</p>
2	Multistate License Fee	Amendments to: WAC 246-840-990	<p><a href="#">5499-S.SL.pdf (wa.gov)</a> Concerning the multistate nurse licensure compact. Creating a fee and updating a surcharge for a multistate nursing license. WAC 246-840-990, Fees and renewal cycle. The Department of Health (department) in consultation with the Washington State Board of Nursing (board) must update an existing licensing surcharge amount in rule to comply with the new surcharge amount in law. The department and the board are also considering rulemaking to create a fee for a new multi-state license option for registered nurses (RNs) and licensed practical nurses (LPNs) residing in Washington State in keeping with Substitute Senate Bill (SSB) 5499 Multistate Nurse Licensure Compact (Chapter 123, Laws of 2023), effective July 23, 2023.</p>	WSR: <a href="#">23-16-127</a> File: 8/1/2023	8/23/2023 8/28/2023 8/29/2023	WSR: 23-26-060 File: 10/25/2023	12/5/2023	<p>WSR: 24-02-057 File: 12/28/2023</p> <p>Effective: 1/31/2024</p>
3	Health Equity Continuing Education	Amendments to: WAC 246-840-220 And other relevant continuing education rule	<p>ESSB <a href="#">5229-S.SL.pdf (wa.gov)</a> <b>Health Equity &amp; Continuing Competency</b></p> <p>Health equity continuing education for licensed practical nurses (LPN) and registered nurses (RN) licensed in WAC 246-840-220 and 246-840-222. The Washington State Board of Nursing (board) is adopting</p>	WSR: <a href="#">23-03-069</a> Filed: 1/12/2023	2/3/2023 2/8/2023 2/15/2023 2/16/2023 2/17/2023	WSR: <a href="#">23-19-081</a> Filed: 9/19/2023	10/25/2023	WSR: 23-23-166 Filed: 11/21/2023

#	RULE	WASHINGTON ADMINISTRATIVE CODE (WAC)	PURPOSE	CR-101 PREPROPOSAL	RULE WORKSHOPS	CR-102 PROPOSED & CR-105 (EXPEDITED)	RULE HEARING	CR-103P/CR-103E PERMANENT/ EMERGENCY
		sections in Chapter 246-840 WAC	<p>an amendment to WAC 246-840-220 to implement Engrossed Substitute Senate Bill (ESSB) 5229 (chapter 276, Laws of 2021).</p> <p>The board is adopting a new section of rule and revisions to existing rule in order to establish health equity continuing education (CE) requirements to comply with RCW 43.70.613.RCW 43.70.613(3)(b) directs the rule-making authority for each health profession licensed under Title 18 RCW that is subject to continuing education (CE) to adopt rules requiring a licensee to complete health equity continuing education training at least once every four years. The statute also directs the Department of Health (department) to create model rules establishing the minimum standards for health equity CE programs. The department filed model rules for health equity CE minimum standards on November 23, 2022, under WSR 22-23-167. Any rules developed for the board must meet or exceed the minimum standards in the model rules in WAC 246-12-800 through 246-12-830.</p> <p>The board's adopted rule adds two hours of health equity education to be completed as part of the current continuing education requirements every year. This exceeds the two hours of health equity education to be completed every four years required in the model rules. The proposed rule requires two hours in health equity CE every year which can be counted under existing CE requirements for the profession. No additional topics are being added to the model rules requirements.</p>		2/22/2023 3/3/2023			Effective: 12/22/2023
4	Nursing Assistants and NAC Training Program Standards	<p>Amendments to: Chapter 246-841 WAC (repealing) replacing with 246-841A in collaboration with DOH Secretary.</p> <p>Chapter 246-842 WAC (repealing)</p>	Legislated work by WABON 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. WABON believes standardizing curriculum in training programs will also result in standardizing scope of practice across work settings.	<u>WSR: 21-05-021</u> Filed: 2/8/2021	October 2022 through February 2023.	<p>WSR: <u>23-15-091</u> Filed: 7/18/2023</p> <p>Filing combined CR-102 for these rules and NA Rules under Secretary Authority (See #2) in progress. Filing of CR-102 approved on March 10, 2023, WABON business</p>	<b>8/30/2023</b>	<p>WSR: 23-20-117</p> <p>Filed: 10/3/2023</p> <p>Effective: 11/3/2023</p>

#	RULE	WASHINGTON ADMINISTRATIVE CODE (WAC)	PURPOSE	CR-101 PREPROPOSAL	RULE WORKSHOPS	CR-102 PROPOSED & CR-105 (EXPEDITED)	RULE HEARING	CR-103P/CR-103E PERMANENT/ EMERGENCY
5	ARNP Opioid Prescribing Rules	Amendments to: WAC 246-840-463 WAC 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, WABON 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.	<a href="#">WSR: 19-15-092</a> Filed: 7/22/2019	6/21/2022 and 6/30/22	<a href="#">WSR: 23-08-064</a> Filed 4/4/2023	5/12/2023	WSR: 23-14-082  Filed: 6/29/2023  Effective: 7/30/2023
6	ARNP Inactive and Expired Licenses	Amendments to: WAC 246-840-365 WAC 246-840-367	Concerns expressed at the 3/11/2022 CR-102 rules hearing (see Emergency to Perm Rules below effective 9/9/2022) caused the board to remove 365 and 367 for further consideration. The board voted to begin a new CR-101 process and consider adding other rule sections.	<a href="#">WSR: 22-12-090</a> Filed: 6/1/2022	6/21/2022 and 6/30/22.	<a href="#">WSR: 23-01-134</a> Filed: 12/20/2022	1/27/2023	WSR: <a href="#">23-08-069</a> Filed: 4/4/2023 Effective: 5/5/2023
7	Nursing Emergency Rules	WAC 246-840-365 WAC 246-840-367	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.					WSR: <a href="#">23-03-011</a> File: 1/6/2023
8	ARNP Scope of Practice	WAC 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	1/22/2019 1/23/2019 1/24/2019 1/26/2022 2/7/2022	WSR: 22-15-078 Filed: 7/18/2022	9/9/2022	WSR: 22-23-130 Filed: 11/21/2022  Effective: 12/22/2023
9	Nursing Technician Definition	WAC 246-840-010	The board 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.			<b>Expedited</b> WSR: <a href="#">22-12-092</a> Filed: 6/1/2022	N/A	WSR: <a href="#">22-17-144</a> Filed: 8/23/2022 Effective: 9/24/2022
10	Fees	WAC 246-840-990	The Secretary of the Department of Health in consultation with WABON 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		WSR: 22-10-104 Filed: 5/4/2022	6/13/2022	WSR: <a href="#">22-15-074</a> Filed: 7/18/2022 Effective: 12/1/2023

#	RULE	WASHINGTON ADMINISTRATIVE CODE (WAC)	PURPOSE	CR-101 PREPROPOSAL	RULE WORKSHOPS	CR-102 PROPOSED & CR-105 (EXPEDITED)	RULE HEARING	CR-103P/CR-103E PERMANENT/ EMERGENCY
11	Emergency to Permanent Rules	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. WABON first adopted emergency rules in response to COVID-19 in April 2020. They were refiled multiple times while permanent language is being developed.	WSR: 21-19-104 Filed: 9/17/2021	11/3/2021 11/8/2021	WSR: 22-04-081 Filed: 1/31/2022	3/11/2022  WAC 246-840-365, 367 removed and will be included in a new CR-101.	WSR: <u>22-12-026</u> Filed: 5/23/2022 Effective: 9/9/2022
12	LPN/NT Practice Opportunities	WAC 246-840-010, 840, 850	Allow LPN students practice opportunities. WABON'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	10/5/2020 and 9/2020	WSR 21-20-058 Filed: 9/28/2021	11/12/2021	WSR: <u>22-04-082</u> Filed: 1/31/2022 Effective: 5/13/2022
13	Continuing Competency	WAC 246-840-111, 120, 125, and 200 through 260	The Nursing Care Quality Assurance Commission (board) 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 board also adopted changes that now allow the board 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	3/12/2021	<u>WSR: 21-11-032</u> Filed: 5/12/2021 Effective: 6/13/2021
14	Aids Education & Training	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.			<b>Expedited</b> WSR: 20-18-045 Filed: 8/28/2020	N/A	WSR: 21-04-016 Filed: 1/22/2021





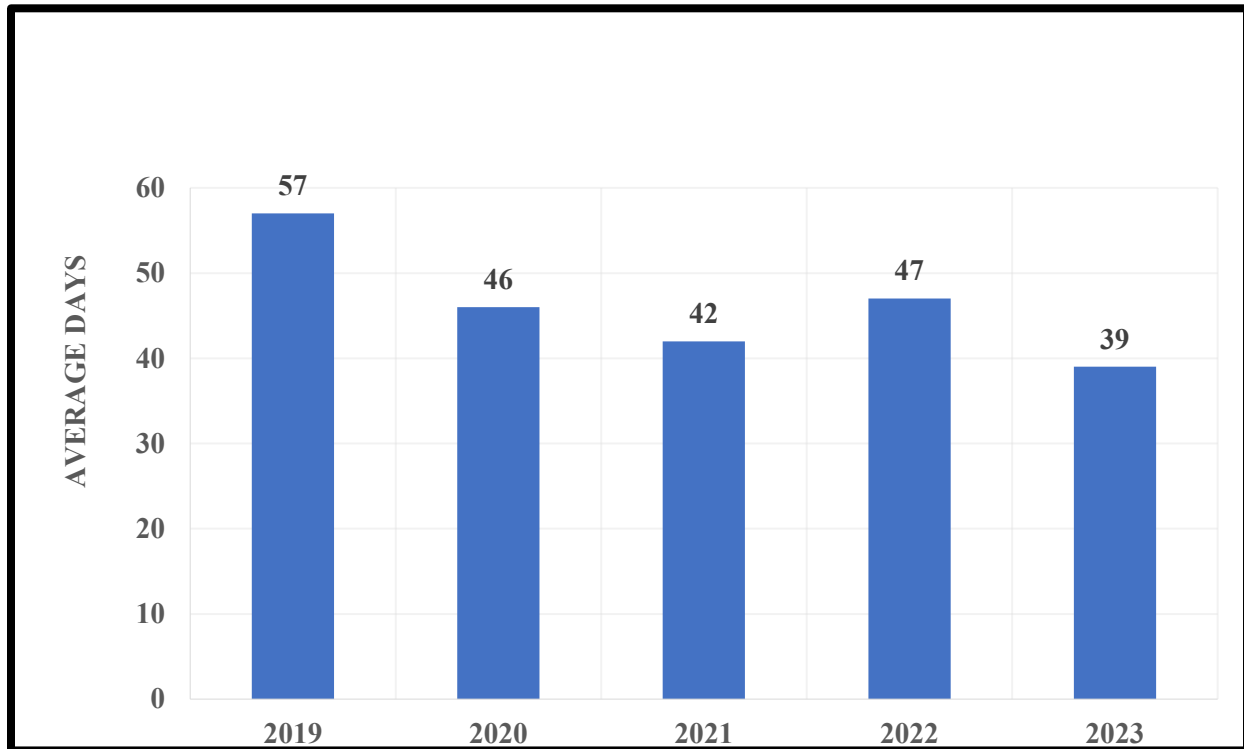
# **Washington Health Professional Services 2023 Annual Report**

**All measured results were derived from data collected between  
January 1, 2023, and December 31, 2023**

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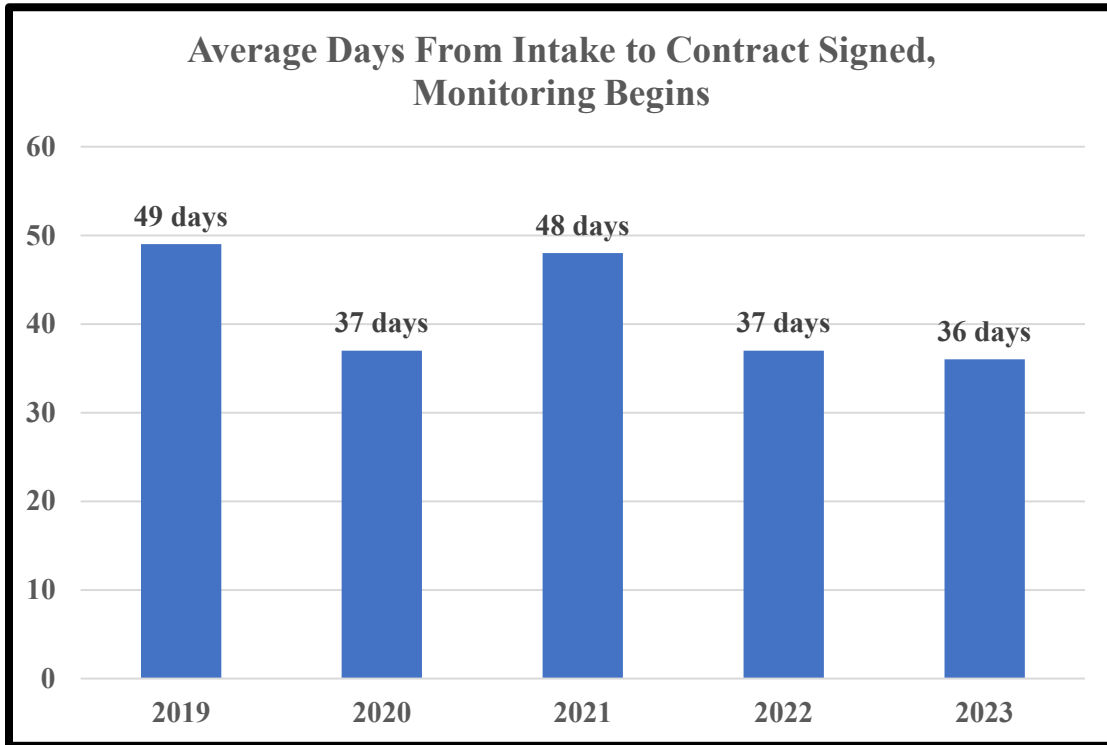
## 1. Length of time to determine eligibility for program participation



- Average days from intake to contract (agreement) offered.
- Process includes intake, evaluation recommendations, reason for entry/referral, case file review at weekly WHPS case staffing.
- Performance measure is 45 days from intake to contract offered.
- *Not all contracts offered result in a signed contract.*



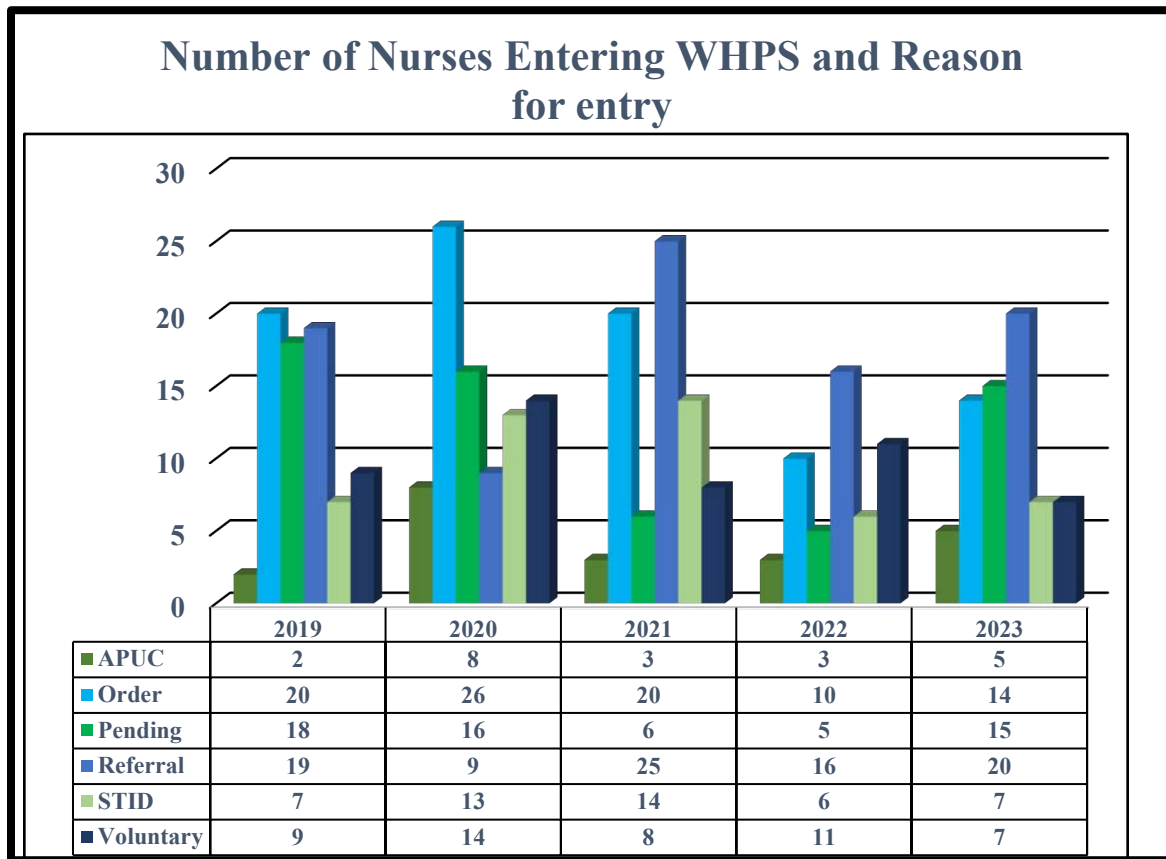
## 2. Length of time from when the program receives the referral to the execution of the agreement



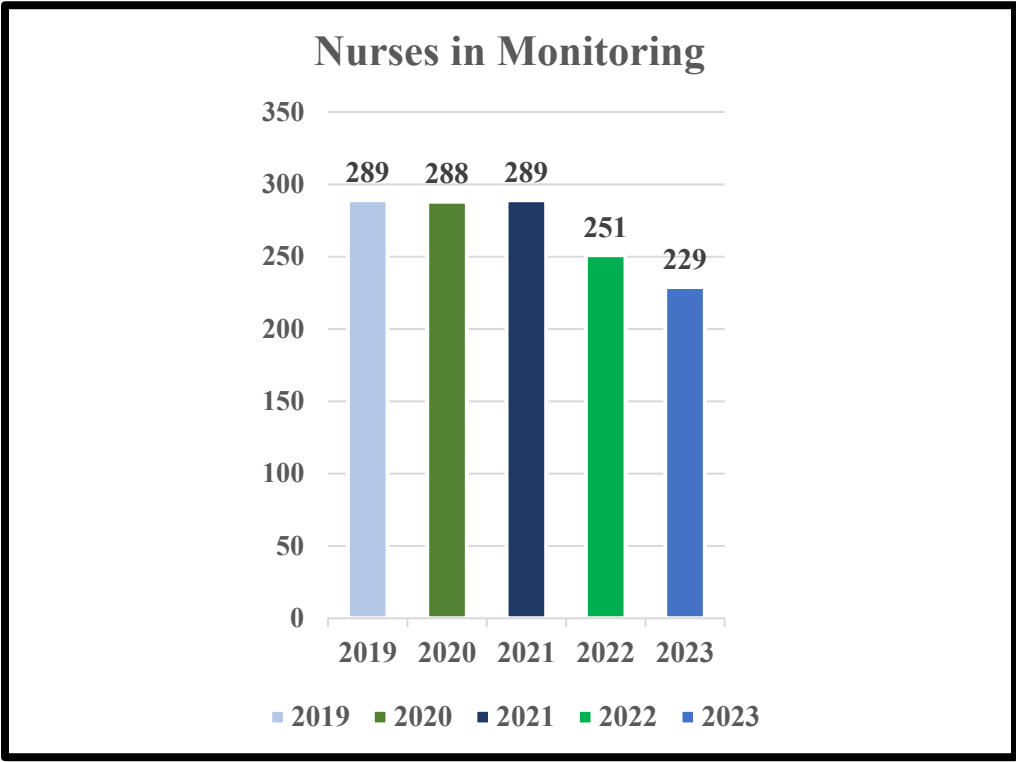
- Term agreement used interchangeably with contract.
- Average days from intake to contract (agreement) signed/monitoring begins.



