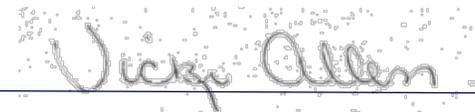




IDAHO BOARD OF NURSING
STRATEGIC PLAN
FISCAL YEARS 2017-2020

A handwritten signature in dark ink, appearing to read "Sandra Evans".

Sandra Evans, MAEd, RN, Executive Director

A handwritten signature in dark ink, appearing to read "Vicki Allen".

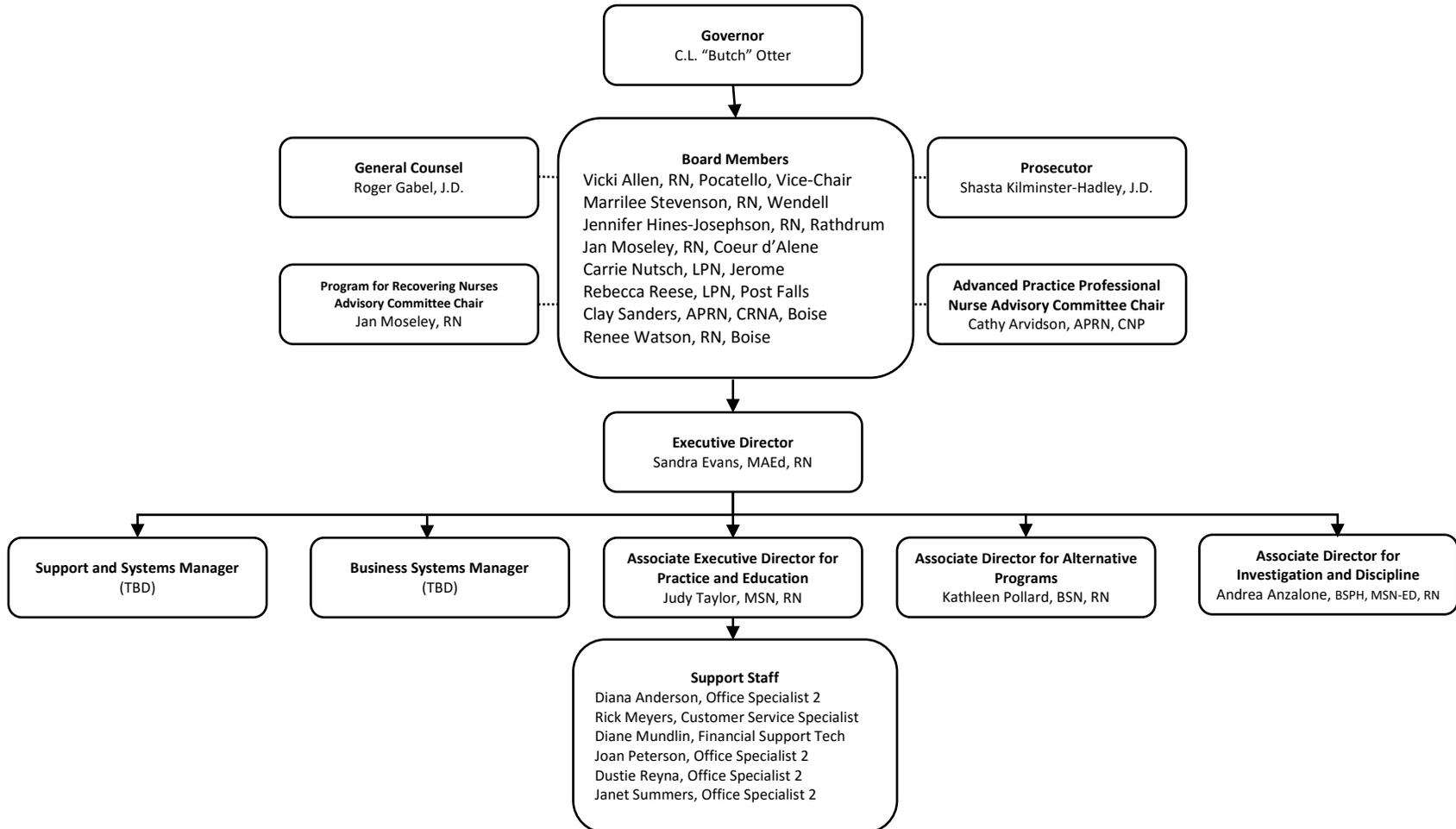
Vicki Allen, RN, Vice Chairman

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IDAHO BOARD OF NURSING ORGANIZATIONAL CHART



MISSION

The Mission of the Idaho Board of Nursing is to regulate nursing practice and education for the purpose of safeguarding the public health, safety, and welfare

VISION

Regulating nursing with collaboration, innovation and strategic leadership to ensure the nursing workforce meets the changing needs of Idahoans

VALUES

Accountability: Acknowledging and assuming responsibility for actions, decisions and policies

Collaboration: Working with others with courtesy, attentiveness and understanding and utilizing their diverse expertise to reach solutions

Innovation: Embracing change as an opportunity to improve organizational endeavors and turn ideas into action

Integrity: Being honorable, forthright, and acting with conviction based upon a firm intention to seek the impartial truth and act justly

Leadership: Using knowledge and experience to influence the perceptions, understanding and behaviors of others

STRATEGIC GOALS

Licensure/Certification: License/Certify Qualified Persons for Practice

Practice: Determine, Communicate and Enforce Standards of Conduct and Scope and Standards of Practice

Discipline/Alternatives To Discipline: Receive and Investigate Alleged Violations of the Act/Rule and Initiate Disciplinary Actions and Alternatives to Discipline

Education: Determine, Communicate, and Enforce Standards for Educational Programs Preparing Individuals for Practice at all Levels

Governance: Cultivate Governance Framework and Culture that Sustains Board Relevance and Supports Accomplishment of Vision, Mission, and Goals

Communication: Foster Communication between the Board, its Colleagues, Internal and External Stakeholders and the Public

Organization: Support Organizational Infrastructure Necessary to Accomplish the Vision, Mission, and Goals

KEY EXTERNAL FACTORS THAT MAY IMPACT GOAL ACCOMPLISHMENT

Changing economic, political, social, and healthcare environments have an effect on the Board of Nursing's ability to accomplish strategic goals and objectives and have the potential to alter outcomes and projected timelines reflected in the Board's Strategic Plan. Idaho's changing population demographics, national healthcare reform initiatives, the shift from nursing care delivered at the bedside to care delivered via telehealth may result in necessary shifts in direction as the Board strives to adequately protect the public health and welfare.

Economic

State and national economic fluctuations impact the nursing workforce both in terms of the number of nurses applying for and receiving licenses as well whether or not licensed nurses choose to enter, remain in or leave the profession. In addition, state and national economic fluctuations impact healthcare economics which in turn affect Board revenue projections and actual income.

Political

As a self-governing agency of state government, the Board is directly affected by the state's political climate and resulting policy decisions and directives. Appropriated spending authority, progress on proposed initiatives, and political hurdles encountered during the enactment of statutory revisions all affect Board accomplishment of strategic goals and benchmarks.

Sociologic/Demographic

Consumer demand for access to home and community based care, client-directed care, and care delivered via telehealth will impact how nurses are educated and how/where they are licensed. Social issues that may impact the health of Idahoans, such as substance use, the effects of aging, and work-related stress, among others affect the performance and behavior of nurses as well as the clients for whom they provide care. Many of these same factors will impact the number and complexity of investigations into the practice and behavior of nurses alleged to have violated provisions of the law and may result in special licensure considerations for these nurses to assure public protection.

Environmental

Support systems, policies, and logistics for environmentally-friendly processes and transactions affect Board functions and operations strategies. Efforts to conserve natural resources and protect and nurture the environment affect the way the Board accomplishes its objectives, from paperless processes, to virtual meetings, to telecommute policies for staff.

Technological

Emergency preparedness and planned business recovery strategies present significant operational challenges for the Board of Nursing and our external systems partners. Sophisticated electronic systems and processes, complex interface requirements, anticipated and unanticipated obsolescence and threats to the security and integrity of data require timely replacement and upgrades of existing electronic systems as well as the application of new emerging technology.