### 3. Number and types of referrals

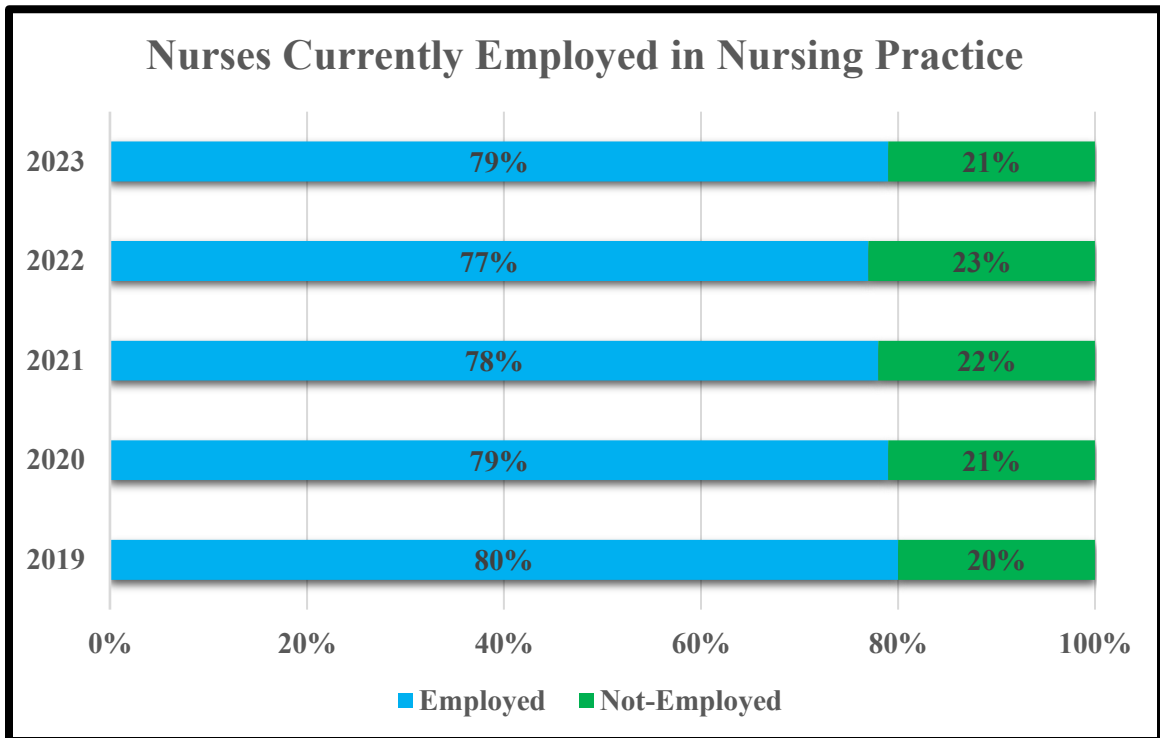


**4. Average number of nurses in WHPS (new and existing nurses)**



- SUD alternative to discipline programs nationwide have experienced a decline in the number of participants.

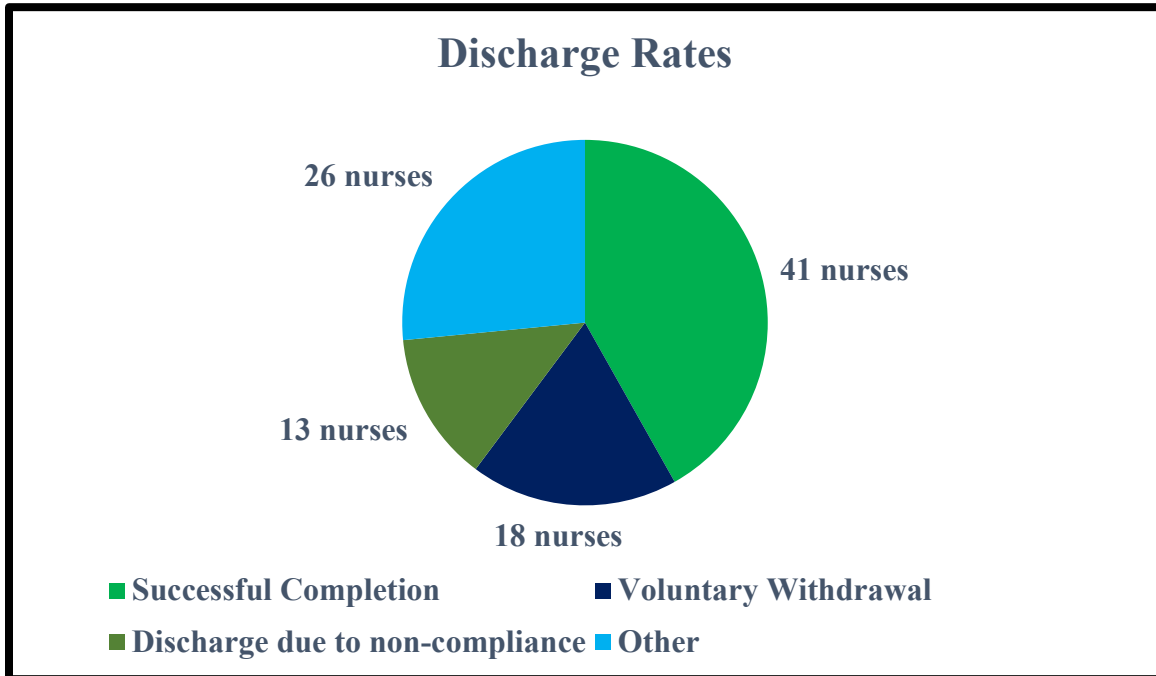
## 5. Return to work rates for WHPS nurses working under their current credentials



- The data in this report includes employment tracked for nurses working in Washington under their single state credential.
- Employment data includes ARNP, CRNA, RN and LPN.
- Performance measure is 75% employment rate.



## 6. Reasons for program discharge, including successful completion



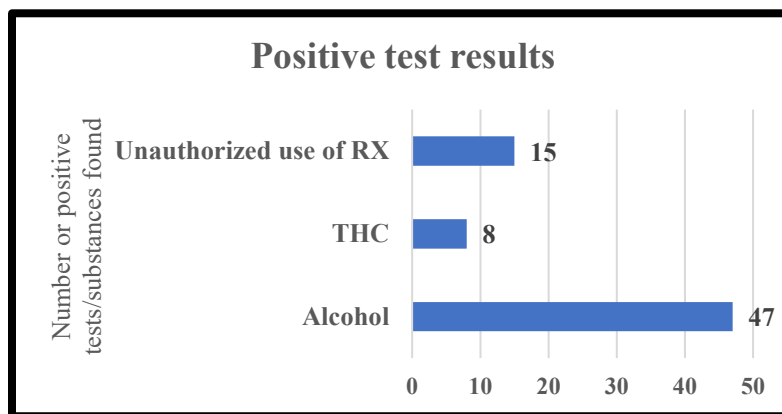
- WHPS discharged 98 nurses from the program in 2023.
- Forty-one nurses (42%) successfully completed the program.
- Eighteen nurses (18%) voluntarily withdrew from the program, which may include the reason of financial hardship.
- WHPS discharged 13 nurses (13%) for non-compliance, which included positive tests or unauthorized prescription use.
- The reasons for discharge of the remaining nurses included, but were not limited to, medical reasons, refused offer of contract, not appropriate for a contract, or referred to WABON for discipline.



## 7. Relapse rate/numbers

Cited in Procedure W44.02, *For public protection and the purposes of monitoring, the National Council of State Boards of Nursing Substance Use Disorder in Nursing (2011) defines relapse as “Any unauthorized use or abuse of alcohol, medications or mind-altering substances.”*

- Sixty-nine tests were positive in 2023 for medications or substances that were not authorized or approved for use.
- Of those, 47 (69%) tests were positive for alcohol; 25 of the tests were PETH positive (blood tests).
- Eight (12%) tests were positive for THC/Cannabinoids (eight positive tests were attributed to three nurses).
- Fifteen (22%) tests were positive due to use of unauthorized prescriptions or over-the-counter medications.
- Thirteen (19%) of the positive tests were admitted relapse.
  - Two nurses admitted to relapsing on four separate occasions.
  - One nurse admitted to relapsing on two separate occasions.
  - Three nurses admitted to relapsing following a positive test for alcohol.



## **8. Number of nurses temporarily removed from practice and reasons for removal**

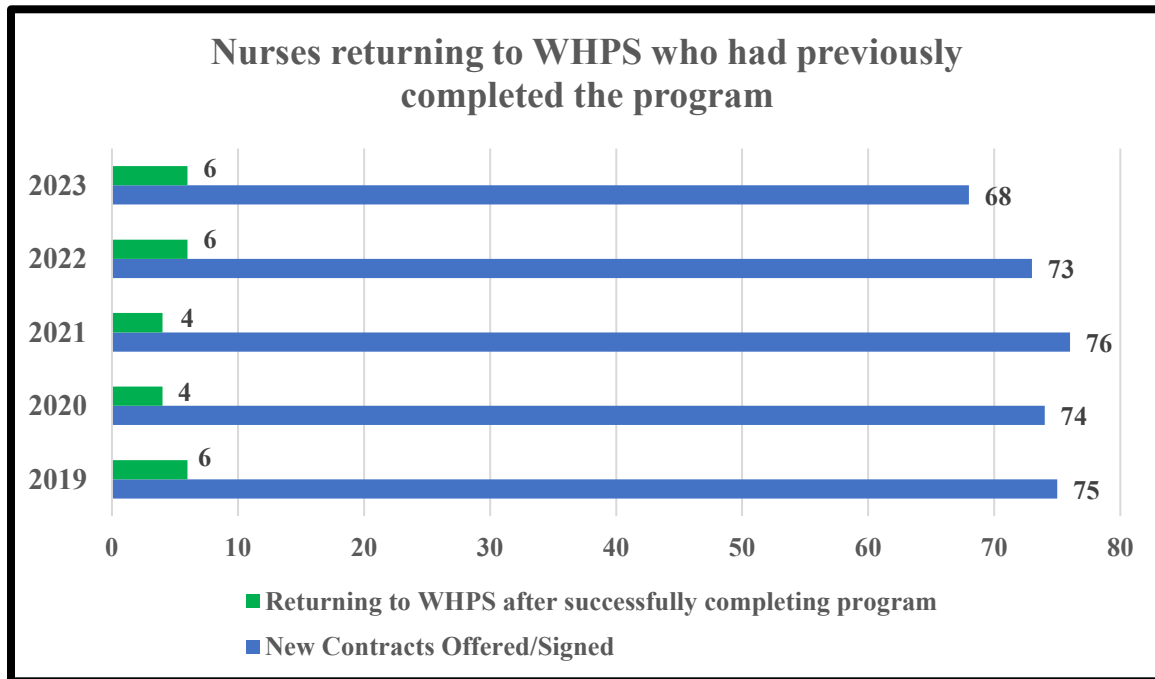
Reasons for removal from practice include, but are not limited to:

- Positive drug tests
- Unauthorized use of prescription or over-the-counter medications
- Employment non-compliance
- Excessive missed tests
- Admitted relapse

WHPS reported 31 incidents of non-compliance which resulted in case managers temporarily removing 18 nurses from practice.

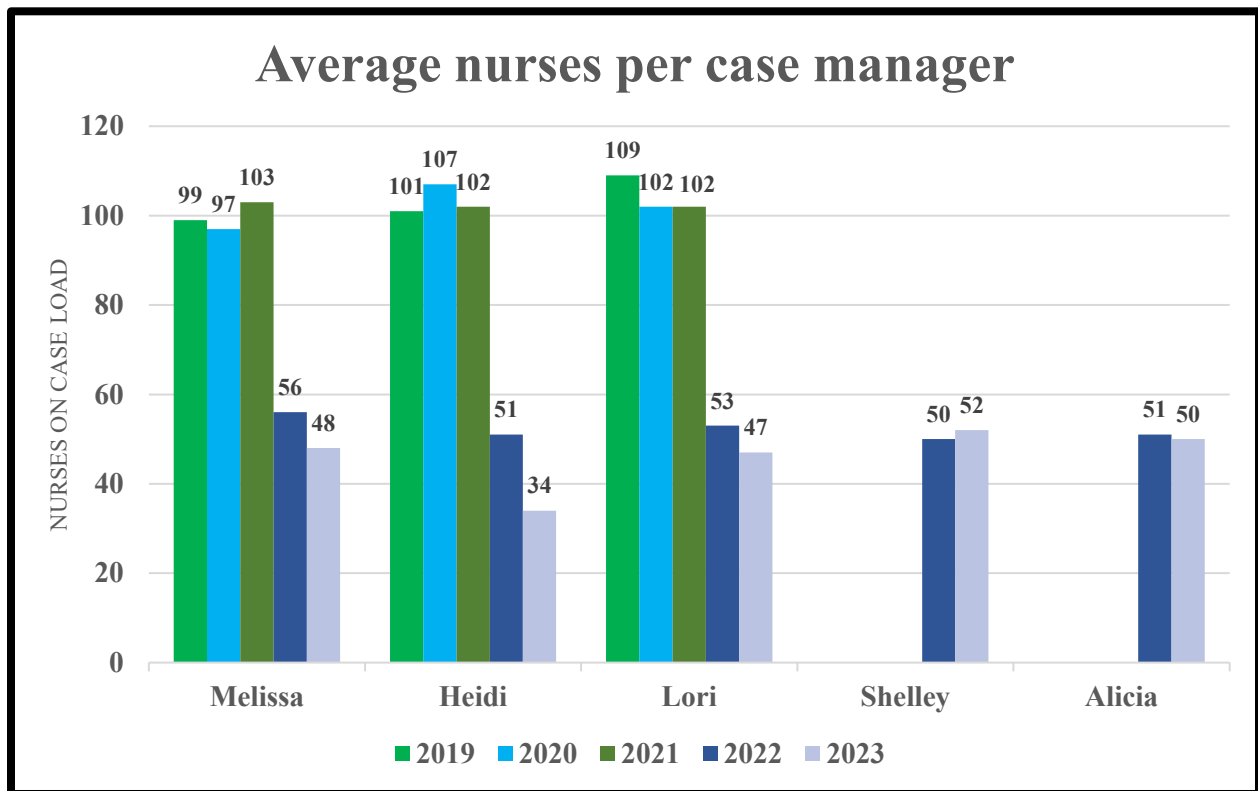
- One nurse was removed from practice on four separate occasions due to positive tests for alcohol.
- One nurse was removed from practice on three separate occasions due to excessive missed tests and positive tests for alcohol.
- One nurse was removed from practice on three separate occasions due to test tampering.
- One nurse was removed from practice on three separate occasions due to a positive test for alcohol and unauthorized use of prescription medication.

## 9. Recidivism rates for nurses who successfully completed WHPS in years prior





## 10. Case manager caseloads

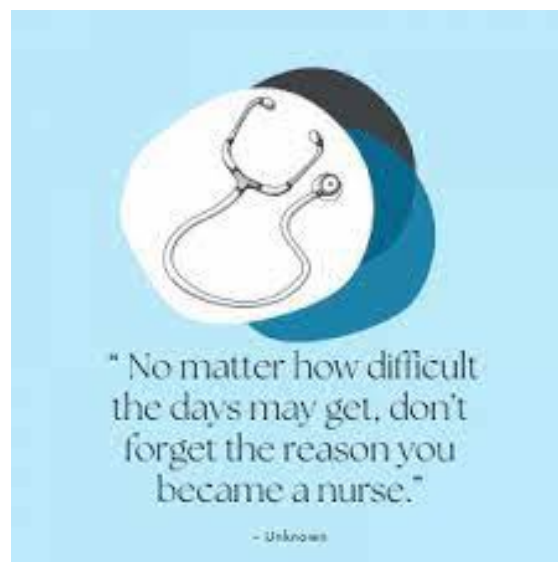


- Caseload data is generated monthly. Numbers above include the average number of nurses each case manager is responsible for annually.
- Two additional case managers were added in November 2021.



## 11. Internal quality assurance frequency and findings

2023	Total Program Participation	Average Days from Intake to Contract Signed	Average Days Positive Drug Test Turn-around Time	Incidents Referred to SUDRP	Average Days to Report an Incident to SUDRP	Number of Late Monthly Reports Submitted by Nurses	Emp. Rate	Case File Integrity, Required Documents, Up-to-date, Detailed Information	Missed Tests
Jan	231	38	7	5	29	38	79	98	5
Feb	234	38	8	7	25	27	80	96	7
Mar	223	40	8	0	0	44	80	97	1
Apr	222	31	8	4	19	31	80	97	3
May	219	35	9	5	31	15	78	98	2
June	226	12	10	1	32	21	78	96	4
July	229	32	9	5	26	20	77	97	9
Aug	232	37	9	6	26	26	76	95	4
Sep	229	41	11	4	39	29	78	99	8
Oct	231	40	9	6	25	25	81	98	6
Nov	230	19	9	4	18	23	81	99	7
Dec	234	30	10	1	40	23	83	98	6
Target		45	7		30	30	75	100	



## **12. Case managers' responses to non-compliance and relapse issues**

- A review of 2023 non-compliance and incidents determined the case managers responded to incidents in a timely manner, followed policies and procedures, documented communication, and saved all relevant documentation.

## **13. Confirmation that required documents can be tracked and verified**

- In an effort to continually verify program compliance and ensure all processes and procedures are followed, the assistant director of discipline, WHPS and operations manager review selected case files monthly. The purpose for this review is to confirm completeness of files and verify receipt of required documentation. This includes, but is not limited to, signed contracts, release of information, treatment evaluations and reports, employment contracts and required employment reports, group participation reports, attendance reports, self-reports, up-to-date prescription information, medication management reports or other required documentation. Monthly reports are generated to ensure issues of non-compliance are addressed in a timely manner and that all required follow up to these issues of non-compliance adhere to WHPS program policies and procedures. The case file integrity data collected is included in the internal quality assurance review frequency and findings table in #11 above.

## **14. External Audits Findings and Performance**

- In November 2021, two case manager associate positions were reallocated to case managers. There are now five case managers and an operations manager. This reallocation reduced the average caseload from 100 nurses per case manager to an average of 50 nurses per case manager. This change has allowed more time for case managers to interact and respond to their nurses, attend peer support group sessions, and conduct outreach activities.

## **15. Legal or financial components as directed by WABON**

- WHPS receives its funding through licensing fees.
- WHPS does not have a dedicated budget.
- WHPS employs a Medical Director through a sole source contract. Dr. David Beck currently holds that position. The position is funded for \$65k per fiscal year. The position is part time.
- WHPS contracts with RecoveryTrek, which is a third-party administrator helping to support SUD monitoring and compliance through a robust data management system. The contract is a no cost contract to WABON.

## **16. Results of annual procedure review with WABON**

WABON approved the following procedure changes in 2023. Included in this list is the new procedure W.50 that is a result of legislation passed in the 2023 session.

- W.32 Program Non-Compliance and Discharge Criteria – updated language to reflect the stipend and stigma legislation and current practice.
- W.33 Intake – updated to reflect the stipend and stigma legislation.
- W.34 Substance Use Evaluation and Treatment Services – updated to reflect the stipend and stigma legislation and current practice.
- W.49 Performance Reports and Procedure Review – update to reflect the stipend and stigma legislation.
- W.50 Stipend and Stigma procedure – refined language since the September WABON meeting.

## **17. Policy recommendations to WABON**

In 2023 the Legislature passed Substitute House Bill (SHB) 1255 (RCW 18.79.440). The Bill addresses two issues associated with substance use disorders (SUD): the stigma associated with SUD recovery and a stipend program which is designed to help support nurses financially who otherwise would not be able to participate in the WHPS monitoring program.

- WABON staff reviewed and updated WAC 240-840-750 through WAC 240-840-780 to include the stipend and stigma program and the name change from NCQAC to WABON.
- WHPS and SUDRP created WAC 240-840-790 to address the stipend process.

WABON approved these changes to the rules at the November 2023 board meeting.

RCW 18.79.440 (SHB 1255) allotted \$25,000 annually from the general fund (GF-S) to support the stipend program. WABON submitted a decision package for additional funding to support the stipend program that was not included in the Governor's budget.

## 18. Education outreach plans and reports

For most of 2023, Dr. John Furman performed WHPS outreach activities. Before Dr. Furman's retirement in January 2024, he participated in several SUD related conferences to perform outreach activities as well as conducted numerous presentations to healthcare entities. In October 2023, Dr. Furman, with the assistance of other WABON staff, organized the bi-annual Wellness/SUD conference for the healthcare community. Nearly 300 people attended the conference. WABON members spoke highly of the varied guest speakers and have requested that we offer the conference annually.

With slightly lower caseloads, case managers will now take on the responsibility of outreach activities. The WHPS outreach efforts are directed towards educating healthcare professionals, healthcare students, healthcare facilities staff, healthcare facility executives and managers, and human resources staff about SUD, the WHPS program, and its benefits.

In 2023, WHPS case managers conducted eight outreach presentations to Cascade Senior Living, Tacoma Community College, Olympic College, NW University, Seattle University and Swedish Hospital. Four of the eight presentations were virtual. Most of the presentations were to college students enrolled in a health care program, such as LPN, RN, or NA. Attendance at the presentations varied between 15 to 47 students or healthcare staff.

The goal for 2024 is for WHPS staff to conduct at least four presentations per month and for WHPS staff to connect with two facilities each month and offer to conduct presentations on the WHPS program and its benefits. A nurse consultant assigned to Practice also includes a short description of WHPS in presentations to her audiences.

WHPS is using digital and social media outreach to connect with nurses and other interested parties. Examples include updating and expanding the WHPS webpage and emails, and a presence in the jurisprudence module in education.

## **19. Program direction to assure that decisions are congruent with current research, knowledge, best practices, and compliance with legislative and WABON directives**

- In addition to what was reported in #18 above, the Discipline Subcommittee reviewed performance measures, statistical data, and procedure revisions at their regular meetings held every other month. The same information is reported to WABON at every business meeting. WHPS follows the NCSBN best practices related to SUD monitoring.
- In 2023 the results of the SUDRP, mentioned above, have improved communications between WHPS staff, board members, and WHPS participants. The SUDRP holds weekly meetings to discuss referrals and other issues such as SUD best practices and education opportunities. WHPS staff and SUDRP members receive monthly notices from Recovery Trek and United States Drug Testing Laboratories (USDTL) for SUD educational webinars, conferences related to SUD treatment, monitoring, testing, medications, and a variety of other SUD topics.

## 20. Annual Summary of Performance Measures

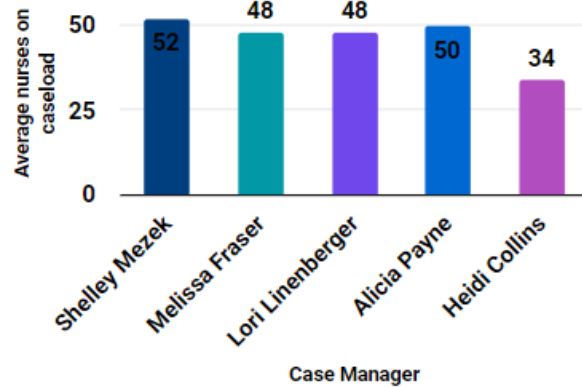
### New intakes by license

License	2023 Intake
ARNP/CRNA	8
RN/LPN	84

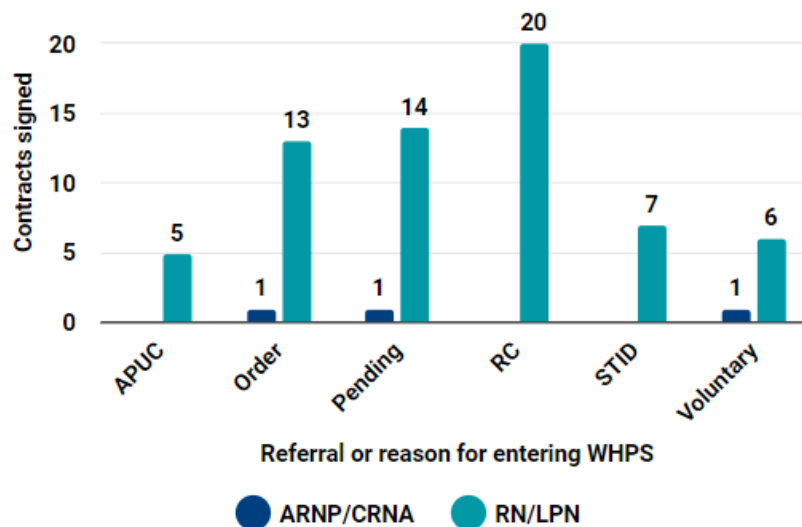
### Average in monitoring by license

License	Total
ARNP/CRNA	16
RN/LPN	213

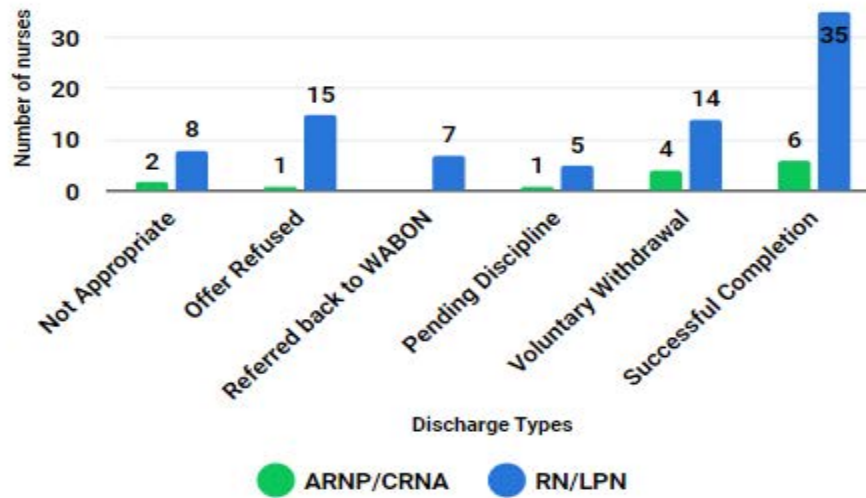
### Average caseload per case manager



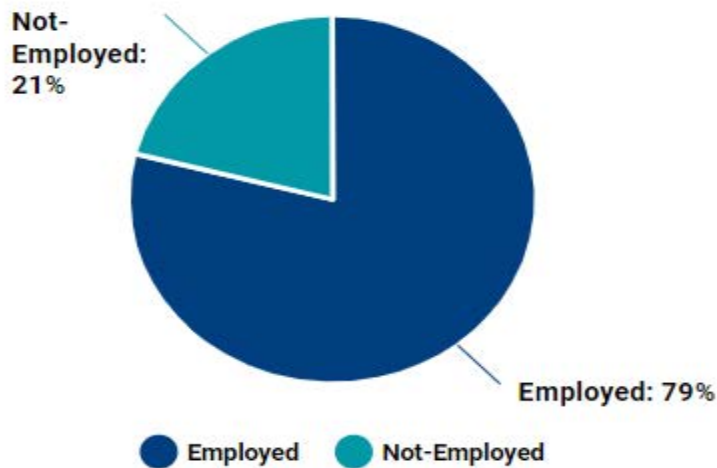
### Contracts signed by reason, referral and license type



## Discharge: Number of nurses discharged by reason



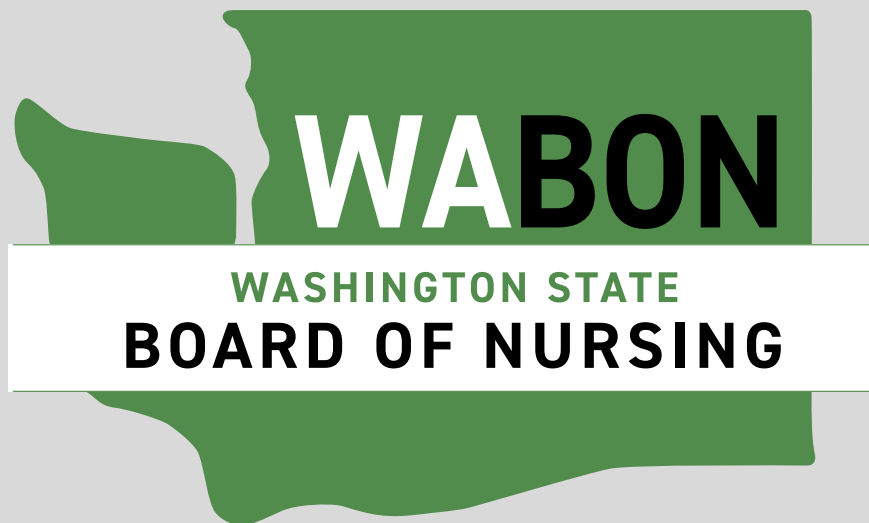
## Employment Measures for 2023



**2023 WHPS Annual Report created by:**  
Cicely Bacon, WHPS Operations Manager

**Review, Edits and Approval by:**  
Catherine Woodard, Director of Discipline and WHPS  
Grant Hulteen, Assistant Director of Discipline and WHPS





# Washington Health Professional Services Substance Use Disorder Review Panel

2023 Annual Report

**All measured results were derived from data collected between  
January 31, 2023, and December 31, 2023**

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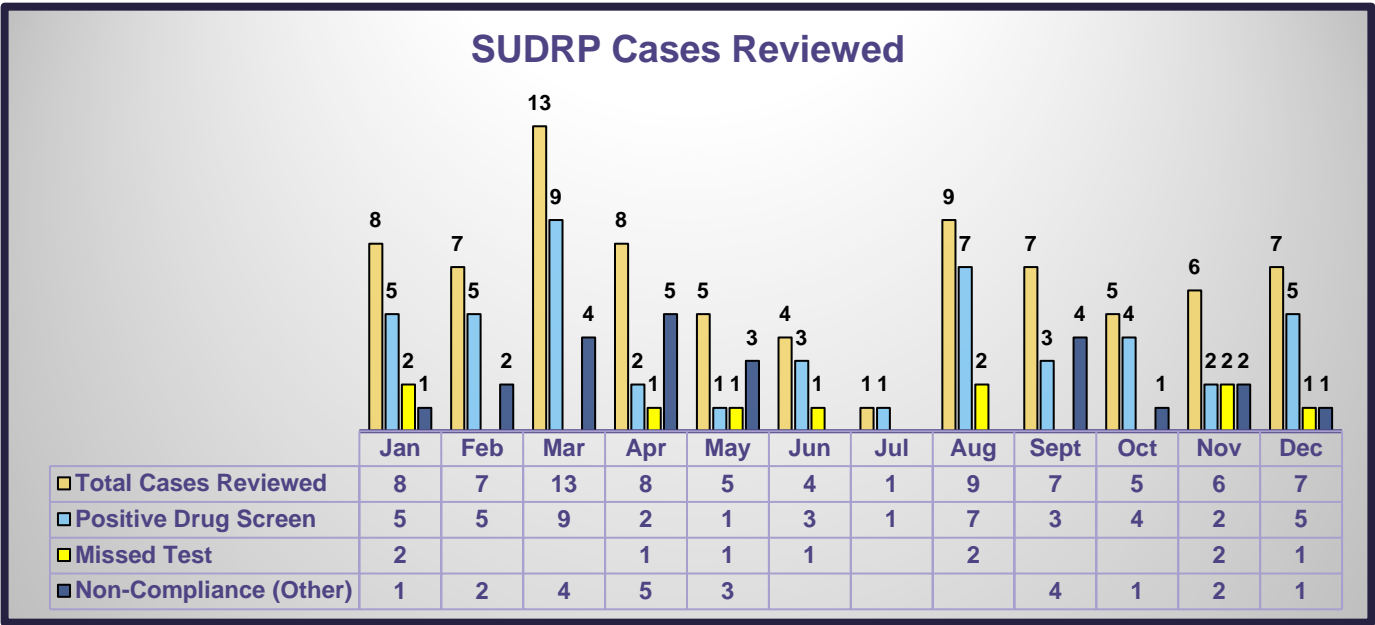
## **1. Substance Use Disorder Review Panel Introduction**

The mission of the Substance Use Disorder Review Panel (SUDRP) is to protect the public and ensure nurses in the WHPS monitoring program are safe to practice. SUDRP supports WABON and the WHPS program by reviewing the significant noncompliance by WHPS nurses and graduation applications for nurses who are in the WHPS program because of disciplinary action.

WABON created procedure *A57.01 Substance Use Disorder Review Panel* effective March 11, 2022, and the SUDRP officially began on July 1, 2022. The SUDRP consists of:

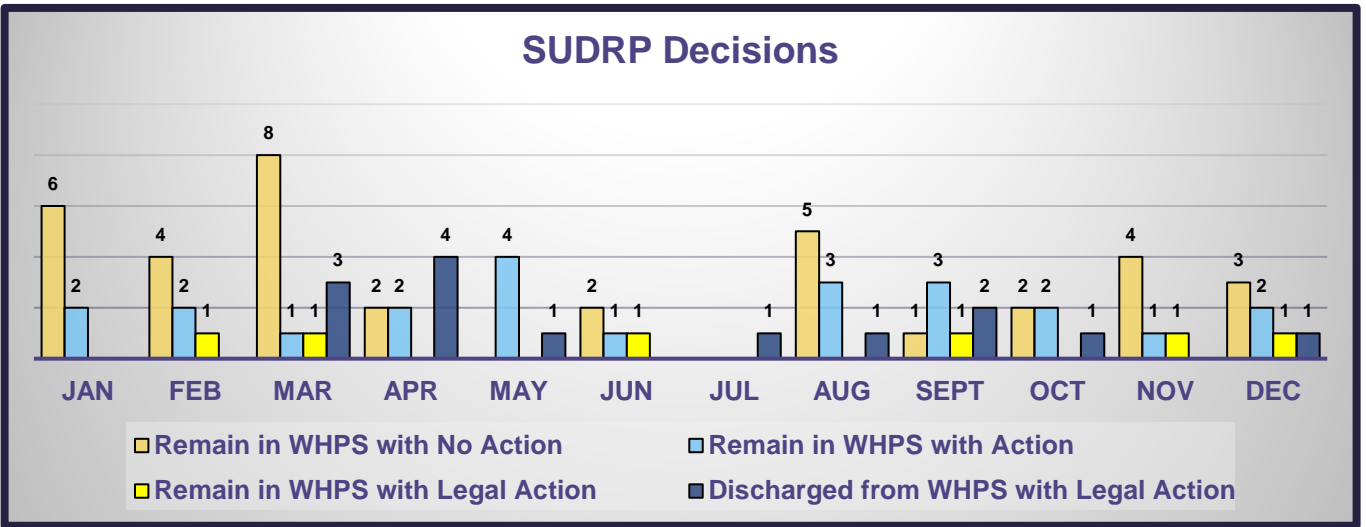
- One full board member of the WABON to act as chair
- Two or more board members or pro-tem board members
- Assistant Director, Discipline - WHPS, or designee
- Assistant Director, Discipline – Legal, or designee
- WHPS Case Managers
- Staff attorney
- Discipline compliance officer
- Other staff as requested or required

2. Number of Cases Reviewed at SUDRP by Referral Reason

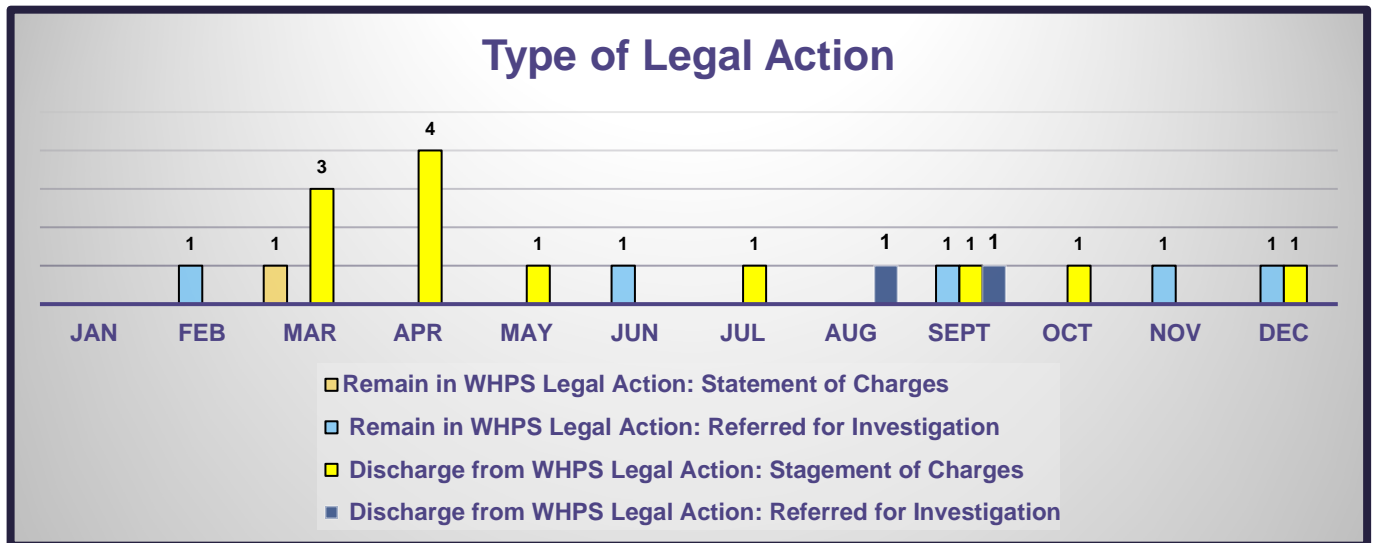


- This chart shows the total cases reviewed and the reasons for the referral to SUDRP.
- SUDRP reviewed an average of seven cases per month.
- Forty-nine referrals were for positive drug screens.
- Ten referrals were for missed tests.
- Twenty-three referrals were for other significant non-compliance which includes, but is not limited to, employment issues, missing reports, and prescription issues.

3. Substance Use Disorder Review Panel Decisions

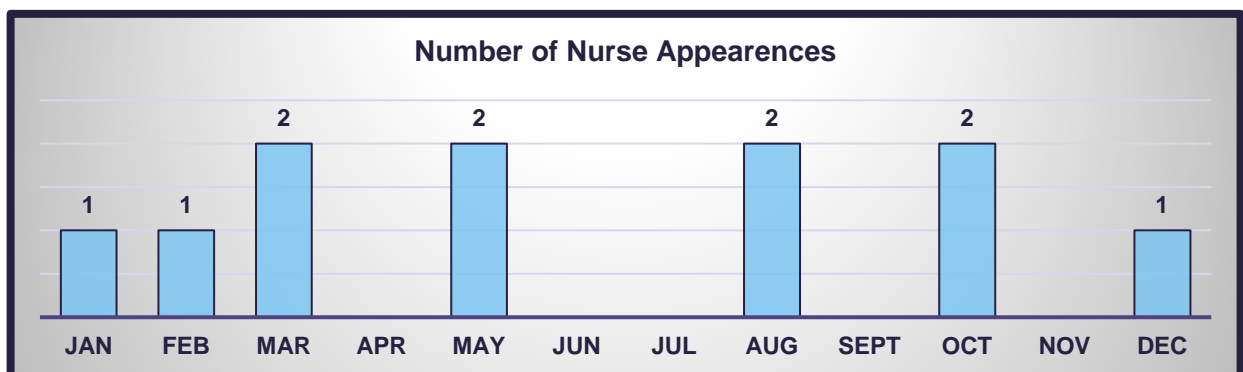


- SUDRP recommended nurses to remain in WHPS with no action on 37 referrals.
- SUDRP recommended nurses to remain in WHPS with WHPS and/or legal action on 29 referrals.



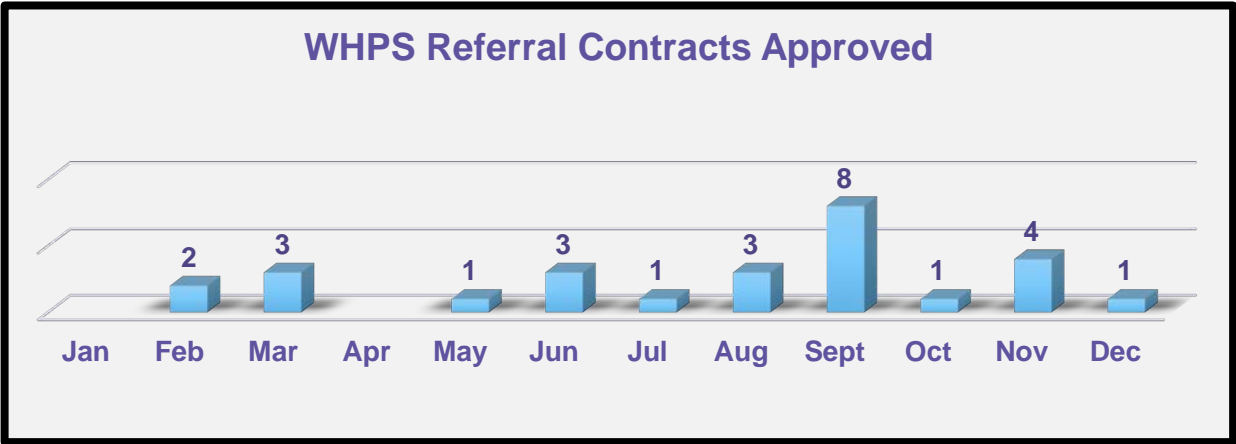
- Twelve nurses were discharged from WHPS with a statement of charges (SOC).
- Two nurses were discharged from WHPS and referred for investigation.