LICENSURE/CERTIFICATION GOAL: LICENSE/CERTIFY QUALIFIED PERSONS FOR PRACTICE

Objective	Performance Measures	Benchmarks	Timeframe
<p>L.1. Board authorities and beliefs are fundamental to licensure and certification decisions</p>	<ul style="list-style-type: none"> ▪ Board affirms licensure/certification processes and decisions are consistent with adopted Board belief statements ▪ Licensure/certification is dependent on demonstrated professional competence and conduct, and determination of fitness to practice 	<ul style="list-style-type: none"> ▪ Licensure belief statement developed and reviewed for currency and relevance ▪ Licensure-related statute, rules and policies reviewed for currency and relevance ▪ BON annually self-assesses congruence of licensure decisions with adopted Board beliefs 	<ul style="list-style-type: none"> ▪ Review-2017 ▪ Review-2017 ▪ Annually each Spring
<p>L.2. Nurses demonstrate professional competence at entry to practice and at each subsequent issuance of licensure</p>	<ul style="list-style-type: none"> ▪ Success on NCLEX-RN/PN is required for initial licensure by examination ▪ National APRN certification is required for APRN licensure ▪ Applicants demonstrate professional competence for initial licensure by endorsement and for license reinstatement ▪ LPNs, RNs and APRNs demonstrate continuous professional development as a condition of license renewal 	<ul style="list-style-type: none"> ▪ Licensure ‘by exception’ policies guide restricted licensure for LPNs, RNs without NCLEX® ▪ Licensure statute, rules, policies guide LPN, RN, APRN licensure by endorsement/reinstatement decisions ▪ Licensure statute, rules, policies guide LPN, RN, APRN licensure by renewal decisions ▪ Processes for assessing continuous professional development inform LPN, RN, APRN renewal 	<ul style="list-style-type: none"> ▪ Report quarterly ▪ Report quarterly ▪ Report quarterly ▪ Develop 2018; Report quarterly 2020
<p>L.3 Applicants who meet adopted Uniform Licensure Requirements (ULRs) and adopted state and national standards are licensed as LPNs, RNs and APRNs by:</p> <ul style="list-style-type: none"> ▪ Examination ▪ Endorsement ▪ Reinstatement ▪ Renewal 	<ul style="list-style-type: none"> ▪ The <i>Consensus Model for APRN Regulation</i> provides the framework for APRN regulation ▪ NCSBN ULRs are the criteria for LPN and RN licensure ▪ Licensing decisions for applicants with criminal background, substance use and health impairment histories, are guided by established policies and guidelines ▪ Licenses/certificates subject to special 	<ul style="list-style-type: none"> ▪ APRN licensure-related statute, rules and policies reviewed for consistency with <i>Consensus Model</i> ▪ APRN certifying organizations approved annually based on established criteria ▪ Statute, rules, policies assure conformance with adopted LPN/RN ULRs ▪ Professional competence/conduct 	<ul style="list-style-type: none"> ▪ Review-2020 ▪ Reported annually ▪ Reported quarterly ▪ Reported

Objective	Performance Measures	Benchmarks	Timeframe
	restrictions, terms and conditions allow for continued practice under strictly defined parameters <ul style="list-style-type: none"> ▪ MA-C applicants and licensees meet established criteria 	and fitness to practice assessed for each applicant prior to license decision <ul style="list-style-type: none"> ▪ License limitations/restrictions guided by related statute, rule, policy ▪ Statute, rules, policies guide MA-C certification decisions 	quarterly <ul style="list-style-type: none"> ▪ Reported quarterly ▪ Reported quarterly
L.4. Mutual Recognition of Licensure is the preferred regulatory model for LPNs, RNs and APRNs	<ul style="list-style-type: none"> ▪ Idaho adopts and implements the Nurse Licensure Compact/'Enhanced' Nurse Licensure Compact and APRN Compact ▪ Idaho demonstrates compliance with terms and conditions of each Compact 	<ul style="list-style-type: none"> ▪ Active participation in NLC, eNLC, APRN Commissions ▪ eNLC implementation ▪ APRN Compact implementation ▪ Annually complete NLC compliance self-audit 	<ul style="list-style-type: none"> ▪ Ongoing ▪ 2018-19 ▪ 2018-20 ▪ Annually each spring
L.5. Licensure/certification standards are responsive to changes in the healthcare and regulatory environments	<ul style="list-style-type: none"> ▪ Issues and trends in the healthcare environment impacting licensure/certification are identified and addressed by the Board ▪ Licensure/certification standards are reviewed and revised to protect against unnecessary barriers to credentialing and practice ▪ Meet or exceed the national benchmarks for license-related processes as defined by CORE® research data 	<ul style="list-style-type: none"> ▪ Environmental scan informs BON of emerging trends, issues ▪ Licensure issues/trends are identified/considered by BON ▪ Review of constituent responses reported in CORE® research data informs BON on strategies for improvement ▪ CORE® licensure-related performance indicators serve as targets for improvement: <ul style="list-style-type: none"> ◦ Length of time to process license applications ◦ % on-line applications ◦ Nurse/employer satisfaction with licensure processes ◦ Constituent satisfaction with licensure-related statute, rules, policies 	<ul style="list-style-type: none"> ▪ Report quarterly ▪ Ongoing ▪ 2017 ▪ 2017