#### 4. Nurse Appearances at SUDRP



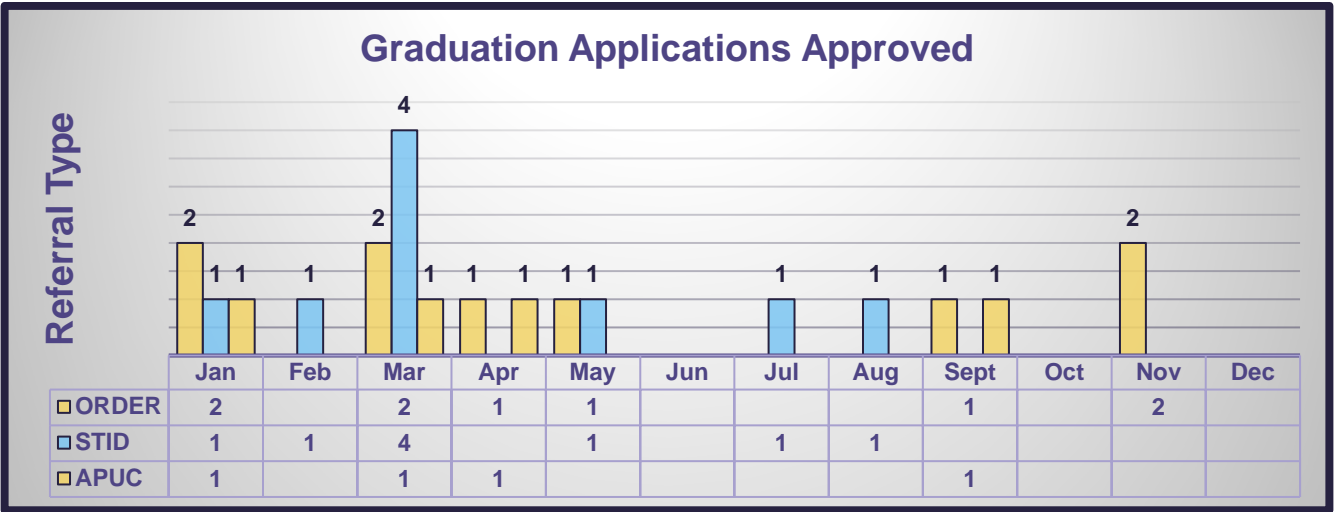
- Nurses appeared at SUDRP for the following reasons:
  - Graduation requests that require SUDRP approval associated with discipline.
  - SUDRP invites a graduating nurse to appear to discuss their WHPS program experience and receive positive recognition for successfully completing the program.
  - When a nurse requests to appear to discuss their significant non-compliance.

5. WHPS Referral Contracts Reviewed by SUDRP



- Prior to SUDRP, the Case Management Team reviewed Referral Contracts.
- SUDRP is now responsible for reviewing all Referral Contracts.
- SUDRP approved all 27 Referral Contracts.

6. WHPS Graduations Reviewed by SUDRP



- SUDRP only reviews graduation applications for nurses in the program under disciplinary action.
- SUDRP approved all 21 graduation applications.
  - Nine graduates were under an Agreed Order.
  - Nine graduates were under Stipulation to Informal Disposition (STID).
  - Four graduates were under an Agree To Practice Under Conditions (APUC).

## 7. Substance Use Disorder Review Panel Activities and Additional Information

One of the recommendations from the 2021 audit was to increase communication between nurses and the members of WABON. In July 2022, the Substance Use Disorder Review Panel (SUDRP) began holding weekly meetings to address WHPS program non-compliance, graduations, and provide a venue for WHPS nurses to speak directly with board panel members. Nurses who have requested graduation approval or have recently graduated are offered an opportunity to attend a SUDRP meeting to share their WHPS program experience. This process allows nurses and board members to communicate and interact with each other. The board members can discuss graduations as well as provide positive feedback and encouragement to nurses appearing before SUDRP due to non-compliance. Currently, the majority of nurse appearances at SUDRP were to discuss graduations, but in some cases, there have been nurses who have requested to attend a SUDRP meeting to discuss the details of their non-compliance or to request early graduation from the program. Overall, SUDRP has contributed greatly to the WHPS program and nurses participating in the program.

In 2023, the legislature passed Substitute House Bill (SHB) 1255 (RCW 18.79.440). The bill addresses two issues associated with substance use disorder (SUD): the stigma associated with SUD recovery and a stipend program which is designed to help support nurses financially who otherwise would not be able to participate in the WHPS monitoring program.

- WABON staff reviewed and updated WAC 240-840-750 through 240-840-780 to include the stipend and stigma program and name change from NCQAC to WABON.
- A staff attorney, WHPS staff, and SUDRP created WAC 240-840-790 to address the stipend process. WABON approved these changes to the rules at the November 2023 WABON meeting.
- RCW 18.79.440 (SHB 1255) allotted \$25,000 annually from the general fund (GF-S) to support the stipend program. WABON submitted a decision package for additional funding to support the stipend program that was not included in the Governor's budget.

### **2023 SUDRP Annual Report was created by:**

Alicia Payne, WHPS Case Manager

Cicely Bacon, WHPS Operations Manager

### **Review, Edits and Approval by:**

Catherine Woodard, Director of Discipline and WHPS

Grant Hulteen, Assistant Director of Discipline, WHPS



# Washington State Board of Nursing (WABON) Exploring the Advanced Practice Registered Nursing Compact for Washington State

December 12, 2023 · January 10, 2024 · January 24, 2024 · January 25, 2024

WABON hosted Advanced Practice Nurses from across the state in four workshops to explore the implications of the Advanced Practice Registered Nurse Compact (APRN Compact) in the state of Washington. There is general agreement that the concept of a national licensure compact is timely and has benefits for both patient care and Advanced Practice Nurses. However, there have been concerns expressed about specific aspects of the current National Council of State Board APRN Compact.

A brief history of the RN and LPN Nurse Licensure Compact (NLC) currently being implemented by WABON was presented. Similarities and differences between the NLC and the APRN Compact were also presented. The benefits and barriers to adoption of the APRN Compact were discussed at each workshop and are summarized below.

## Benefits

Patients - Improve access to care, continuity of care and quality of care across state lines.

Cost effective for licensees including faculty resulting in a decrease in time spent acquiring multiple state licenses with different requirements. There would also be flexibility in practice location.

Ease in transition across states would benefit military spouses and health care systems hiring ARNPs.

## Risks

The requirement of an additional 2080 clinical practice hours for new graduates prior to obtaining a multistate license imposes a non-evidence-based barrier to practice.

There is no assurance that there will be Advanced Practice Nurse representation required in the APRN Compact Commission, potentially adversely affecting the Commission governance.

Inconsistent recognition of APRN roles. Some states could join the compact that do not license Certified Nurse Midwives (CNMs), Certified Registered Nurse Anesthetists (CRNAs) or Clinical Nurse Specialist (CNSs).

## Practice Related Concerns

Patients - Controlled substance prescribing is not clearly addressed which is a gap as prescribing authority varies among states.

Definition of APRN does not account for the increased variability of scope of practice across states in advanced practice roles.

## Discipline Related Concerns

Potentially be charged criminally for care provided in compact states with unrestricted reproductive health or transgender care laws if they have a compact license from a home state with more restrictive laws.

There may be a decrease in those who voluntarily choose to enter an alternative to discipline program because those in the program are not eligible for a multistate license.

## Recommended Next Steps

- 1 | Implement a communication plan to disseminate this educational brief.
- 2 | Discuss outcomes with NCSBN and consider options to provide additional information to address identified concerns.
- 3 | Complete a deeper financial and workforce analysis to assess the impact of the APRN Compact more accurately.
- 4 | Support a workgroup to develop solutions to address the risks and explore how to provide the benefits of a licensing compact.

WABON Business Meeting  
March 8, 2024



**COMPLAINT AND REPORT FORM (NURSES)**

*Public disclosure statement: The identity of a whistleblower (patient, employee of respondent, healthcare professional) who complains, in good faith, to the Department of Health about the improper quality of care by a health care provider, or in a health care facility will not be released to the public. The Department of Health is required by law to release copies of this complaint form and/or any other documentation you submit in regard to this report upon receiving a public disclosure request. This includes releasing copies to the person you identified in the complaint/report as the nurse.*

DATE:
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**Your Information****Enter your information below.**

First Name:
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Middle Name:
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Last Name:
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**Enter your contact information below.**

Address:
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City:
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State:
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Zip:
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Daytime Phone:
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Cell Phone:
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Email Address:
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**Are you filing this complaint/report on behalf of a healthcare facility?**

	Yes
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	No
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If yes, enter the information below.

Facility name:
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Your position title:
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**Nurse Information****The complaint/report is about a(n):**

	Registered Nurse (RN)
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	Licensed Practical Nurse (LPN)
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	Advanced Registered Nurse Practitioner (ARNP)
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	Nursing Technician
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Name:	
Gender:	
<input type="checkbox"/>	Male
<input type="checkbox"/>	Female
<input type="checkbox"/>	Other/unknown

License number:
Address:
City:
State:
Zip:
Phone number:

### Patient Information

Enter information regarding the patient below.

Name:	
Gender:	
<input type="checkbox"/>	Male
<input type="checkbox"/>	Female
<input type="checkbox"/>	Other/unknown

Date of birth:
If applicable, date of death:

### Specific Report Information

Enter information about the incident below.

Date(s) of the incident:
Name of facility* where conduct/incident occurred:

\*This complaint/report will be shared with the Department of Social and Health Services (DSHS) if the conduct/incident occurred in a DSHS facility or to fulfill other reporting requirements.

Have you reported this conduct/incident to the Department of Social and Health Services (DSHS)?

<input type="checkbox"/>	Yes
<input type="checkbox"/>	No

Have you reported this conduct/incident to anyone else?

<input type="checkbox"/>	Yes
<input type="checkbox"/>	No

If yes, who did you report the conduct/incident to? Please provide:

Name(s):
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Position(s):
Date(s) you reported to them:

**Do you have documents relevant to your complaint (such as medical documents, investigative reports, test results or other relevant documentation)?\***

	Yes
	No

\*If you need to send documents: email copies to the Discipline Unit (recommended), or you may send them via the address or fax provided below.

**Did the situation involve discrimination?**

	Yes
	No

**What do you believe is the basis of the discrimination? (check all that apply)**

	Age
	Race
	Ethnic origin
	Citizenship/ Immigration status
	Religion/ Ideology
	Sex
	Weight
	Socio-economic / Housing Status
	Relationship/ Marital arrangement
	Disability (including mental, physical, developmental or learning disabilities)
	Criminal Record
	Sexual orientation
	Gender identity/ Expression
	Language/ Accent
	Close relationship with a person identified by one of the above types
	Other (Please Explain):

**Please describe the discrimination that occurred:**

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Please provide a brief summary of your specific concern(s) below.

If you are an employer or supervisor, describe the following:

Actual or potential harm to patient:

Pattern(s) of practice errors:

Prior disciplinary/counseling actions:

Corrective action taken:

Was employment terminated, or did the nurse resign in lieu of termination?

	Yes – Terminated
	No – Not Terminated
	Yes – Resigned in Lieu
	No – Did not Resign

**STATE OF WASHINGTON  
DEPARTMENT OF HEALTH**

Board of Nursing  
111 Israel Road SE, MS 47864  
Tumwater, WA 98504

**AUTHORIZATION TO RELEASE YOUR NAME & IDENTITY**

[RCW 43.70.075](#) provides in part: “The identity of a whistleblower who complains, in good faith, to the Department of Health/Washington State Board of Nursing about the improper quality of care by a health care provider, or in a health care facility, as defined in [RCW 43.72.010](#) shall remain confidential...”

I understand that my identity as the complainant may be confidential pursuant to [RCW 43.70.075](#) (DOH Whistleblower Statute). By marking the “Yes” box, I waive my right to confidentiality, and I authorize the Washington State Board of Nursing to release my identity to:

- the Nurse you filed a complaint against,
- other persons who are reasonably necessary to the investigation, and/or
- for use in any related discipline hearing resulting from your complaint.

**YOUR WAIVER AUTHORIZATION/DENIAL**

For the sole purpose of investigating my complaint and pursuing disciplinary action proceedings, I hereby waive confidentiality and consent to the release of my identity.

☐ YES

☐ NO\*


\*I understand this denial may impair the Washington State Board of Nursing’s ability to pursue investigation of this matter and any disciplinary actions.

Signature:
Date:
Printed Name: (please include middle initial)
Date of Birth:
Phone Number:

Once you have completed this form, please scan and email it to [NursingComplaints@doh.wa.gov](mailto:NursingComplaints@doh.wa.gov)

If you do not have access to email, please mail it to the address at the top of the page, attention Complaint Intake

**DEPARTMENT OF HEALTH**  
**NURSING CARE QUALITY ASSURANCE**  
**COMMISSION WASHINGTON STATE BOARD OF**  
**NURSING PROCEDURE**

<b>Title:</b>	Review of Board of Nursing Reports	<b>Number</b>	A06.110
<b>Reference:</b>			
<b>Author:</b>	Catherine Woodard Director Discipline and <del>WHPS</del> <a href="#">Washington Health Professional Services</a> <a href="#">Nursing Care Quality Assurance Commission</a> <a href="#">Washington State Board of Nursing</a>		
<b>Effective Date:</b>	<del>November 12, 2021</del> <a href="#">March 8, 2024</a>	<b>Date for Review:</b>	<del>November 4, March 8, 2024</del>
<b>Supersedes:</b>	<a href="#">November 12, 2021</a> <a href="#">May 14, 2020</a> <a href="#">May 10, 2019</a> <a href="#">July 10, 2015</a> <a href="#">July 16, 2010</a> <a href="#">March 13, 2009</a> <a href="#">July 11, 2008</a> <a href="#">July 1, 2005</a> <a href="#">January 9, 2004</a> <a href="#">July 18, 1997</a> <del>December 8, 1995; July 18, 1997; January 9, 2004; July 1, 2005; July 11, 2008; March 13, 2009; July 16, 201; July 10, 2015; May 10, 2019, May 14, 202, November 12, 2021</del>		
<b>Approved:</b>	 ARNP, PhD		
<del>Adam Canary, -LPN</del> <del>Laurie Soine, PhD, ARNP</del>  <a href="#">Interim</a> Chair <del>Nursing Care Quality Assurance Commission (NCQAC)</del> <a href="#">Washington State Board of Nursing (WABON)</a>			

**PURPOSE:**

This procedure clarifies and provides consistent review of reports to the [Washington State Board of Nursing \(WABON\)](#) ~~Nursing Care Quality Assurance Commission (NCQAC)~~ alleging harm, injury, misconduct, and crimes. This procedure assures a consistent response to

allegations of practice violations that affect the health and safety of the public.

## **PROCEDURE:**

~~The NCQAC~~WABON uses a Case Management Team (CMT) to assess initial reports. Team members must include a panel of three ~~NCQAC-WABON~~ members (one of them a public member) with ~~delegated decision~~delegated decision-making authority, legal manager or designated staff attorney, ~~chief investigator~~investigations supervisor or designated investigator, and discipline case manager or designated staff member.

CMT determines if the report is within ~~the NCQAC's~~WABON's statutory authority. When ~~the NCQAC's-WABON's~~ authority is apparent, the CMT panel authorizes investigation of cases meeting the above-threshold criteria or closes cases that are below threshold. The CMT panel may also refer appropriate cases to the Early Remediation Program (ER) described in ~~NCQAC-WABON~~ Procedure A34.

The following lists are guidelines; any case may be opened based on case details. The CMT panel discusses and uses its own judgment to open or close the case.

## OPEN FOR INVESTIGATION

1. Drug diversion
2. Impairment at work related to use or abuse of prescription or non-prescription drugs, or alcohol.
3. Substance use affecting ability to practice safely or narcotic use with impairment.
4. Sexual misconduct.
5. Practice error resulting in harm or unreasonable risk of harm.
6. Physical and verbal abuse.
7. Negligence that leads to patient death.
8. Mental incapacity or illness with harm to patient or likelihood of harm.
- ~~9.~~ Gross misdemeanor or felony crimes.
- ~~9-10.~~ Misdemeanor crimes related to the practice of nursing if the nurse holds a multistate license.
- ~~10-11.~~ Pattern of incompetence.
- ~~11-12.~~ Beyond the scope of practice.
- ~~12-13.~~ Practice with an expired license for more than six6 months.
- ~~13-14.~~ Pattern of errors (three or more like instances over a 12-month period) (*Open all previous complaints that demonstrate a pattern of behavior.*)
- ~~14-15.~~ Falsification of records including license applications.
- ~~15-16.~~ Inappropriate delegation.
- ~~16-17.~~ Negligent supervision resulting in an unreasonable risk of serious harm to a patient or resulting in serious harm to a patient.
- ~~17-18.~~ Verbal threats to include physical harm and/or psychological harm.
- ~~19.~~ Engaging in Dissemination of misinformation that may cause serious risk of harm.
- ~~18-20.~~ Discrimination.

## CASES WHICH MAY BE APPROPRIATE FOR EARLY REMEDIATION (see Procedure A34)

1. Respondent “acknowledges” the practice error and seeks alternatives to avoid future errors. This does not require the respondent to admit to the allegations. ~~“admission.”~~
2. Documentation errors that are careless, or recurrent, but do not rise to intentionally falsifying the ~~record~~ record.
3. Communication breakdowns, such as errors in transcribing orders.
4. Failure to provide patient safety concerns at shift change.
5. Rude and non-therapeutic communication with patients and family members.
6. Substandard nursing practice.
7. Failure to properly conduct a patient assessment, document treatment, or administer medications.
- ~~8.~~ Failure to comply with scope of practice requirements or delegation laws and regulations.
- ~~8-9.~~ Discrimination.

## BELOW THRESHOLD

1. Any single occurrence reported with no harm to patient, nor prior pattern of complaints.
2. Single report of diversion of non-potential dependence producing drugs.
3. Reports where the facility documents corrective action and on-going monitoring of practice.
4. Misdemeanor crimes unless it is related to the practice of nursing and the nurse holds a multistate license. -
5. Falsification of employer documents not related to patient safety.



6. Violating confidentiality, e.g. HIPAA.
7. Reports of mental/emotional issues where no inappropriate conduct or behaviors in practice are present.
8. Inappropriate delegation to an unlicensed person that does not involve invasive procedures or piercing of skin (e.g., RN instructs nursing assistants to apply skin cream).
9. Practice with an expired license for six months or less.
10. Nursing error, which results in minor discomfort with no sequela, nor a transient problem.
11. Failure to supervise resulting in no harm or minor harm to a patient.
12. Communication issues not involving verbal abuse or patient harm.
13. Demonstrated lack of credibility of the complainant.
14. Failure to report a change in patient status or to respond to change in a patient's condition resulting in no patient harm.
15. Isolated incident where negligence caused minimal harm to the patient, and the nurse accepted responsibility and obtained help, or the employer took corrective action.
16. Insufficient information provided.
17. Doesn't appear to be a violation of nursing law.
18. Lack of jurisdiction.
19. Termination of employment based solely on failing to meet the governor's vaccination mandate during a declared emergency with no practice involvement.

Below-threshold closures may include incidents with no harm or minimal harm.

If there are three or more below-threshold reports of similar actions within 12 months, all previous related reports that demonstrate a pattern of behavior should be re-opened and forwarded for investigation.

~~Approved 12/8/95~~

~~Revised 7/18/97~~

~~Revised 3/9/01~~

~~Revised 1/9/04~~

~~Revised 7/1/05~~

~~Revised 7/11/08~~

~~Revised 3/13/09~~

~~Revised 7/16/2011~~

~~Revised /26/2019~~

~~Revised 10/19/21~~

~~Revised 03/08/24~~

**DEPARTMENT OF HEALTH  
WASHINGTON STATE BOARD OF NURSING  
PROCEDURE**

<b>Title:</b>	Review of Board of Nursing Reports	<b>Number</b>	A06.11
<b>Reference:</b>			
<b>Author:</b>	Catherine Woodard Director Discipline and Washington Health Professional Services Washington State Board of Nursing		
<b>Effective Date:</b>	March 8, 2024	<b>Date for Review:</b>	March 8, 2026
<b>Supersedes:</b>	November 12, 2021 May 14, 2020 May 10, 2019 July 10, 2015 July 16, 2010 March 13, 2009 July 11, 2008 July 1, 2005 January 9, 2004 July 18, 1997 December 8, 1995		
<b>Approved:</b>			
Adam Canary, LPN Interim Chair Washington State Board of Nursing (WABON)			

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16. Inappropriate delegation.
17. Negligent supervision resulting in an unreasonable risk of serious harm to a patient or resulting in serious harm to a patient.
18. Verbal threats to include physical harm and/or psychological harm.
19. Dissemination of misinformation that may cause serious risk of harm.
20. Discrimination.

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9. Discrimination.

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**DEPARTMENT OF HEALTH**  
~~**NURSING CARE QUALITY ASSURANCE COMMISSION**~~ **WASHINGTON**  
**STATE BOARD OF NURSING**  
**PROCEDURE**

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**Title:** Substance Use Orders **Number:** A20.124

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**Reference:** [RCW 18.130.175](#);  
[RCW 18.130.170](#);  
[RCW 18.130.180](#);  
[WAC 246-840-780](#);  
[WAC 246-840-770](#);  
[WAC 246-840-740](#)

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**Author:** Catherine Woodard  
Director  
~~Discipline and Washington Health Professional Services~~  
~~Nursing Care Quality Assurance Commission~~ Washington State Board of  
Nursing

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**Effective Date:** March ~~8+1~~, 2024 ~~2~~  
20264 **Date for Review:** March ~~8+1~~,

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**Supersedes:** [July 14, 2017](#)  
[September 13, 2013](#)  
[September 9, 2011](#)  
[July 1, 2005](#)  
[March 11, 2005](#)  
[July 15, 2000](#)  
[April 14, 2000](#)  
[March 11, 2022](#)  
[July 15, 2000](#)  
[April 14, 2000](#)  
[July 14, 2017](#)  
[September 13, 2013](#)  
[September 9, 2011](#)  
[July 1, 2005](#)  
[March 11, 2005](#)

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**Approved:**

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~~Laurie Soine, PhD, ARNP~~ Adam Canary, LPN;  
~~-Interim Chair~~

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## POLICY PURPOSE:

The ~~Nursing Care Quality Assurance Commission (NCQAC)~~ Washington State Board of Nursing (WABON) supports the following principles:

- Safeguarding the public's health and safety is the paramount responsibility of ~~the NCQAC~~ WABON.
- Substance ~~u~~Use ~~d~~Disorder (SUD) is a treatable condition.
- Appropriate treatment can save a nurse's career, license, and even ~~his/her~~their life.
- Participation in a structured monitoring program supports recovery while providing maximal protection of public safety.
- Monitoring nurses with SUD requires specialized education and knowledge.
- Public protection is best addressed through consistent approaches to discipline.

When an investigation reveals serious misconduct, ~~the NCQAC~~ WABON may take disciplinary action to protect the public, instead of or in addition to requiring completion of a monitoring contract. Serious misconduct may include, but not be limited to:

- Abuse of a patient.
- Theft of money or property (other than drugs) from a patient or family member.
- Arrest or conviction as defined in Procedure A21, *Decision Making Criteria for License Applications*.
- Sexual contact or boundary violations as defined in WAC 246-840-740.
- Gross incompetence seemingly not related to drug or alcohol use.
- Diversion of drugs by replacing a drug with another substance (tampering).
- Prescribing, selling, or distributing drugs to others, when ~~re~~ not personally using or having an active SUD.

This procedure does not prohibit expedited case closure at the case management level when appropriate, per Procedure A22, *Expedited Case Disposition*.

While ~~the NCQAC~~ WABON maintains full authority to tailor sanctions to individual cases, the approaches outlined below provide a basis for decision making.

## PROCEDURE:

### I. Referral to Washington Health Professional Services (WHPS)

In cases of substantiated or likely substance misuse, the nurse may be referred to the Washington Health Professional Services Program (WHPS).

A. ~~1.~~ During the course of an investigation, the investigator may offer the nurse ~~may be offered the an~~ opportunity to sign a WHPS Referral Contract if the nurse meets certain conditions and is approved by WABON, per Procedure A49, *Substance Abuse Referral Contract*.

- ~~1.~~ When the nurse enters WHPS and signs a WHPS Referral Contract, the nurse is referred to the monitoring program “in lieu of discipline,” and WABON may close the discipline case ~~may be closed~~ as a Unique Closure.

B. ~~2.~~ When a completed investigation reveals evidence of substance misuse and the nurse has not signed a WHPS Referral Contract, ~~the NCQAC~~ WABON may offer the nurse:

- ~~1. The nurse~~ T the opportunity to sign a WHPS Referral Contract; or
- ~~2.~~ A Statement of Allegations with a Stipulation to Informal Disposition (STID) requiring the nurse to contact WHPS.
- ~~C.~~ When the nurse fails to enter WHPS with a referral contract, or fails to sign a STID, ~~the NCQAC~~ WABON may issue a Statement of Charges (SOC). Charges can be settled with an Agreed Order (AO) to enter and satisfactorily complete the WHPS program.

D. ~~3.~~ When a nurse proceeds to a hearing where it is determined the nurse committed unprofessional conduct with a finding that the nurse misused drugs or alcohol or other finding substantiating an SUD, and the nurse has declined to enter/reenter the WHPS program, ~~the NCQAC~~ WABON may recommends ~~at the~~ Final Order to impose an indefinite suspension. Any petition for reinstatement requires evidence of at least 12 consecutive months of sobriety.

## II. WHPS Referral to ~~the NCQAC from WHPS~~ WABON and the Substance Use Disorder Review Panel (SUDRP)

In the event WHPS ~~that a nurse is referred~~ refers a nurse to the NCQAC WABON through SUDRP for reportable non-compliance with their monitoring contract (see Procedure W30 *Confidentiality, Records Management, and Security* and W32, *Program Non-compliance and Discharge Criteria* ) the following guidelines apply:

~~1.A.~~ When WHPS refers a nurse who is in WHPS in lieu of discipline or under a STID, Order, or APUC ~~is reported to the NCQAC to~~ WABON for noncompliance with the terms of their monitoring contract, the case is referred to ~~the Substance Use Disorder Review Panel~~ SUDRP for further action. The SUDRP has the option to require the nurse to attend a non-public “compliance appearance” before the panel.

~~2.B.~~ Continued program participation with additional conditions, in lieu of disciplinary action, is encouraged when there is no evidence of misconduct related to nursing practice.

~~3.C.~~ When there is evidence of impaired practice, the SUDRP ~~may should~~ authorize a Statement of Charges (SOC) and propose an Agreed Order (AO). The SOC may charge the underlying drug related misconduct as well as any misconduct pertaining to non-compliance. Additionally, the SOC may also charge a violation of the WHPS Referral Contract, which is a violation of RCW 18.130.180 (7) and WAC 246-840-780.



4.D. The AO ~~may~~should require participation in WHPS and compliance with all treatment and monitoring conditions. The term of the AO will be satisfied when the nurse successfully completes WHPS and all imposed conditions of the AO.

5.E. When WHPS refers a nurse who is in WHPS under an AO ~~is reported~~ to the SUDRP for noncompliance with the terms of their monitoring contract and is deemed unable to practice with reasonable skill and safety, the SUDRP may proceed with a Motion for Hearing on noncompliance (~~f~~Fast track). The action results in an indefinite suspension. To petition for reinstatement, the nurse must demonstrate:

- ♦1. At least 12 consecutive months of abstinence documented by random observed drug testing, to include ETG/ETS (at least 12 tests per year), by an independent, licensed testing entity.
- ♦2. Completion of chemical dependency treatment, ~~and~~
- ♦3. Consistent Participation in recovery support meetings.

**DEPARTMENT OF HEALTH  
WASHINGTON STATE BOARD OF NURSING  
PROCEDURE**

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<b>Title:</b>	Substance Use Orders	<b>Number:</b>	A20.12
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<b>Reference:</b>	<a href="#">RCW 18.130.175</a> <a href="#">RCW 18.130.170</a> <a href="#">RCW 18.130.180</a> <a href="#">WAC 246-840-780</a> <a href="#">WAC 246-840-770</a> <a href="#">WAC 246-840-740</a>
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<b>Author:</b>	Catherine Woodard Director Discipline and Washington Health Professional Services Washington State Board of Nursing
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<b>Effective Date:</b>	March 8, 2024	<b>Date for Review:</b>	March 8, 2026
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<b>Supersedes:</b>	March 11, 2022 July 15, 2000 April 14, 2000 July 14, 2017 September 13, 2013 September 9, 2011 July 1, 2005 March 11, 2005
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**Approved:**

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Adam Canary, LPN  
Interim Chair  
Washington State Board of Nursing (WABON)

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**PURPOSE:**

The Washington State Board of Nursing (WABON) supports the following principles:

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- Substance use disorder (SUD) is a treatable condition.
- Appropriate treatment can save a nurse's career, license, and even their life.

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- Monitoring nurses with SUD requires specialized education and knowledge.
- Public protection is best addressed through consistent approaches to discipline.

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- Prescribing, selling, or distributing drugs to others, when not personally using or having an active SUD.

This procedure does not prohibit expedited case closure at the case management level when appropriate, per Procedure A22, *Expedited Case Disposition*.

While WABON maintains full authority to tailor sanctions to individual cases, the approaches outlined below provide a basis for decision making.

## **PROCEDURE:**

### **I. Referral to Washington Health Professional Services (WHPS)**

In cases of substantiated or likely substance misuse, the nurse may be referred to the Washington Health Professional Services Program (WHPS).

A. During the course of an investigation, the investigator may offer the nurse an opportunity to sign a WHPS Referral Contract if the nurse meets certain conditions and is approved by WABON, per Procedure A49, *Substance Abuse Referral Contract*.

1. When the nurse enters WHPS and signs a WHPS Referral Contract, the nurse is referred to the monitoring program “in lieu of discipline,” and WABON may close the discipline case as a Unique Closure.

B. When a completed investigation reveals evidence of substance misuse and the nurse has not signed a WHPS Referral Contract, WABON may offer the nurse:

1. The opportunity to sign a WHPS Referral Contract; or
2. A Statement of Allegations with a Stipulation to Informal Disposition (STID) requiring the nurse to contact WHPS.

- C. When the nurse fails to enter WHPS with a referral contract, or fails to sign a STID, WABON may issue a Statement of Charges (SOC). Charges can be settled with an Agreed Order (AO) to enter and satisfactorily complete the WHPS program.
- D. When a nurse proceeds to a hearing where it is determined the nurse committed unprofessional conduct with a finding that the nurse misused drugs or alcohol or other finding substantiating an SUD, and the nurse has declined to enter/reenter the WHPS program, WABON may recommend a Final Order to impose an indefinite suspension. Any petition for reinstatement requires evidence of at least 12 consecutive months of sobriety.

## **II. WHPS Referral to WABON and the Substance Use Disorder Review Panel (SUDRP)**

In the event WHPS refers a nurse to WABON through SUDRP for reportable non-compliance with their monitoring contract (see Procedure W30 *Confidentiality, Records Management, and Security* and W32, *Program Non-compliance and Discharge Criteria* ) the following guidelines apply:

- A. When WHPS refers a nurse who is in WHPS in lieu of discipline or under a STID, Order, or APUC to WABON for noncompliance with the terms of their monitoring contract, the case is referred to SUDRP for further action. The SUDRP has the option to require the nurse to attend a non-public “compliance appearance” before the panel.
- B. Continued program participation with additional conditions, in lieu of disciplinary action, is encouraged when there is no evidence of misconduct related to nursing practice.
- C. When there is evidence of impaired practice, the SUDRP may authorize a Statement of Charges (SOC) and propose an Agreed Order (AO). The SOC may charge the underlying drug related misconduct as well as any misconduct pertaining to non-compliance. Additionally, the SOC may also charge a violation of the WHPS Referral Contract, which is a violation of RCW 18.130.180 (7) and WAC 246-840-780.
- D. The AO may require participation in WHPS and compliance with all treatment and monitoring conditions. The term of the AO will be satisfied when the nurse successfully completes WHPS and all imposed conditions of the AO.
- E. When WHPS refers a nurse who is in WHPS under an AO to the SUDRP for noncompliance with the terms of their monitoring contract and is deemed unable to practice with reasonable skill and safety, the SUDRP may proceed with a Motion for Hearing on noncompliance (fast track). The action results in an indefinite suspension. To petition for reinstatement, the nurse must demonstrate:
  1. At least 12 consecutive months of abstinence documented by random observed drug testing, to include ETG/ETS (at least 12 tests per year), by an independent, licensed testing entity.
  2. Completion of chemical dependency treatment.
  3. Consistent participation in recovery support meetings.

**DEPARTMENT OF HEALTH  
WASHINGTON STATE BOARD OF NURSING  
PROCEDURE**

<b>Title:</b>	Student Engagement with Board of Nursing	<b>Number:</b>	R02. <del>04</del> <u>04</u>
<b>Author:</b>	Mary Sue Gorski, RN, PhD, Director Research Washington State Board of Nursing (WABON)		
<b>Effective Date:</b>	March 8, <del>20</del> <u>24</u>	<b>Date for Review:</b>	March 8, 2026
<b>Supersedes:</b>	R02.03 – January 14, 2022 R02.02 - July 12, 2019 <del>R02.01 – NA</del>		

**Approved:**

~~Adam Canary, LPN  
Interim Chair  
Washington State Board of Nursing (WABON)  
Adam Canary, LPN  
Interim Chair  
Washington State Board of Nursing (WABON)~~

**PURPOSE:**

The purpose of this procedure is to standardize the processes for student orientation and engagement with the Washington State Board of Nursing (WABON) and the Department of Health (DOH).

**PROCEDURE:**

**I. Students will:**

- ~~1.A.~~ Engage in orientation to the DOH in a similar process as the orientation for volunteers.
- ~~2.B.~~ Complete and sign the confidentiality agreement.
- ~~3.C.~~ Review the Washington State Institutional Review Board (WSIRB) procedures and submit their proposal to the WSIRB if appropriate.
- ~~4.D.~~ Work with their mentor/supervisor to develop objectives to facilitate their learning and meet WABON goals.
- ~~5.E.~~ Present findings at the end of the engagement to an appropriate staff group, WABON subcommittee, or the full WABON business meeting.
- F. Complete an evaluation of their experiences and submit it to the Research Subcommittee administrative staff.

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~~6.~~  
**II. Mentors/supervisors will:**

- ~~1.~~A. Work with the students to ~~assure~~ensure orientation processes are completed.
- ~~2.~~B. Submit the student's name, school, short project summary and timeline at the beginningof the engagement to the Research Subcommittee and Administrative staff.
- ~~3.~~C. Submit the student's name, school, and short project summary at the conclusion of theengagement to the Research Subcommittee Administrative staff.
- ~~D.~~ Complete an evaluation of their experiences and submit it to the Research Subcommittee administrative staff.

~~4.~~  
**III. Research Subcommittee Members will:**

- ~~1.~~ Review the evaluations annually, report findings to the full WABON and
- ~~A.~~ advise on changes as indicated.
- ~~2.~~B. Give input on projects as requested by students or mentors/supervisors.

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**DEPARTMENT OF HEALTH  
WASHINGTON STATE BOARD OF NURSING  
PROCEDURE**

<b>Title:</b>	Student Engagement with Board of Nursing	<b>Number:</b>	R02.04
<b>Author:</b>	Mary Sue Gorski, RN, PhD, Director Research Washington State Board of Nursing (WABON)		
<b>Effective Date:</b>	March 8, 2024	<b>Date for Review:</b>	March 8, 2026
<b>Supersedes:</b>	R02.03 – January 14, 2022 R02.02 - July 12, 2019 R02.01 – NA		
<b>Approved:</b>			
	Adam Canary, LPN Interim Chair Washington State Board of Nursing (WABON)		

**PURPOSE:**

The purpose of this procedure is to standardize the processes for student orientation and engagement with the Washington State Board of Nursing (WABON) and the Department of Health (DOH).

**PROCEDURE:**

**I. Students will:**

- A. Engage in orientation to the DOH in a similar process as the orientation for volunteers.
- B. Complete and sign the confidentiality agreement.
- C. Review the Washington State Institutional Review Board (WSIRB) procedures and submit their proposal to the WSIRB if appropriate.
- D. Work with their mentor/supervisor to develop objectives to facilitate their learning and meet WABON goals.
- E. Present findings at the end of the engagement to an appropriate staff group, WABON subcommittee, or the full WABON business meeting.
- F. Complete an evaluation of their experiences and submit it to the Research Subcommittee administrative staff.

**II. Mentors/supervisors will:**

- A. Work with the students to ensure orientation processes are completed.
- B. Submit the student's name, school, short project summary and timeline at the beginning of the engagement to the Research Subcommittee and Administrative staff.
- C. Submit the student's name, school, and short project summary at the conclusion of the engagement to the Research Subcommittee Administrative staff.
- D. Complete an evaluation of their experiences and submit it to the Research Subcommittee administrative staff.

**III. Research Subcommittee Members will:**

- A. Review the evaluations annually, report findings to the full WABON and advise on changes as indicated.
- B. Give input on projects as requested by students or mentors/supervisors.



AMENDATORY SECTION (Amending WSR 16-17-082, filed 8/17/16, effective 9/17/16)

**WAC 246-840-534 Use of simulation for clinical experiences in LPN, RN, or RN to BSN nursing education programs located in Washington state.** (1) An LPN, RN, or RN to BSN nursing education program may use simulation as a substitute for traditional clinical experiences in WAC 246-840-531 at a 1:1 ratio, where one hour of simulation counts for one hour of required clinical experience, after approval by the ~~((commission))~~ board, not to exceed ~~((fifty))~~ 50 percent of its clinical hours for a particular course.

(a) Simulation as used in this section means a technique to replace or amplify real experiences with guided experiences evoking or replicating substantial aspects of the real world in a fully interactive manner.

(b) The nursing education program shall have an organizing framework providing adequate fiscal, human, technological, and material resources to support the simulation activities.

(c) Simulation activities must be managed by an individual who is academically and experientially qualified and who demonstrates currency and competency in the use of simulation while managing the simulation program.

(d) The nursing education program shall have a budget sustaining simulation activities and training of the faculty.

(e) The nursing education program shall have appropriate facilities, educational and technological resources and equipment to meet the intended objectives of the simulation.

(f) All faculty involved in simulations, both didactic and clinical, shall have training in the use of simulation and shall engage in ongoing professional development in the use of simulation.

(g) Faculty to student ratios in the simulation lab must be in the same ratio as identified in WAC 246-840-532 for clinical learning experiences.

(2) Faculty shall organize clinical and practice experiences based on the educational preparation and skill level of the student.

(3) Qualified simulation faculty must supervise and evaluate student clinical and practice experiences.

(a) The nursing education program shall demonstrate that simulation activities are linked to programmatic outcomes.

(b) The nursing education program shall have written policies and procedures on the following:

(i) Short-term and long-term plans for integrating simulation into the curriculum;

(ii) An identified method of debriefing each simulated activity; and

(iii) A plan for orienting faculty to simulation.

(c) Debriefing as used in this section means an activity following a simulation experience that is led by a facilitator, encourages reflective thinking, and provides feedback regarding the participant's performance.

(d) The nursing education program shall develop criteria to evaluate simulation activities.

(e) Students shall evaluate the simulation experience on an ongoing basis.

(f) The program shall include information about use of simulation in its annual report to the ~~((commission))~~ board.

## NEW SECTION

**WAC 246-840-5341 Use of simulation for clinical experiences at a 1:2 ratio in LPN, RN, or RN to BSN nursing education programs located in Washington state.** (1) This section applies to LPN, RN, or RN to BSN nursing education programs providing simulation-based learning experiences as a substitute for clinical and direct patient care experience hours required in WAC 246-840-531 at a 1:2 ratio, where one hour of simulation counts for two hours of required clinical and direct patient care experiences.

(2) Definitions. For the purposes of this section, these terms shall have the following meaning:

(a) **"Active engagement"** means each student maintains a level of engagement that is conducive to the students' achievement of learning objectives.

(b) **"Active observer"** means a student that is engaged in the clinical scenario by observing the active participants and providing feedback that contributes to the students' achievement of learning objectives.