PRACTICE GOAL: DETERMINE AND COMMUNICATE STANDARDS OF CONDUCT AND SCOPE AND

STANDARDS OF PRACTICE

Objective	Performance Measures	Benchmarks	Timeframe
P.1. Board authorities and beliefs are fundamental to the regulation of nursing practice	<ul style="list-style-type: none"> ▪ Board affirms decisions are consistent with adopted Board Belief statements ▪ Board affirms statutes and rules are congruent with adopted beliefs ▪ Board affirms administrative rules allow for evolution in nursing practice 	<ul style="list-style-type: none"> ▪ Review and revise belief statement per established schedule ▪ Engage in self-assessment activities to evaluate congruence of decisions and actions ▪ Board identifies desired role in regulating UAP practice. ▪ Continue dialogue with Health and Welfare on the Boards role in regulating UAP practice. 	<ul style="list-style-type: none"> ▪ 2020 ▪ Ongoing and Annually ▪ 2017 ▪ 2018
P.2. Statute, rules, and policies are aligned with national standards and ‘best practice’ research	<ul style="list-style-type: none"> ▪ Idaho statute and rules are congruent with state and national models and standards ▪ Board identifies issues, trends and research affecting future nursing practice 	<ul style="list-style-type: none"> ▪ Complete gap analysis on current rules and statutes ▪ Participate in State, National, and global opportunities to dialogue and network on current and emerging practice issues. ▪ Evaluate emerging evidence of best practices in regulating nursing practice. ▪ Dialogue with fellow compact states on practice issue alignment and differences. ▪ Meet or exceed national benchmarks for practice processes as defined by CORE® research data 	<ul style="list-style-type: none"> ▪ 2018 ▪ Ongoing ▪ Ongoing ▪ Ongoing ▪ Ongoing
P.3. Conduct and practice standards are relevant and meaningful in diverse settings, populations and roles	<ul style="list-style-type: none"> ▪ Board identifies practice implications of emerging technologies and delivery models 	<ul style="list-style-type: none"> ▪ Philosophy statements, policies, rules or statutes support the current practice environment, and are positioned to respond to emerging trends as appropriate ▪ Philosophy statements, policies, rules or statutes are continually monitored for unintended barriers to evolving nursing practice 	<ul style="list-style-type: none"> ▪ Ongoing ▪ Ongoing
P.4. Statute, rule and policy support autonomous and collaborative practice at the full extent of the nurse’s education and training	<ul style="list-style-type: none"> ▪ Statute and rules related to practice substantially conform to NCSBN Model Act and Rules nursing practice 	<ul style="list-style-type: none"> ▪ Gap Analysis per schedule 	<ul style="list-style-type: none"> ▪ 2018

DISCIPLINE/ALTERNATIVE TO DISCIPLINE GOAL: RECEIVE AND INVESTIGATE ALLEGED VIOLATIONS OF THE ACT/RULE AND INITIATE DISCIPLINARY ACTIONS AND ALTERNATIVES TO DISCIPLINE

Objective	Performance Measures	Benchmarks	Timeframe
<p>D.1. Board authorities and beliefs are fundamental to the administration of discipline and alternatives to discipline programs</p>	<ul style="list-style-type: none"> ▪ The Board affirms discipline processes and decisions are consistent with the Board’s <i>Position Regarding Discipline, Belief Statement and Position on Safety to Practice</i> ▪ The Board affirms alternatives to discipline processes are consistent with the Board’s <i>Position Regarding Discipline, Belief Statement and Position on Safety to Practice</i> ▪ Board, PRN Advisory Committee and staff processes are consistent with defined roles and responsibilities ▪ Board actions are aligned and assigned according to the severity of the violation(s) and potential risk to the public 	<ul style="list-style-type: none"> ▪ In the case of discipline identify/review systems and processes relevant to the BON Position Regarding Discipline ▪ Select and Implement the 2016-18 contract for PRN monitoring consistent with established scope of services ▪ Oversee the external monitoring contract for compliance with specifications ▪ Develop a process for ongoing training and assessment, to assure Committee and staff processes are consistent with Board mission. ▪ Integrate NCSBN national/ORBs standards to streamline electronic processes, then continue with administrative review process to support recommendations consistent with Board beliefs 	<ul style="list-style-type: none"> ▪ Ongoing ▪ 2017 ▪ 2017 ▪ Ongoing ▪ 2017 then ongoing
<p>D.2. Complaints alleging violations of statute and rules are managed promptly, fairly and consistently to assure public protection</p>	<ul style="list-style-type: none"> ▪ Meet or exceed national benchmarks for discipline-related processes as defined by CORE® research data ▪ Investigative information is reported to authorized entities and is accessible to the public as required and permitted by law ▪ Root cause of practice breakdown is identified and considered in case management 	<ul style="list-style-type: none"> ▪ CORE® discipline-related performance indicators serve as targets for improvement ▪ Demonstrate progress toward 100% compliance with national reporting mandates ▪ Action (disciplinary or ATD) will be determined through application of multiple instruments, recognized best practices, legal negotiation, administrative review, and Board policy and beliefs 	<ul style="list-style-type: none"> ▪ Ongoing ▪ Initiate in 2016; continue as needed ▪ Ongoing

Objective	Performance Measures	Benchmarks	Timeframe
<p>D.3. Cases are evaluated on their unique merits incorporating principles of ‘just culture’ and the <i>Regulatory Decision Pathway</i> to guide discipline decisions necessary to protect the public, to include desired outcomes of:</p> <ol style="list-style-type: none"> 1) Alternatives to discipline; or 2) Case closure without action; or 3) Discipline with sanctions ranging from mild to moderate to severe 	<ul style="list-style-type: none"> ▪ Case resolution includes: <ul style="list-style-type: none"> ◦ Suspension, revocation and denial when there is evidence of real or potential risk to public safety ◦ Enrollment in the Program for Recovering Nurses (PRN) ◦ Referral to the Practice Remediation Program (PRP) ▪ Assigned Board-directed monitoring, e.g. terms of probation and terms of negotiated agreements 	<ul style="list-style-type: none"> ▪ Cases are evaluated using the NCSBN <i>Regulatory Discipline Pathway</i>® (RDP) and <i>Complaint Evaluation Tool</i> (CET) based on principles of “just culture” ▪ Finalize development of the infrastructure of PRP based on existing Idaho Statute and Rules, NCSBN Models, existing program models, educational opportunities, and TERCAP® ▪ Develop the process for determination of client success/compliance with monitoring conditions 	<ul style="list-style-type: none"> ▪ Ongoing reported quarterly ▪ Ongoing ▪ 2017
<p>D.4. Root causes of practice breakdown are identified and analyzed to direct Board actions</p>	<ul style="list-style-type: none"> ▪ The Taxonomy of Error, Root Cause Analysis, and Practice Responsibility (TERCAP®) model is the framework for discipline investigations and alternatives to discipline program development and framework 	<ul style="list-style-type: none"> ▪ Examine practice breakdown using TERCAP® as a model for discipline application processes 	<ul style="list-style-type: none"> ▪ Ongoing
<p>D.5. Complaint, discipline and alternatives to discipline programs are responsive to changes in the healthcare and regulatory environments</p>	<ul style="list-style-type: none"> ▪ The Board considers key research and evidence-based practices as appropriate- 	<ul style="list-style-type: none"> ▪ CORE® discipline-related performance indicators serve as targets for improvement ▪ Identify trends and emerging issues by participating in state and national conferences, web based training and other activities related to discipline, investigation and alternatives to discipline. ▪ Revise statute and rules related to the PRN to reflect recognized preferred language 	<ul style="list-style-type: none"> ▪ Ongoing ▪ Ongoing ▪ 2017

**EDUCATION GOALS: DETERMINE, COMMUNICATE AND ENFORCE STANDARDS FOR EDUCATIONAL PROGRAMS
PREPARING INDIVIDUALS FOR PRACTICE AT ALL LEVELS**

Objective	Performance Measures	Benchmarks	Timeframe
E.1. Board authorities and beliefs are foundational to education regulation	<ul style="list-style-type: none"> ▪ Board affirms education processes and decisions are congruent with Board authorities and Belief statements ▪ Board affirms administrative rules enable the evolution of nursing education 	<ul style="list-style-type: none"> ▪ Update philosophy per schedule ▪ Board engages in self-assessment activities to evaluate congruence ▪ Board clarifies the role of accreditation in the program approval process ▪ Affirms or updates current policy and rules on the role of accreditation in program approval ▪ Board clarifies their role in the regulation of UAP education ▪ Facilitates ongoing dialogue with Health and Welfare, and Professional and Technical education counterparts on the Boards future role in UAP education ▪ Board clarifies their role in the approval of distance education programs ▪ Affirm or update current policy and rules for approval of distance education programs. 	<ul style="list-style-type: none"> ▪ 2020 ▪ Ongoing and Annually ▪ 2017 ▪ 2018 - 20 ▪ 2017 ▪ 2018 - 20 ▪ 2017 ▪ 2018 - 20
E.2. Education programs meet or exceed Board-defined standards and criteria	<ul style="list-style-type: none"> ▪ Idaho statute and rules are congruent with national uniformity standards ▪ Annual report, pass rate, and site visit data are analyzed for opportunity gaps, and shared with program leadership ▪ Board sanctions are imposed in cases of program non-compliance with established criteria 	<ul style="list-style-type: none"> ▪ Evaluate and report quality outcomes of approved nursing programs, and their adherence to Board standards ▪ Evaluate and report the progress of nursing programs, and their adherence to Board-directed remediation 	<ul style="list-style-type: none"> ▪ Annually and ongoing ▪ Annually and ongoing
E.3. Education standards are responsive to changes	<ul style="list-style-type: none"> ▪ Issues, trends and evidence that may impact nursing education are analyzed by 	<ul style="list-style-type: none"> ▪ Participates in State, National, and global opportunities to dialogue and network on 	<ul style="list-style-type: none"> ▪ Ongoing

Objective	Performance Measures	Benchmarks	Timeframe
<p>in the healthcare, academic, regulatory and workplace environments</p>	<p>the Board</p> <ul style="list-style-type: none"> ▪ Board decisions, activities, and resources support development of a statewide visionary blueprint for nursing education in Idaho ▪ Transition issues for new graduates, nurses returning to practice and nurses entering new practice are addressed ▪ Meet or exceed the national benchmarks for education-related processes as defined by CORE® research data ▪ Board considers workforce needs and projections when addressing nursing education issues 	<p>current and emerging education issues</p> <ul style="list-style-type: none"> ▪ Facilitate current education rule updates as identified in the 2016 gap analysis ▪ Facilitate State efforts to implement the IOM recommendations ▪ Philosophy statements, policies, rules or statutes related to practice transitions are evaluated to ensure they support the current practice environment, and are positioned to respond to emerging trends and issues ▪ CORE® communication-related performance indicators serve as targets for improvement ▪ Board informed of current workforce characteristics and future needs 	<ul style="list-style-type: none"> ▪ 2017-2020 ▪ Annually and ongoing ▪ Ongoing ▪ Ongoing ▪ Annually and ongoing