(c) **"Active participant"** means a student that is directly engaged in the clinical scenario by way of a role assignment that contributes to the students' achievement of learning objectives.

(d) **"Context"** means a simulation-based learning experience should be contextualized within a situation or backstory to provide a realistic starting point from which the structured activity begins. The complete picture of this context may be given verbally to the learners, found in the patient's file, or be revealed if requested through adequate inquiry.

(e) **"Fidelity"** means the level of realism associated with a particular simulation-based learning experience; fidelity can involve a variety of dimensions, including:

(i) Physical factors such as environment, equipment, and related tools;

(ii) Psychological factors such as emotions, beliefs, and self-awareness of participants;

(iii) Social factors such as participant and instructor motivation and goals;

(iv) Culture of the group; and

(v) Degree of openness and trust, as well as participants' modes of thinking.

(f) **"High stakes evaluation"** means an evaluation that has major implications or consequences based on the result or the outcome, such as merit pay, progression, or grades.

(g) **"Screen-based simulation"** means a simulation presented on a computer screen using graphical images and text, similar to the popular gaming format, where the learner interacts with the interface using keyboard, mouse, joystick, or other input device.

(h) **"Simulation"** means an educational technique that replaces or amplifies real experiences with guided experiences that evoke or replicate substantial aspects of the real world in a fully interactive manner.

(i) **"Simulation-based learning experiences"** means structured facilitated activities that represent actual or potential situations that allow students to demonstrate, develop, or enhance knowledge, skills, or attitudes and provide an opportunity to analyze and respond to realistic situations in a simulated environment. Simulation-based

learning experiences include the entire set of actions and events from initiation to termination of an individual simulation event. For purposes of counting simulation hours using 1:2 ratio, simulation-based learning experiences include the synchronously facilitated prebriefing, clinical scenario, and debriefing, but do not include asynchronous preparation activities such as readings or case reviews.

(j) **"Simulation operations support personnel"** means an individual who is involved in the preparation, operations, implementation, or delivery of the simulation-based learning experience but does not have primary responsibility for the experience. Responsibilities may include, but are not limited to, preparing the environment, operating equipment and technology, and voicing roles.

(3) Simulation-based learning experience hours may not exceed 50 percent of clinical hours for a particular course. The board may grant exceptions to a nursing education program demonstrating difficulty in locating clinical placement for a particular curriculum content area required by WAC 246-840-539 and 246-840-541, or 246-840-542.

(4) Screen-based simulation hours may not be counted for clinical hours at the 1:2 ratio.

(5) A simulation-based learning experience can include the use of immersive augmented reality or virtual reality so long as it is synchronously facilitated.

(6) Group size shall be limited to the number of students who can be actively engaged in a simulation-based learning experience such that it is conducive to learning, and shall not exceed 10 students for every one nursing faculty member who facilitates a simulation-based learning experience. Each student shall participate in the hands-on nurse role in each simulation-based learning experience and when not in that role, as an active observer or active participant in another role that contributes to the students' achievement of learning objectives. The program shall have a plan for ensuring active engagement of all students that includes participation of each student in the hands-on nurse role and use of an observer engagement tool.

(7) The nursing faculty member who facilitates a simulation-based learning experience must not have operational responsibilities.

(8) The nursing education program must obtain and maintain endorsement or accreditation from an organization that provides endorsement or accreditation in health care simulation and is approved by the board. A nursing education program offering simulation at a 1:2 ratio on or after the effective date of this rule must obtain board-approved certification or endorsement on or before July 1, 2029. After July 1, 2029, a nursing education program must obtain board-approved endorsement or accreditation prior to offering simulation-based learning experiences to students at a 1:2 ratio. New nursing education programs receiving full board approval must obtain board-approved endorsement or accreditation within four years of receiving full board approval.

(9) The nursing education program shall have:

(a) A strategic plan for the simulation program;

(b) A plan to manage simulation space, equipment, and personnel resources for the simulation program;

(c) Policies and procedures to support and sustain the simulation program; and

(d) Defined qualifications of simulation operation support personnel.

(10) The simulation program must be managed by an individual who has all of the academic and experiential qualifications required of nursing faculty. The simulation program manager must also hold a Cer-

tified Healthcare Simulation Educator (CHSE) certification, Certified Healthcare Simulation Educator-Advanced certification (CHSE-A), or other board-approved certification in simulation on or before July 1, 2029. After July 1, 2029, the simulation program manager must have and maintain board-approved health care simulation educator certification prior to initiating simulation program management duties.

(11) On or before July 1, 2029, at least 10 percent of nursing faculty who facilitate simulation-based learning experiences must hold a CHSE or CHSE-A certification, or other board-approved certification in simulation. After July 1, 2029, at least 10 percent of nursing faculty who facilitate simulation-based learning experiences must hold a board-approved health care simulation educator certification prior to initiating simulation facilitation duties.

(12) The board may grant an exception to the requirement that the simulation program manager and the requirement that at least 10 percent of nursing faculty who facilitate simulation-based learning experiences must hold a board-approved certification if the following conditions are met:

(a) The program has a written plan for the simulation faculty and simulation program manager to obtain CHSE, CHSE-A certification, or other board-approved certification, within three years of application for exception;

(b) The simulation program manager and simulation faculty participate in professional development under subsection (15) of this section; and

(c) Evidence of orientation, mentorship, and evaluation of the simulation faculty and the simulation program manager is maintained and available to the board for review upon request.

(13) All nursing faculty who facilitate simulation-based learning experiences must be academically and experientially qualified and demonstrate competency in the use of simulation. Accordingly, nursing education programs shall document:

(a) Nursing faculty who facilitate simulation-based learning experiences have specific knowledge and skills in simulation pedagogy;

(b) The facilitative approach is appropriate to the level of learning, experience, and competency of the students; and

(c) Facilitation occurs throughout the simulation-based learning experience which aims to support students in achieving expected outcomes. The facilitation methods include prebriefing to prepare students for the simulation, and a debriefing, feedback session, or guided reflection exercise.

The nursing education program may maintain documentation of simulation nursing faculty's current CHSE, CHSE-A, or other board-approved certification as proof of compliance with subsection (12)(a) and (b) of this section.

(14) The nursing education program shall have a written plan to orient, mentor, and evaluate nursing faculty who facilitate simulation-based learning experiences and the simulation program manager.

(15) For nursing faculty who facilitate simulation-based learning experiences and do not hold current CHSE, CHSE-A, or other board-approved certification, the nursing education program shall provide a means for faculty participation in simulation-related professional development that includes:

(a) A simulation-related educational needs assessment;

(b) An annual professional development plan; and

(c) At least eight hours of simulation-related professional development per year. Professional development includes activities that

reasonably contribute to the professional knowledge and development of faculty for purposes of providing simulation-based learning experiences to students.

(16) The nursing education program shall ensure evidence that the simulation-based learning experiences are:

(a) Student-centered and evidence-based;

(b) Aligned with appropriate and measurable student learning objectives;

(c) Designed to include context and the appropriate level of fidelity; and

(d) Supportive of the students' psychological safety.

(17) The nursing education program shall have a written plan for evaluation of the student, the simulation-based learning experience, and facilitation of the simulation-based learning experience as follows. The evaluation data shall be used for continuous quality improvement, including to inform group size.

(a) When using simulation-based learning experiences for evaluation of students, the method of evaluation shall be determined before the simulation-based experience and criteria for formative, summative, and high-stakes evaluation are met;

(b) All learners shall provide a meaningful assessment of all elements of each simulation-based learning experience including prebrief, clinical scenario, debrief, and facilitation by the faculty;

(c) All learners shall provide a meaningful assessment of their engagement and achievement of learning objectives while in the hands-on nurse, active participant, and active observer roles in each simulation-based learning experience; and

(d) Nursing faculty shall provide a meaningful assessment of each simulation-based learning experience including prebrief, clinical scenario, debrief, facilitation, design, and student achievement of the learning objectives.

(18) If documentation required by this section is also required to maintain board-approved endorsement or accreditation in health care simulation, then that documentation may serve as proof of compliance with this section.

(19) Nursing education programs may not use a 1:2 ratio if:

(a) The program is on conditional approval from the board under WAC 246-840-558;

(b) The program is on conditional or probationary status from a nursing accrediting body;

(c) The program's first time NCLEX pass rates are below 80 percent for two consecutive years; or

(d) The program is on a plan of correction for a deficiency related to providing simulation-based learning experiences at either a 1:1 ratio under WAC 246-840-534 or a 1:2 ratio under WAC 246-840-5341.

(20) The board may take action as identified in WAC 246-840-558 against a nursing education program offering simulation-based learning experiences at a 1:2 ratio that does not obtain or maintain a board-approved endorsement or accreditation as required by this section.



# PROPOSED RULE MAKING

**CR-102 (July 2022)**  
**(Implements RCW 34.05.320)**  
 Do **NOT** use for expedited rule making

## CODE REVISER USE ONLY

OFFICE OF THE CODE REVISER  
 STATE OF WASHINGTON  
 FILED

**DATE: January 18, 2024**

**TIME: 3:58 PM**

**WSR 24-03-103**

**Agency:** Department of Health - Board of Nursing

☒ **Original Notice**

☐ **Supplemental Notice to WSR**

☐ **Continuance of WSR**

☒ **Preproposal Statement of Inquiry was filed as WSR 23-11-143; or**

☐ **Expedited Rule Making--Proposed notice was filed as WSR \_\_\_\_\_; or**

☐ **Proposal is exempt under RCW 34.05.310(4) or 34.05.330(1); or**

☐ **Proposal is exempt under RCW \_\_\_\_\_.**

**Title of rule and other identifying information:** (describe subject) Initial licensure via an out-of-state traditional nursing education program approved by another U.S. nursing board and applicants applying via interstate endorsement. The Washington State Board of Nursing (board) is proposing amendments to WAC 246-840-030 and WAC 246-840-090 to clarify specific licensing requirements for out-of-state Registered Nurse (RN) and Licensed Practical Nurse (LPN) applicants.

### Hearing location(s):

<b>Date:</b>	<b>Time:</b>	<b>Location: (be specific)</b>	<b>Comment:</b>
March 8, 2024	1:15 PM	<p><b>Physical location:</b></p> <p>Department of Health            Town Center 2, RM 166/167            111 Israel Rd S.E.            Tumwater, WA 98501</p> <p><b>Virtual:</b></p> <p>Please follow this link to register for the virtual hearing which will give you instructions to either join the meeting on a device, or to call in to the meeting on the phone:</p> <p><a href="https://us02web.zoom.us/join/register/tZwodOyrrTsoHNEiRA6XBdlyqCc4Yztsa5A">https://us02web.zoom.us/join/register/tZwodOyrrTsoHNEiRA6XBdlyqCc4Yztsa5A</a></p> <p>After registering you will receive a confirmation email containing information about joining the webinar.</p>	The public hearing will be hybrid. Participants can attend at the physical location or virtually by registering on Zoom.

**Date of intended adoption:** March 8, 2024 (Note: This is **NOT** the effective date)

### Submit written comments to:

Name: Bonnie King  
 Address: PO Box 47864, Olympia, WA 98504-7864  
 Email: <https://fortress.wa.gov/doh/policyreview/>  
 Fax: (360) 236-4738

### Assistance for persons with disabilities:

Contact Bonnie King  
 Phone: (564) 669-9721  
 Fax: (360) 236-4738  
 TTY: 711



Other: N/A By (date) February 27, 2024	Email: <a href="mailto:WABONRules@doh.wa.gov">WABONRules@doh.wa.gov</a> Other: N/A By (date) February 27, 2024																
<b>Purpose of the proposal and its anticipated effects, including any changes in existing rules:</b> The board is proposing amendments to WAC 246-840-030 and WAC 246-840-090 to clarify specific licensing requirements for RN and LPN applicants. The proposal amends licensing requirements for RN and LPN applicants applying for initial licensure via an out-of-state traditional nursing education program approved by another U.S. nursing board, and applicants applying via interstate endorsement.  The current rules state that a nurse who has graduated from another state's approved nursing program or from a substantially equivalent program may be licensed. The board is aware that certain nursing programs in Florida and elsewhere have programs fraudulently granting diplomas. The board is proposing amendments to clarify that the Washington State Board of Nursing determines if another state's board-approved nursing program substantially meets Washington State requirements. Other clarifying amendments are also proposed for readability without changing the existing requirements.  On May 5, 2023, the board filed emergency rules to amend WAC 246-840-030 and 246-840-090 as WSR 23-11-015. The emergency rules were extended on September 1, 2023 as WSR 23-18-064 and later on December 29, 2023 as WSR 24-02-059. Emergency rules are intended to be in place until permanent rules are adopted.  The amendments clarify that RN and LPN applicants applying by interstate endorsement or for initial licensure educated in a traditional nursing education program approved by another U.S. nursing board must successfully complete a nursing education program in another U.S. state, which is approved by the nursing board in that state and substantially meets requirements for nursing education approved in Washington state as determined by the Washington State Board of Nursing.  This rule making proposal, if adopted, will reflect standards currently adopted in the emergency rules.																	
<b>Reasons supporting proposal:</b> The board must protect the people of Washington by only licensing qualified, properly trained nurses. The board is proposing to amend these rules to ensure that only programs that meet Washington state standards are accepted. The intent of the proposed rule is to ensure that they cannot be interpreted to mean a fraudulent nursing program or program not meeting Washington state standards as approved by another state must be accepted as qualifying RNs and LPNs for licensure in Washington state.																	
<b>Statutory authority for adoption:</b> RCW 18.79.010, 18.79.110, 18.80.020																	
<b>Statute being implemented:</b> RCW 18.79.010																	
<b>Is rule necessary because of a:</b> <div style="display: flex; justify-content: space-between;"> <div>           Federal Law?            Federal Court Decision?            State Court Decision?         </div> <div style="text-align: right;"> <input type="checkbox"/> Yes   <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes   <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes   <input checked="" type="checkbox"/> No         </div> </div> If yes, CITATION:																	
<b>Agency comments or recommendations, if any, as to statutory language, implementation, enforcement, and fiscal matters:</b> None																	
<b>Type of proponent:</b> <input type="checkbox"/> Private <input type="checkbox"/> Public <input checked="" type="checkbox"/> Governmental <b>Name of proponent:</b> (person or organization) Washington State Board of Nursing																	
<b>Name of agency personnel responsible for:</b> <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 5px;"> <thead> <tr> <th style="width: 10%;"></th> <th style="width: 40%;">Name</th> <th style="width: 40%;">Office Location</th> <th style="width: 10%;">Phone</th> </tr> </thead> <tbody> <tr> <td>Drafting:</td> <td>Bonnie King</td> <td>111 Israel Road SE, Tumwater, WA 98504</td> <td>564-669-9721</td> </tr> <tr> <td>Implementation:</td> <td>Amber Zawislak</td> <td>111 Israel Road SE, Tumwater, WA 98504</td> <td>360-236-4785</td> </tr> <tr> <td>Enforcement:</td> <td>Catherine Woodard</td> <td>111 Israel Road SE, Tumwater, WA 98504</td> <td>360-236-4757</td> </tr> </tbody> </table>			Name	Office Location	Phone	Drafting:	Bonnie King	111 Israel Road SE, Tumwater, WA 98504	564-669-9721	Implementation:	Amber Zawislak	111 Israel Road SE, Tumwater, WA 98504	360-236-4785	Enforcement:	Catherine Woodard	111 Israel Road SE, Tumwater, WA 98504	360-236-4757
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<b>Is a school district fiscal impact statement required under <a href="#">RCW 28A.305.135</a>?</b> <span style="float: right;"><input type="checkbox"/> Yes   <input checked="" type="checkbox"/> No</span> If yes, insert statement here:  <div style="margin-top: 20px;">           The public may obtain a copy of the school district fiscal impact statement by contacting:            Name:            Address:         </div>																	

Phone:  
Fax:  
TTY:  
Email:  
Other:

**Is a cost-benefit analysis required under [RCW 34.05.328](#)?**

☒ Yes: A preliminary cost-benefit analysis may be obtained by contacting:

Name: Bonnie King  
Address: PO Box 47864 Olympia, WA 98504-7864  
Phone: 564-669-9721  
Fax: 360-236-4738  
TTY: 711  
Email: [WABONRules@doh.wa.gov](mailto:WABONRules@doh.wa.gov)  
Other: N/A

No: Please explain:

**Regulatory Fairness Act and Small Business Economic Impact Statement**

Note: The [Governor's Office for Regulatory Innovation and Assistance \(ORIA\)](#) provides support in completing this part.

**(1) Identification of exemptions:**

This rule proposal, or portions of the proposal, **may be exempt** from requirements of the Regulatory Fairness Act (see [chapter 19.85 RCW](#)). For additional information on exemptions, consult the [exemption guide published by ORIA](#). Please check the box for any applicable exemption(s):

☐ This rule proposal, or portions of the proposal, is exempt under [RCW 19.85.061](#) because this rule making is being adopted solely to conform and/or comply with federal statute or regulations. Please cite the specific federal statute or regulation this rule is being adopted to conform or comply with and describe the consequences to the state if the rule is not adopted.

Citation and description:

☐ This rule proposal, or portions of the proposal, is exempt because the agency has completed the pilot rule process defined by [RCW 34.05.313](#) before filing the notice of this proposed rule.

☐ This rule proposal, or portions of the proposal, is exempt under the provisions of [RCW 15.65.570](#)(2) because it was adopted by a referendum.

☐ This rule proposal, or portions of the proposal, is exempt under [RCW 19.85.025](#)(3). Check all that apply:

- |   |  |
|---|--|
| <input type="checkbox"/> <a href="#">RCW 34.05.310</a> (4)(b)<br>(Internal government operations) | <input type="checkbox"/> <a href="#">RCW 34.05.310</a> (4)(e)<br>(Dictated by statute)   |
| <input type="checkbox"/> <a href="#">RCW 34.05.310</a> (4)(c)<br>(Incorporation by reference)     | <input type="checkbox"/> <a href="#">RCW 34.05.310</a> (4)(f)<br>(Set or adjust fees)  |
| <input type="checkbox"/> <a href="#">RCW 34.05.310</a> (4)(d)<br>(Correct or clarify language)    | <input type="checkbox"/> <a href="#">RCW 34.05.310</a> (4)(g)<br>((i) Relating to agency hearings; or (ii) process requirements for applying to an agency for a license or permit) |

☒ This rule proposal, or portions of the proposal, is exempt under [RCW 19.85.025](#)(4) (does not affect small businesses).

☐ This rule proposal, or portions of the proposal, is exempt under RCW \_\_\_\_\_.

Explanation of how the above exemption(s) applies to the proposed rule:

**(2) Scope of exemptions: Check one.**

☒ The rule proposal is fully exempt (*skip section 3*). Exemptions identified above apply to all portions of the rule proposal.

☐ The rule proposal is partially exempt (*complete section 3*). The exemptions identified above apply to portions of the rule proposal, but less than the entire rule proposal. Provide details here (consider using [this template from ORIA](#)): **See exemptions identified above.**

☐ The rule proposal is not exempt (*complete section 3*). No exemptions were identified above.

**(3) Small business economic impact statement: Complete this section if any portion is not exempt.**

If any portion of the proposed rule is **not exempt**, does it impose more-than-minor costs (as defined by RCW 19.85.020(2)) on businesses?

☐ No Briefly summarize the agency's minor cost analysis and how the agency determined the proposed rule did not impose more-than-minor costs.



☐ Yes      Calculations show the rule proposal likely imposes more-than-minor cost to businesses and a small business economic impact statement is required. Insert the required small business economic impact statement here:

The public may obtain a copy of the small business economic impact statement or the detailed cost calculations by contacting:

Name:  
Address:  
Phone:  
Fax:  
TTY:  
Email:  
Other:

**Date:** 1/18/2024  
**Name:** Alison Bradywood, DNP, MPH, RN, NHA, NEA-BC  
**Title:** Executive Director, Washington State Board of Nursing

**Signature:**



**WAC 246-840-030 Initial licensure for registered nurses and practical nurses—Out-of-state traditional nursing education program approved by another United States nursing board.** (1) Registered ((nursing)) nurse and practical ((nursing)) nurse applicants educated in a traditional nursing education program approved by another United States nursing board and applying for initial licensure ((must)) shall:

((1)) (a) Successfully complete a ((board-approved)) nursing education program in another U.S. state, which:

(i) Is approved by the nursing board in that state; and

(ii) Substantially meets requirements for nursing education approved in Washington state. The board retains authority to evaluate and determine the sufficiency of academic preparation for all applicants.