GOVERNANCE GOAL: CULTIVATE GOVERNANCE FRAMEWORK AND CULTURE THAT SUSTAINS BOARD RELEVANCE AND SUPPORTS ACCOMPLISHMENT OF VISION, MISSION AND GOALS

Objective	Performance Measures	Benchmarks	Timeframe
G.1. Board authorities and beliefs are fundamental to effective Board governance	<ul style="list-style-type: none"> ▪ Board’s governance model promotes adherence to Mission, progress toward Vision and accomplishment of strategic goals and objectives ▪ The Board functions in close collaboration with staff, respectful of their separate but interdependent roles ▪ Internal and external Board and committee performance appraisal ensures public accountability ▪ Board provides oversight of compliance with statutory and other obligations through audit, delegation of authority and internal policies, processes and plans ▪ Board demonstrates strong ethical values and compliance with related statute and rules 	<ul style="list-style-type: none"> ▪ Governance belief statement developed and reviewed for currency and relevance ▪ BON annually self-assesses congruence of governance actions and behaviors with adopted beliefs ▪ BON advisory committees annually self-assess accomplishment of committee charge, mission ▪ Board Mission, Vision, Values, Strategic Goals reviewed for currency and relevance ▪ Governance policies reviewed for currency, relevance ▪ Board membership, structure analyzed relative to support of Mission 	<ul style="list-style-type: none"> ▪ Review-2019 ▪ Annually each spring ▪ Report annually ▪ Review-2020 ▪ Review-2021 ▪ 2017
G.2. Board engages in continuous development activities	<ul style="list-style-type: none"> ▪ Structured orientation acquaints members, committees and staff with responsibilities and expectations and enhance relationships and teamwork ▪ Board development activities strengthen Board capacity and expertise and support leadership development and succession planning 	<ul style="list-style-type: none"> ▪ Board orientation informs new Board and committee members of roles and responsibilities ▪ Board development activities, resources strengthen Board leadership and support succession strategies ▪ Provide Board education relative to key issues ▪ Plan and conduct a retreat for Board members with a focus on Board development 	<ul style="list-style-type: none"> ▪ 2017 ▪ Quarterly/ongoing ▪ Ongoing ▪ Annually
G.3. Board proactively addresses emerging trends and changes in healthcare policy	<ul style="list-style-type: none"> ▪ Board considers healthcare policy and trends in planning and decision-making ▪ Research agenda directs workforce initiatives, including implementation of the IOM “Future of 	<ul style="list-style-type: none"> ▪ Environmental scan informs the Board of emerging trends, issues ▪ Key issues identified/generative discussions scheduled 	<ul style="list-style-type: none"> ▪ Report quarterly ▪ Quarterly

Objective	Performance Measures	Benchmarks	Timeframe
	<p>Nursing” recommendations</p> <ul style="list-style-type: none"> ▪ Thorough deliberation and constructive debate reinforces collaborative decision-making on issues of importance 	<ul style="list-style-type: none"> ▪ Workforce initiative dollars awarded consistent with BON research agenda, goals, related policies ▪ Board-sponsored legislation and rulemaking guided by changes in healthcare policy 	<ul style="list-style-type: none"> ▪ Annually ▪ Annually
G.4. Board influences healthcare policy decisions on state and national levels	<ul style="list-style-type: none"> ▪ Board members and staff engage in a variety of healthcare policy arenas ▪ Board members and staff contribute to healthcare policy decision-making 	<ul style="list-style-type: none"> ▪ Members, staff participate in healthcare policy meetings, conversations, debates ▪ Members, staff engage in state, national and global policy discussions and decision-making opportunities 	<ul style="list-style-type: none"> ▪ Report quarterly ▪ Report quarterly



COMMUNICATION GOAL: FOSTER COMMUNICATION BETWEEN THE BOARD AND ITS COLLEAGUES, INTERNAL AND EXTERNAL STAKEHOLDERS AND THE PUBLIC

Objective	Performance Measures	Benchmarks	Timeframe
C.1. Board authorities and Beliefs are fundamental to effective Board communication	<ul style="list-style-type: none"> ▪ Opportunities are created to engage the public in open dialogue in order to solicit feedback and inform decisions ▪ Traditional and innovative methodologies are used to enhance communications ▪ Data and information are easily accessible to constituents and the public ▪ Policy directives guide information sharing and protect confidentiality ▪ Collaboration with others in collecting, maintaining and reporting information 	<ul style="list-style-type: none"> ▪ Communication belief statement developed, reviewed for currency and relevance ▪ Communication-related policies, processes reviewed for currency and relevance ▪ Collaborative agreements allow for data/information sharing consistent with statute, rule <ul style="list-style-type: none"> ◦ IDOL for Nursing Workforce Analysis ◦ DHW for Emergency Response Volunteers ◦ NCSBN as reporting agent for NPDB ◦ NCSBN for nursing workforce data collection reporting ▪ CORE® communication-related performance indicators serve as targets for improvement ▪ Engage in negotiated rulemaking consistent with statutory provisions ▪ Public forum incorporated into each Board meeting 	<ul style="list-style-type: none"> ▪ Review-2017 ▪ Review-2017 ▪ Ongoing ▪ 2017 ▪ 2017 ▪ Quarterly
C.2. Communication between the Board and the public is open and transparent	<ul style="list-style-type: none"> ▪ Uniform nursing workforce data is collected and made available to interested stakeholders ▪ Application of innovative electronic processes enhance information sharing between constituents and the public ▪ Complies with state and national authorities in meeting reporting obligations 	<ul style="list-style-type: none"> ▪ Uniform nursing workforce data is collected and reported ▪ Specific communication concerns are identified, analyzed and addressed ▪ Response to inquiries, requests for information are timely ▪ Technology enhances access to data ▪ Confidentiality of protected data is assured ▪ Website is maintained, regularly updated ▪ Processes/strategies to increase communication between BON and constituents are considered ▪ Licensees and employers enroll in Nursys ENotify® ▪ BON reporting to NPDB complies with established timeframes 	<ul style="list-style-type: none"> ▪ Ongoing ▪ Ongoing ▪ Ongoing ▪ Ongoing ▪ Ongoing ▪ Ongoing ▪ 2017 ▪ Report annually

ORGANIZATION GOAL: SUPPORT ORGANIZATIONAL INFRASTRUCTURE NECESSARY TO ACCOMPLISH MISSION, VISION AND GOALS

Objective	Performance Measures	Benchmarks	Timeframe
O.1. Physical environments support day-to-day operations and functions	<ul style="list-style-type: none"> ▪ Office location, space, furnishings and equipment support day-to-day operations ▪ Long-range agency growth projections and budget requests anticipate future physical space needs ▪ Current emergency response and disaster recovery plans address temporary and replacement office and space needs to support critical functions 	<ul style="list-style-type: none"> ▪ BON office is publicly convenient, accessible, cost-effective, appropriate for the BON image ▪ Agency lease is negotiated and maintained ▪ Meeting rooms are appropriate for the business conducted, including: public access, convenience, equipment use, etc. ▪ Emergency Response/Disaster Recovery Plan reviewed/revised ▪ Paperless licensure processes implemented and maintained for most applicants ▪ Paperless BON meetings initiated ▪ Recycling processes maintained 	<ul style="list-style-type: none"> ▪ Ongoing ▪ 2021 ▪ Ongoing ▪ Annual ▪ Ongoing ▪ Ongoing ▪ Ongoing
O.2. Human resources individually and collectively contribute to accomplishment of Mission and strategic goals	<ul style="list-style-type: none"> ▪ Appropriated full time staff positions (FTP) and external contractors support are sufficient to accomplish essential functions and short-term initiatives of the Board ▪ Staff are prepared through education and training for performance of primary job responsibilities ▪ Long-range agency growth projections and budget requests anticipate future human resource needs 	<ul style="list-style-type: none"> ▪ Staff adequate in # and qualified for assigned responsibilities ▪ Professional staff compensation readjustment sustained ▪ Staff compensation determined consistent with policy and appropriation ▪ Staff perform at or above expectations ▪ Outside contracts maintained for legal counsel, PRN monitoring, select operations ▪ Staff development enhances knowledge and performance ▪ FTE% dedicated to core functions are comparable to similar boards as reported in CORE® research data. 	<ul style="list-style-type: none"> ▪ Ongoing
O.3. Current and projected needs of the Board are supported through sound fiscal resources management	<ul style="list-style-type: none"> ▪ Annual budget and FTP appropriations support accomplishment of Mission and strategic goals ▪ Agency risk is managed through accepted internal controls and fiscal 	<ul style="list-style-type: none"> ▪ Develop, implement, adhere to annual budget ▪ BON fund balance >12 mos. operating costs ▪ Progress toward resolution of 2015 fiscal audit exception is determined ▪ Maintain accepted internal and external fiscal 	<ul style="list-style-type: none"> ▪ Ongoing ▪ Annual ▪ 2017-2018 ▪ Ongoing