((Applicants from a board-approved registered nurse program who are applying for a practical nurse license:

(a) Complete all course work required of board-approved practical nurse programs as listed in WAC 246-840-575(2). Required courses not included in the registered nurse program may be accepted if the courses were obtained through a commission-approved program.

(b) Be deemed as capable to safely practice within the scope of practice of a practical nurse by the nurse administrator of the applicant's nursing education program.

((2)) (b) Successfully pass the ((commission)) board-approved licensure examination as provided in WAC 246-840-050.

((3)) (c) Submit the following documents:

((a)) (i) A completed licensure application with the required fee as defined in WAC 246-840-990.

((b)) (ii) An official transcript sent directly from the applicant's nursing education program to the ((commission)) board. The transcript must include course names and credits accepted from other programs. The transcript must show:

((i)) (A) The applicant has graduated from an approved nursing program or has successfully completed the prelicensure portion of an approved graduate-entry registered nursing program; or

((ii)) (B) That the applicant has completed all course work required in a ((commission)) board-approved practical nurse program as listed in WAC ((246-840-575(2))) 246-840-539.

((c) Applicants) (iii) An applicant from a board-approved registered nurse program who ((are)) is applying for a practical nurse license ((must)) shall also submit an attestation sent from the nurse administrator of the applicant's nursing education program indicating that the applicant is capable to safely practice within the scope of practice of a practical nurse.

(2) An applicant from an out-of-state board-approved registered nurse program who is applying for a practical nurse license shall:

(a) Complete all course work required of board-approved practical nurse programs as listed in WAC 246-840-539. Required courses not included in the registered nurse program may be accepted if the courses were obtained through a board-approved program.

(b) Be deemed as capable to safely practice within the scope of practice of a practical nurse by the nurse administrator of the applicant's nursing education program.

AMENDATORY SECTION (Amending WSR 21-04-016, filed 1/22/21, effective 2/22/21)

**WAC 246-840-090 Licensure for nurses by interstate endorsement.**

Registered nurse and practical nurse applicants for interstate endorsement may be issued a license without examination provided the applicant meets the following requirements:

(1) The applicant graduated and holds a degree from:

(a) A ~~((commission or))~~ state board-approved program preparing candidates for licensure as a nurse, which substantially meets requirements for nursing education approved in Washington state, as determined by the board; or

(b) A nursing program that is equivalent to ~~((commission))~~ board-approved nursing education in Washington state at the time of graduation as determined by the ((commission)) board.

(2) The applicant holds a current active nursing license in another state or territory, or holds an inactive or expired license in another state or territory and successfully completes a ~~((commission))~~ board-approved refresher course.

(a) An applicant whose license was inactive or expired must be issued a limited education authorization by the ~~((commission))~~ board to enroll in the clinical portion of the refresher course.

(b) The limited education authorization is valid only while working under the direct supervision of a preceptor and is not valid for employment as a registered nurse.

(3) The applicant was originally licensed to practice as a nurse in another state or territory after passing the National Council Licensure Examination (NCLEX).

(4) ~~((Applicants))~~ An applicant graduating from a nursing program~~((s))~~ outside the U.S. ~~((must))~~ shall demonstrate English proficiency by:

(a) Passing a ((commission)) board-approved English proficiency test if the nursing education is not in one of the following countries: Canada (except for Quebec), United Kingdom, Ireland, Australia, New Zealand, American Samoa, Guam, Northern Mariana Islands, and U.S. Virgin Islands ((, or complete one thousand)); or

(b) Completing 1,000 hours of employment as a licensed nurse in another state ((, or provide)). The 1,000 hours of employment must be in the same licensed role as the nurse is applying for licensure in Washington state. Proof of employment must be submitted to the board; or

(c) Providing evidence directly from the ((school)) program of earning a high school diploma or college degree from a United States institution.

~~((The one thousand hours of employment must be in the same licensed role as the nurse is applying for licensure in Washington state. Proof of employment must be submitted to the commission.))~~

(5) For RNs: If the applicant is a graduate of a nontraditional nursing education program and:

(a) Was licensed as a practical/vocational nurse prior to licensure as a registered nurse, the applicant (~~((must submit evidence of two hundred hours of preceptorship in the role of a registered nurse as defined in WAC 246-840-035, or at least one thousand hours of practice as a registered nurse without discipline of the registered nurse license by any other state or territory))~~) shall meet the requirements defined in WAC 246-840-048.

(b) Was not licensed as a practical/vocational nurse prior to licensure as a registered nurse, the applicant (~~((must))~~) shall submit evidence of at least (~~((one thousand))~~) 1,000 hours of practice as a registered nurse without discipline of the registered nurse license by any other state or territory.

(6) All applicants must submit the following documents:

(a) A completed licensure application with the required fee as defined in WAC 246-840-990.

(b) An official transcript sent directly from the applicant's nursing education program to the (~~((commission))~~) board if the education cannot be verified from the original board of nursing, or (~~((commission))~~) board-approved evaluation agency.

(i) The transcript must contain adequate documentation demonstrating that the applicant graduated from an approved nursing program or successfully completed the prelicensure portion of an approved graduate-entry registered nursing program.

(ii) The transcripts (~~((shall))~~) must include course names and credits accepted from other programs.

(c) Verification of an original registered or practical nurse license from the state or territory of original licensure. The verification must identify that issuance of the original licensure included passing the NCLEX.

(d) For an applicant(~~((s))~~) educated outside the United States and in territories or countries not listed in subsection (4)(a) of this section, successful results of a (~~((commission))~~) board-approved English proficiency exam, or, evidence of (~~((one thousand))~~) 1,000 hours worked as a nurse.

(e) For RNs: If the applicant is a graduate of a nontraditional program in nursing and:

(i) Was licensed as a practical/vocational nurse prior to licensure as a registered nurse, the applicant (~~((must))~~) shall submit (~~((documentation of two hundred hours of preceptorship in the role of a registered nurse as defined in WAC 246-840-035 or at least one thousand hours of practice as a registered nurse without discipline of the registered nurse license by any other state or territory))~~) the requirements outlined in WAC 246-840-048.

(ii) Was not licensed as a practical/vocational nurse prior to licensure as a registered nurse, the applicant (~~((must))~~) shall submit documentation of at least (~~((one thousand))~~) 1,000 hours of practice as a registered nurse without discipline of the registered nurse license by any other state or territory.

# SB 5582 1:2 Simulation Draft Rules Update

## TIMELINE

The draft 1:2 simulation work team had meetings with INACSL and SSIH representatives and national researchers in the field during this process.

Seven 1-2 hour simulation draft rules workshops have been held, starting Sept. 26 and the last one was Dec. 14.

January 31, 2024

Draft language presented to the education subcommittee. The subcommittee will consider moving forward to the BON for approval.

May 2024

CR-102 file for a hearing in June or July.

In addition, the draft 1:2 simulation work team met multiple times with the WA state simulation task force, the SBCTC, reps from the college of presidents, the independent colleges of WA, and the NCSBN.

A survey has been sent to the nursing education programs dean/directors asking them to rank the top 4 funding priorities related to simulation and to estimate the needed funds in specific areas. The survey closed Jan. 15.

The results will be collated and the information shared with legislators.

March 8, 2024

Present a motion to the BON to approve the draft rule language and proceed with the filing of the CR-102 process.

June - July 2024

Rule hearing.

## SENATE BILL 5582

### *II. ELIMINATE BOTTLENECKS IN NURSE TRAINING, Section 7*

The nursing commission may grant approval to baccalaureate nursing education programs where the nurse administrator holds a graduate degree with a major in nursing and has sufficient experience as a registered nurse but does not hold a doctoral degree.

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### **National Counsel of State Boards of Nursing - Member Board Web Survey**

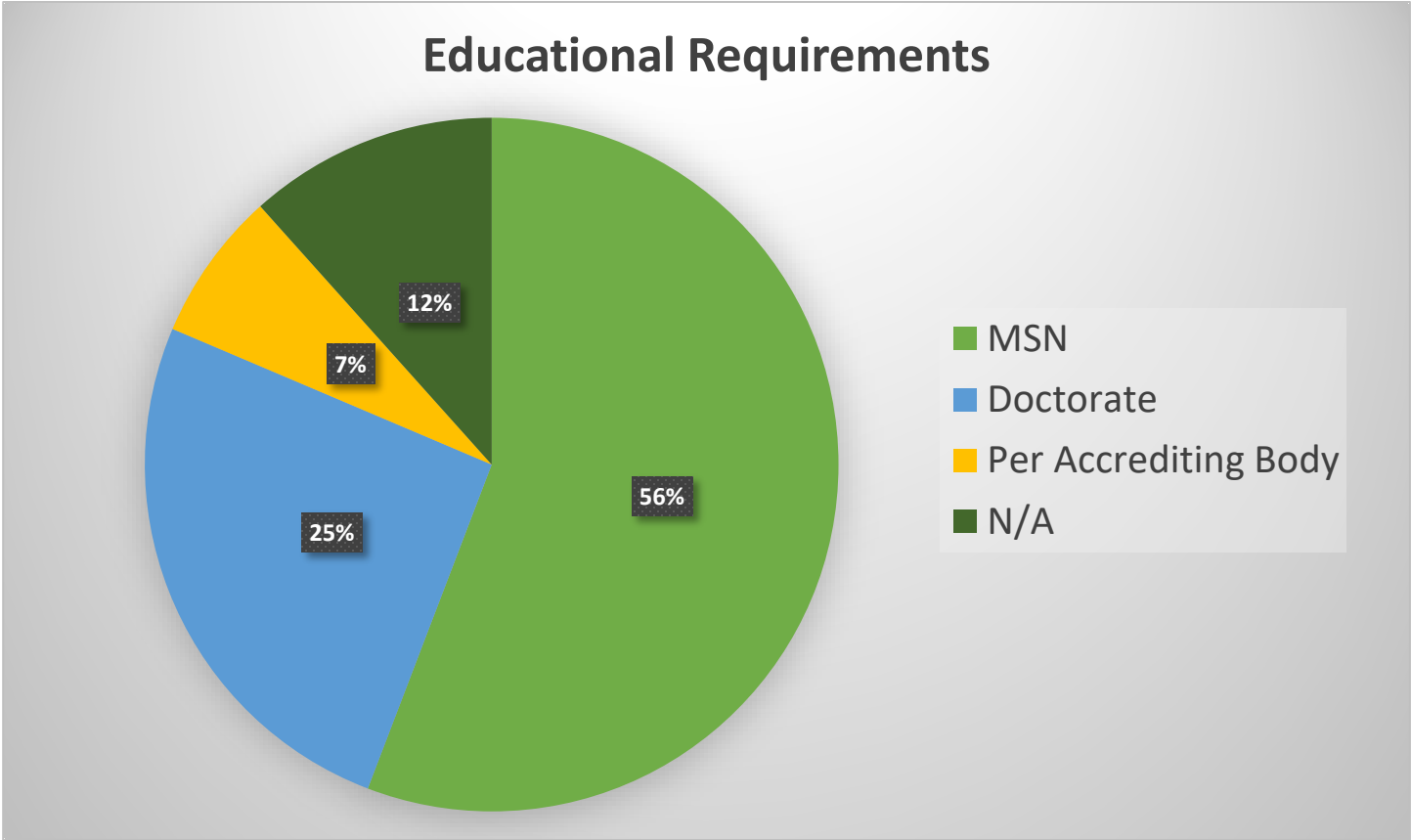
Survey Title: Academic and Experiential Qualifications of BSN Nurse Administrator

Response Rate: 56% (34/61 Boards)

Question 1

What are the educational requirements for a baccalaureate program nurse administrator, both for generic and RN-BSN programs per your state education regulations?

Degree Required	Responses
MSN	24
Doctorate	11
Per Accrediting Body	3
N/A	5

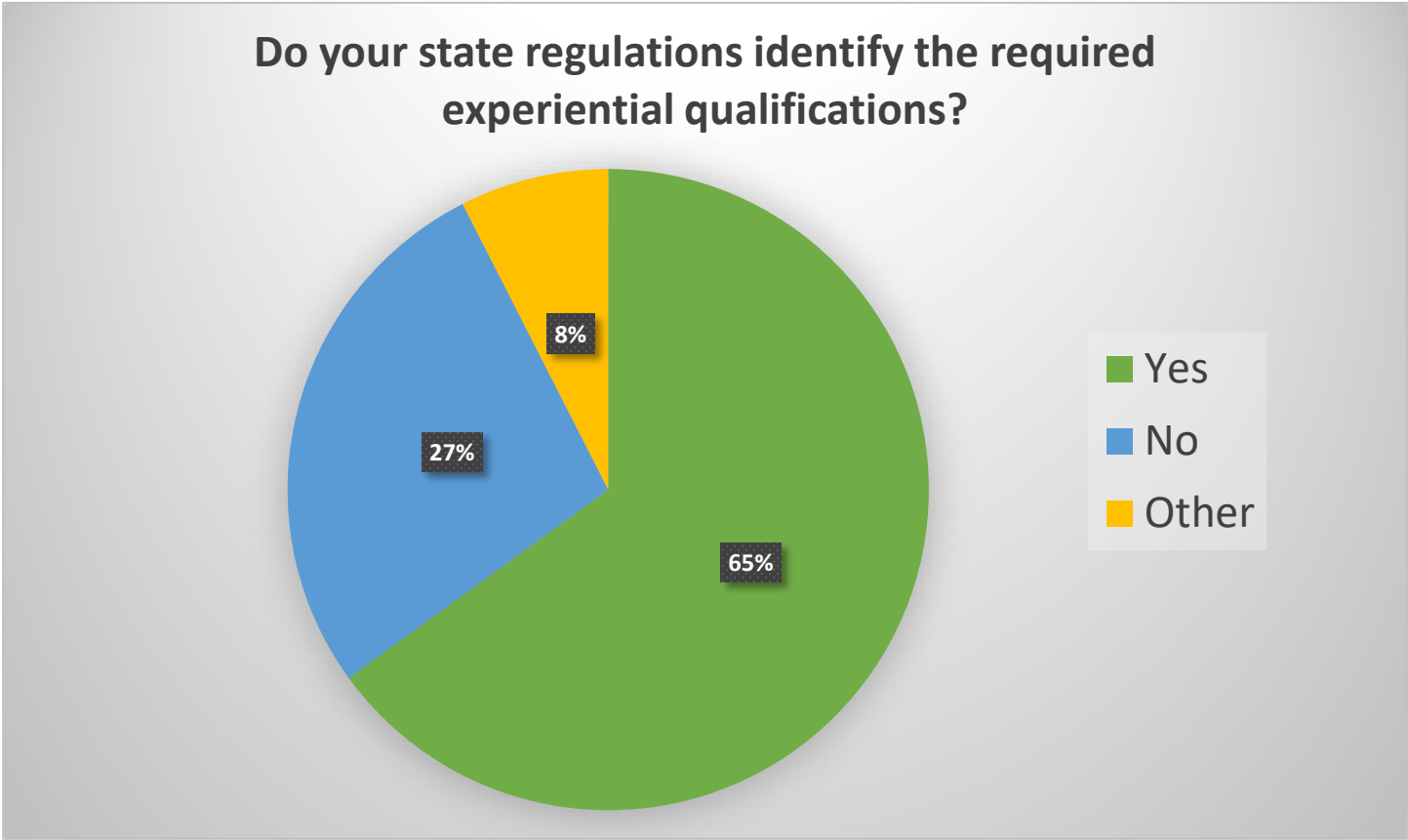




Question 2

Do your state regulations identify the required experiential qualifications of a baccalaureate program nurse administrator?

Identified Experiential Qualifications	Response
Yes	26
No	11
Other	3





### Question 3

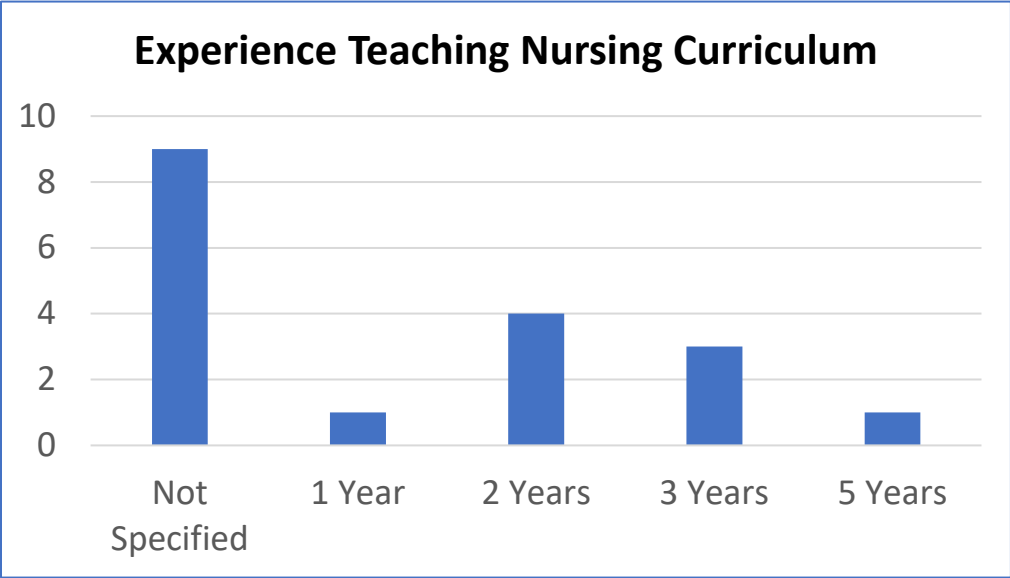
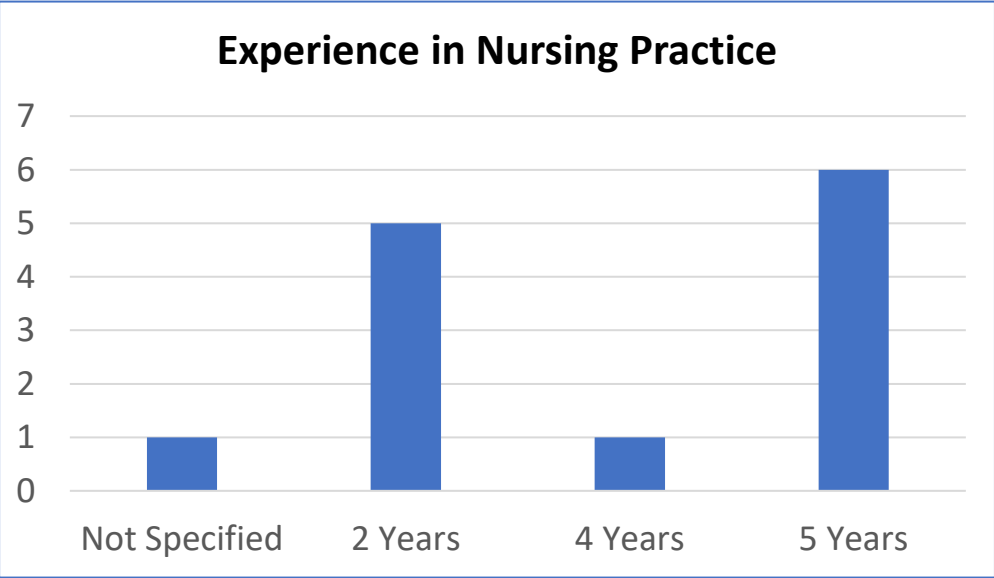
If the answer to question #2 is affirmative, please specify the experiential qualifications mandated by the state for a baccalaureate program nurse administrator.

Specified Qualifications	Response
Knowledge of Nursing Practice	1
2 Years RN Practice	2
2 Years Nursing Practice	3
4 Years Nursing Practice	1
5 Years RN Practice	3
5 Years Nursing Practice	3
Experience teaching and knowledge of nursing curriculum	9
1 Year Experience Teaching and knowledge of nursing curriculum	1
2 Years Experience teaching and knowledge of nursing curriculum	4
3 Years Experience teaching and knowledge of nursing curriculum	3
5 Years Experience teaching and knowledge of nursing curriculum	1
Experience in Nursing Practice	5
Experience in Administration	2
Requirements of Accrediting Body	2



Experience in Nursing Practice	Years
Not Specified	1
2 Years	5
4 Years	1
5 Years	6

Experience teaching and knowledge of nursing curriculum	Years
Not Specified	9
1 Year	1
2 Years	4
3 Years	3
5 Years	1



**Strategic Plan for Nursing Assistants (2023-2025) – UPDATED February 13, 2024** This plan is the third in a series to create significant transformation for nursing assistants. The plan brings to fruition the work of the previous two plans and, when complete, reflects six years of ongoing, statewide work with interested parties. The plan includes a new rules chapter, a new common curriculum, and significant revisions to the state exam for nursing assistants. In addition, it reflects two legislative charges from SSB 5582: An HCA-NAC-LPN Registered Apprenticeship Pilot and a High School-Rural Hospital Pilot. Finally, it addresses two WABON-driven initiatives: One to identify ways to support the success of English language learners in their journey nursing assistant-certified and beyond, and one to identify clear, data-driven timelines for protecting the public in relation to nursing assistant training, testing, certification, renewal, and re-certification.

**Goals:** For all nursing assistants, including English language learners: **(1)** support increased access to and success in completing quality training and efficient, timely testing; **(2)** develop quality, seamless educational and employment pathways for nursing assistants—from the high school level to all levels of licensed nursing practice; and **(3)** assure timeline requirements for nursing assistants are clear and make sense in terms of how they support public protection.

Objectives	Responsibility	Key Steps/Resources	Anticipated Completion Date	Progress
<b>Finalize Proposed Rules: WAC Chapter 246-841A</b>	Kathy Moio, Bonnie King	<ul style="list-style-type: none"> <li>Hearing scheduled for 8/30/23</li> <li>Complete required post-hearing activities</li> <li>Final filing for effective date</li> </ul>	By 10/31/23	<b>Completed Timely; rules effective as of 11/3/23.</b>
<b>Implement Rules Changes, Including Common Curriculum with Integration of Specialty Units</b>	Amy Murray, Sandra Graham, Alana Llacuna, Christine Tran, Dennis Gunnarson	<ul style="list-style-type: none"> <li>Complete all necessary forms revisions</li> <li>Complete all web updates</li> <li>Create orientation materials, per rules (Program Director Orientation, Program Applicant Orientation)</li> <li>Implement ongoing communication, orientation, and technical assistance plan with training programs</li> <li>Finalize all training programs' curriculum implementation plans for Sept. 2024 launch</li> <li>Collaborate with DSHS and training programs on plans and details for Specialty Unit Integration by Sept. 2025</li> </ul>	By 10/31/23 “ “ “ “ Ongoing By 9/1/24 Start 12/1/23 & Ongoing	Forms revisions completed timely; web updates made, rules orientations held ongoing

Objectives	Responsibility	Key Steps/Resources	Anticipated Completion Date	Progress
		<ul style="list-style-type: none"> <li>Implement evaluation plan of curriculum implementation</li> </ul>		
<b>Continue to Make &amp; Implement Revisions to Nursing Assistant Testing</b>	Amy Murray, Alana Llacuna, Christine Tran, Dennis Gunnarson	<ul style="list-style-type: none"> <li>Continue increasing the availability of skills testing slots by allowing most training programs to conduct skills testing of their students at the training program site following graduation</li> <li>Continue identifying additional efficiencies to improve all testing processes and availability</li> <li>Execute contract amendment(s) to reflect revisions</li> <li>Evaluate and refine testing revisions</li> </ul>	<p>By 10/1/23 &amp; Ongoing</p> <p>Ongoing</p> <p>By 10/1/23 Ongoing</p>	Skills testing slots expanded significantly with testing change; CQI to evaluate, refine & improve efficiencies is ongoing; contract amendment to reflect changes is completed.
<b>Continue HCA-NAC-LPN Registered Apprenticeship Pilot work as legislated through June 2026 (SSB 5582)</b>	Marlin Galiano with support from Dennis Gunnarson	<ul style="list-style-type: none"> <li>Provide project management and budget planning support to lead agency and Sponsor to foster timely completion of required activities within budget</li> <li>Support Sponsor in completing required activities, including finalization of all program standards</li> <li>Support college partner(s) in completing required and necessary activities for Sept. 2024 launch, including communication with the Nursing Program Approval Panel (NPAP) as required</li> <li>Consult on all pilot plans and activities to support compliance with WABON and other regulations</li> <li>Consult on legislative reports and responding to legislative and other inquiries on pilot status</li> <li>Support all activities required for timely submission of application to the Washington State Apprenticeship &amp; Trade Council (WSATC) for a Sept. 2024 launch</li> </ul>	<p>Ongoing</p> <p>8/1/23 &amp; Ongoing</p> <p>Ongoing</p> <p>Ongoing</p> <p>8/1/23 &amp; Ongoing</p> <p>Ongoing</p>	WABON staff continues availability to consult and support lead agency; finalization of contract between lead agency and sponsor complete and work to complete WSATC submission is underway.

Objectives	Responsibility	Key Steps/Resources	Anticipated Completion Date	Progress
		<ul style="list-style-type: none"> <li>Support evaluation of and reporting on the pilot to the legislature, the WABON, and interested parties</li> </ul>	Ongoing & <b>Legislative Report Due 12/1/25</b>	
<b>Per SSB 5582, establish at least two pilot projects that partner rural hospitals with high school training programs for nursing assistant clinicals and employment (at least one on each side of the state)</b>	Marlin Galiano	<ul style="list-style-type: none"> <li>Develop and implement a communication and outreach plan to identify potential partners for the pilot projects and to invite them into the work.</li> <li>Convene potential partners for an introductory meeting(s) to introduce them to the legislative charge; gather information about communities (needs, goals, ideas, questions, concerns); and inform about what the pilot entails to identify interested partners.</li> <li>Once pilot partners are identified, collaborate with them to develop, implement, and evaluate a workplan with steps, timelines, and outcomes for fulfilling the legislative charge and meeting their needs.</li> <li>Implement the workplan</li> <li>Evaluate the pilot(s)</li> <li>Write and submit required two reports to the legislature outlining the status of the pilots and presenting findings and recommendations</li> </ul>	<p>By 11/30/23</p> <p>By 1/5/24</p> <p>By 3/1/24</p> <p>Start 3/1/24 &amp; Ongoing</p> <p>Ongoing with formal evaluation for report due to legislature 12/1/25</p> <p><b>Legislative Reports Due 12/1/24 &amp; 12/1/25</b></p>	<p>Project partners met on Jan. 31 and approved preliminary project plan and action group structure: 1—Establishing Clinical Affiliations; 2—Opening New Programs; 3—Healthcare Pathway Materials; 4—“Popcorn” group to address unique/new issues as identified by partners. Follow-up meetings with action groups 1 and 2 and individual partners planned Feb-May. Next all-partner public meeting slated for mid-May 2024.</p>

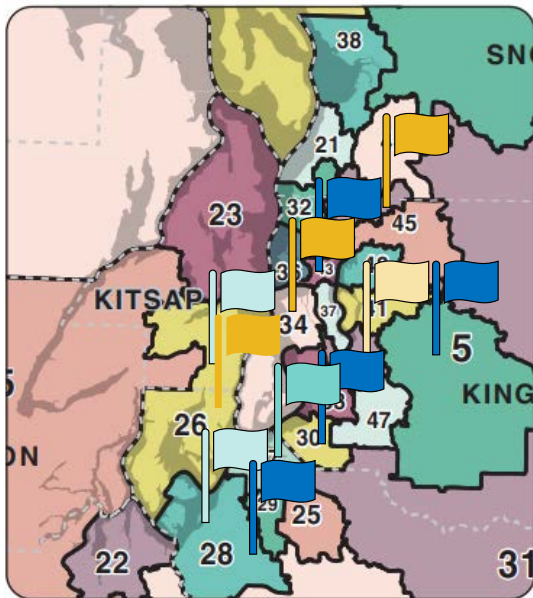
Objectives	Responsibility	Key Steps/Resources	Anticipated Completion Date	Progress
<b>Language &amp; Timeline Considerations for Nursing Assistants</b>	Sandra Graham	<ul style="list-style-type: none"> <li>• Hire nurse consultant</li> <li>• Orient nurse consultant to nursing assistant unit and current state of nursing assistant language supports and timelines in WA (position has multiple aspects to it)</li> <li>• Conduct research as initial groundwork (i.e., literature review, discussion with other states, etc.) as background to identify data and/or evidence base related to language supports and timelines</li> <li>• Convene and facilitate conversations with interested parties to identify needs, evidence-based approaches or best practices, goals/outcomes.</li> <li>• Based on research and work with interested parties, develop a workplan with steps/milestones, timelines for achievement, and a plan for evaluation to share with the NCQAC and interested parties.</li> <li>• Collaborate with interested parties and contract with experts, if needed and able, to implement the workplan and achieve the goals/outcomes as deliverables.</li> <li>• Implement aspects of the evaluation plan (if implementation is far enough along to evaluate), report on the findings, and make recommendations for refinement to the NCQAC for moving the work forward.</li> </ul>	<p>By 10/31/23</p> <p>By 3/1/24</p> <p>By 4/30/24</p> <p>By 5/31/24</p> <p>By 6/30/24</p> <p>Ongoing 7/1/24 to 6/30/25</p> <p>Ongoing 7/1/24 to 6/30/25</p>	Nurse consultant hired and started 11/1/23; Orientation to unit and this initiative are underway.

# Legislative Districts of Board Members

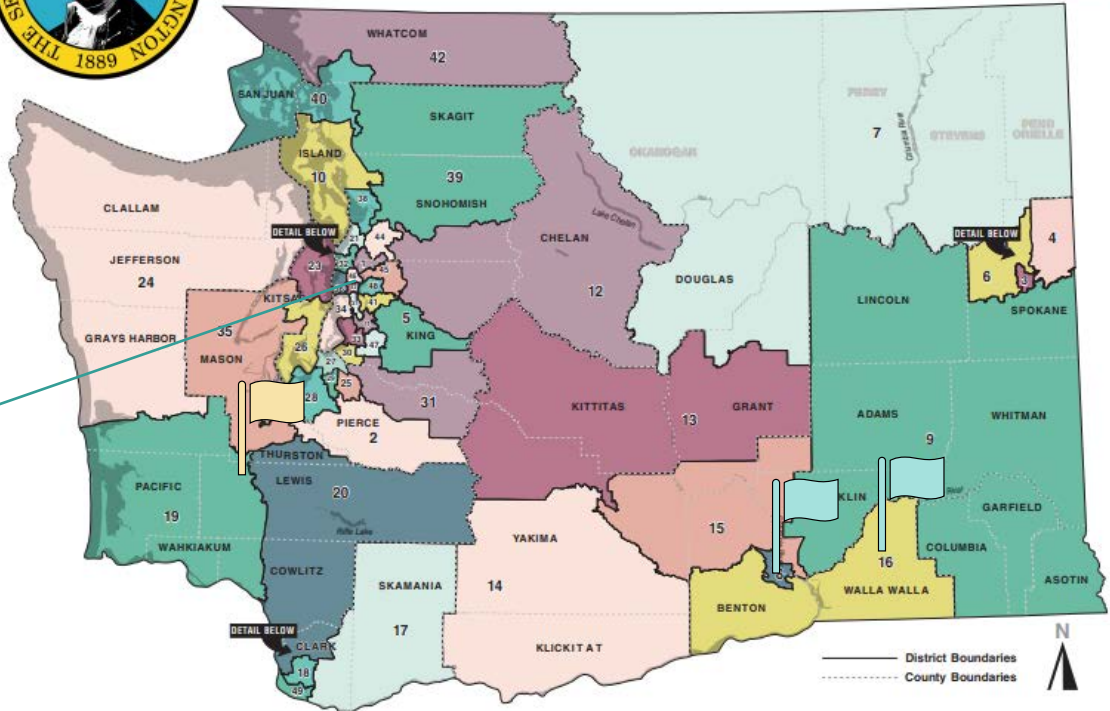
Do you know your  
Legislative District?  
Find out here



## Bigger Area



## 2023 STATEWIDE LEGISLATIVE DISTRICT MAP WITH LEGISLATIVE MEMBERS







## LEGISLATIVE UPDATE

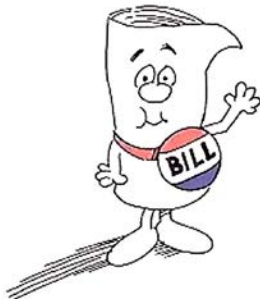
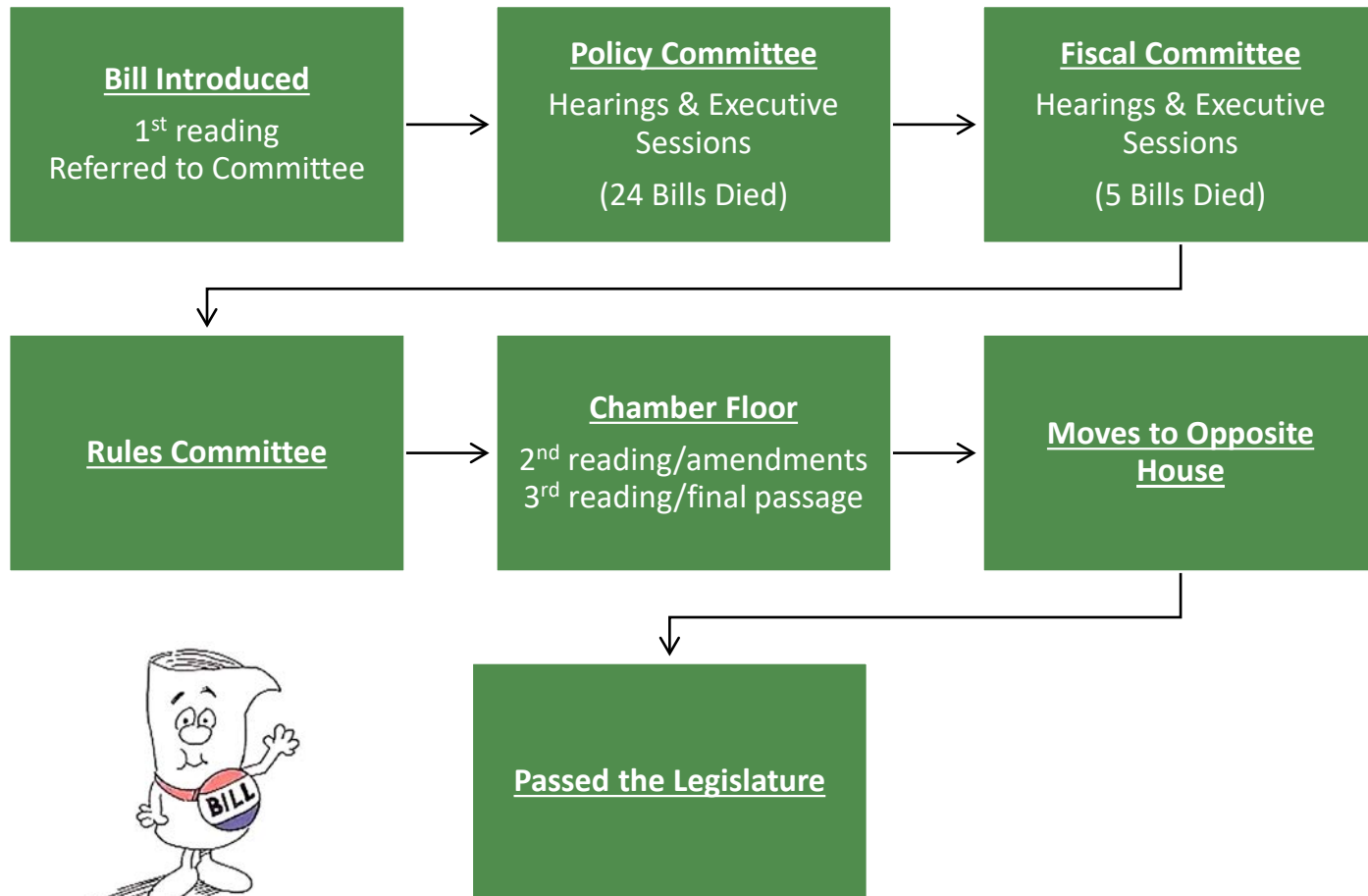
March 8, 2024



# 2024 Legislative Session

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- Short session – 60 days long
- Pre-filing period began on **December 4, 2023**
  - Over 600 bills were pre-filed this session (~67% increase)
- Regular session began on **January 8, 2024**
  - Over 200 bills were analyzed
  - WABON's Legislative Panel tracked 49 bills over session
- Regular session officially ended on **Sine Die, March 7, 2024**



# WABON Legislative Short List

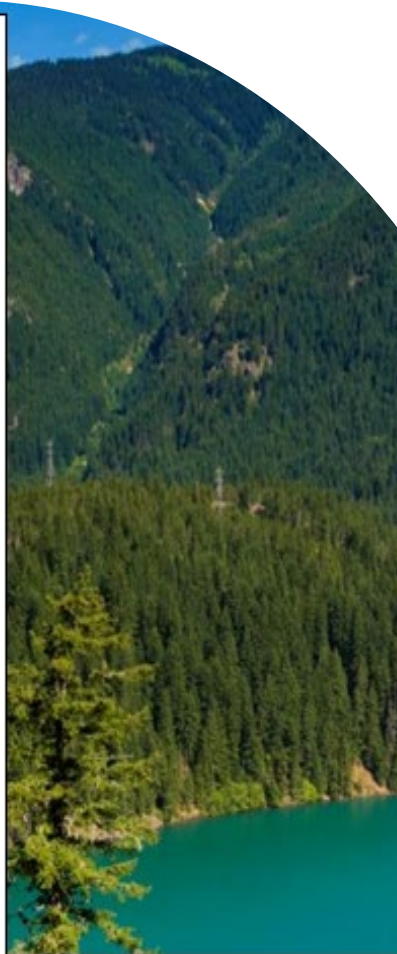
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- **HB 2416**, Changing the legal title for advanced practice nurses
  - WABON's first request legislation
  - Provides APRN title protection
- **SB 5184**, Concerning licensure of anesthesiologist assistants
- **SB 6286**, Addressing the anesthesia workforce shortage
  - CRNA preceptor grant
  - Anesthesia Workforce Shortage Study

# Simulation Funding Request

JANUARY 19, 2024

Alison Bradywood, DNP, MN/MPH, RN, NEA-BC  
Executive Director | [alison.bradywood@doh.wa.gov](mailto:alison.bradywood@doh.wa.gov)



- Proposal for the strategic investment of funds for nursing education programs to provide professional development related to simulation activities
- WABON surveyed 42 education programs to gather initial input to prioritize funding needs
- Simulation funding priorities included:
  1. Professional development
  2. Endorsement or accreditation
  3. Evaluation of 1:2 simulation for a three-year period
  4. Open-source materials



## Board Members Hours Assessment

**Purpose:** The purpose of the assessment is to assess the workload of board and pro tem members; to provide transparency to prospective board members on the hours and duties of the average member; to improve onboarding processes and orientation materials; to streamline workflows for board members; and to produce more accurate position descriptions.

**Method:** Qualitative and quantitative analysis of board members hours, surveys of board members, assessment of board, subcommittee group and position descriptions.

**Timeline:** Data gathering – January 28 – February 17, Evaluation/Assessment February 18-March 30.

Results and recommendations to be presented at the May meeting.

### Survey Questions:

1. Are you currently serving as a Board member or Pro Tem?
  - Board Member
  - Pro Tem
2. Please list the WABON panels, subcommittees, and projects you serve on.
  - Panels (dropdown)
 

<input type="radio"/> Legislative	<input type="radio"/> SUDRP	<input type="radio"/> NAPAP
<input type="radio"/> Case Management	<input type="radio"/> NPAP A	
<input type="radio"/> Case Disposition	<input type="radio"/> NPAP B	
  - Subcommittees (dropdown)
 

<input type="radio"/> Advanced Practice	<input type="radio"/> Licensing	<input type="radio"/> Education
<input type="radio"/> Disciplinary	<input type="radio"/> Consistent Standards	<input type="radio"/> Research
  - Projects (text answer)
3. How many hours a month are you spending on board meeting-related duties, including preparation (not including subcommittees, panel, or projects)?
4. How many hours a month are you spending on WABON duties such as subcommittees, panel, or projects (not including board meeting-related duties)?
5. How many hours a month do you think are needed to fulfill your current duties (including board meeting-related duties)?
6. How many hours per week would you like to devote to WABON work? (e.g., what is a reasonable workload?)
7. What solutions do you suggest alleviating workload concerns or how staff could prepare materials differently to reduce your work? (Please be as specific as possible. All ideas are welcome.)
8. What other suggestions do you have to improve your work with WABON and maximize your time?