Objective	Performance Measures	Benchmarks	Timeframe
	<p>management policies as evidenced through internal and external audits</p> <ul style="list-style-type: none"> ▪ Long-range planning considers predictions that may impact fiscal resources ▪ Fund balance supports ongoing operations in the event of unexpected revenue reduction or increased expenses 	<p>controls</p> <ul style="list-style-type: none"> ▪ 10-year agency growth plan implemented/adjusted ▪ Incorporate Zero-Base Budgeting elements to inform budget planning/development <ul style="list-style-type: none"> ◦ Strategic Plan update ◦ Gap analysis ◦ Cost center prioritization ◦ Staff allocation time study ▪ Total budget % allotted to primary BON functions is similar to comparable boards as reported in CORE research data. 	<ul style="list-style-type: none"> ▪ Ongoing ▪ Ongoing <ul style="list-style-type: none"> ◦ Annual ◦ 2018 ◦ Annual ◦ 2017 ▪ Ongoing
<p>O.4. Operations systems and resources facilitate agency processes and transactions</p>	<ul style="list-style-type: none"> ▪ Long-range planning considers projections that may impact operations systems and resources ▪ Annual budget requests include equipment and software maintenance and purchase necessary to support Board operations ▪ External contracts support operations systems ▪ A comprehensive electronic data management system, administered by the Board, supports internal and reporting processes related to licensure, discipline and fee management 	<ul style="list-style-type: none"> ▪ Outsourced systems, contracts support payroll, IT, electronic fee transactions ▪ IT plan adopted/implemented ▪ Systems/processes streamlined for efficiency, cost-effectiveness ▪ Deploy ORBS data management system to support BON operations and key processes ▪ CORE® operations- related performance indicators serve as targets for improvement ▪ New initiatives include financial projections 	<ul style="list-style-type: none"> ▪ Ongoing ▪ Ongoing ▪ Ongoing ▪ Ongoing ▪ 2017 - ongoing ▪ Ongoing

GLOSSARY OF ACRONYMS AND ABBREVIATIONS

APRN COMPACT: Advanced Practice Registered Nurse Licensure Compact

APRN: Advanced Practice Registered Nurse

APRN CONSENSUS MODEL: A plan for the future regulation of APRNs establishing standard regulatory requirements for: licensure, accreditation, certification and education for APRNs

ATD: Alternative to Discipline Program (e.g. PRN, PRP)

BON: Board of Nursing

CNA: Certified Nursing Assistant

CORE®: Commitment to On-going Regulatory Excellence: A Research Project of the National Council of State Boards of Nursing

DHW: Department of Health and Welfare

E-Notify®: On-line service that delivers electronic real-time notification of change in nurse licensure status.

ICON: Idaho Coalition on Nursing: a forum of the Board of Nursing, , Idaho Nurses Association (INA), Idaho Alliance of Leaders in Nursing (IALN) and Council of Nurse Education Leaders (CNEL)

IDOL: Idaho Department of Labor

INAC: Idaho Nursing Action Coalition: Idaho's RWJ/AARP regional action coalition committed to implementation of IOM recommendations

IOM: Institutes of Medicine: Independent, non-profit organization working outside government to provide unbiased, authoritative advice to policy-makers and the public

LPN: Licensed Practical Nurse

MA-C: Certified Medication Assistant

NCLEX®: National Council Licensure Examination for RNs/LPNs: the examination, used to measure initial competence for LPN and RN licensure in the U.S. and Canada

NCSBN: National Council of State Boards of Nursing: the organization whose membership includes the nurse licensing entities

in the U.S. and its territories as well as associate members with similar responsibilities outside the U.S.

NLC: Nurse Licensure Compact: a contract adopted by individual states that provides mutual recognition of nurse licensure between the member states

NLCA: Nurse Licensure Compact Administrators: the entity composed of NLC administrators from each state charged to administer the Compact

NPDB: National Practitioner Data Bank: a databank created by Congress in 1986 (NPDB)

NURSYS®: Nurse Licensure Information System: centralized nurse licensure database developed and maintained by NCSBN

ORBS: Optimal Regulatory Board System, the NCSBN software program used by the Idaho BON.

PRP: Practice Remediation Program: an alternative to discipline program administered by the Board of Nursing for nurses whose practice errors have been reported to the Board and who can benefit from enhanced knowledge/training/ monitoring

PRN: Program for Recovering Nurses: an alternative to discipline program administered by the Board of Nursing for nurses when practice is/may be impaired as a result of substance use and/or mental health disorders

RDP: NCSBN Regulatory Decision Pathway, a decision process that assists boards in their determination of whether the action of a nurse constitutes a violation of standard of care

RN: Licensed Professional/Registered Nurse

TERCAP®: Taxonomy of Error, Root Cause Analysis and Practice-Responsibility: An adverse event reporting system of NCSBN

UAP: Unlicensed Assistive Personnel

ULR: Uniform Licensure Requirements: standard requirements adopted by the NCSBN Delegate Assembly and endorsed by the Board in 2015