



Agenda Item 5.0

Report of the Administrative Committee

BRN Board Meeting | August 24 - 25, 2023

Administrative Committee
August 24 - 25, 2023

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Agenda Item 5.1

Executive Officer Report

BRN Board Meeting | August 24-25, 2023

BOARD OF REGISTERED NURSING
Agenda Item Summary

AGENDA ITEM: 5.1
DATE: August 24-25, 2023

ACTION REQUESTED: Executive Officer Report

REQUESTED BY: Board

BACKGROUND: Presentation of the Executive Officer Report

NEXT STEP:

PERSON TO CONTACT: Loretta Melby
Executive Officer
California Board of Registered Nursing
Loretta.Melby@dca.ca.gov



Agenda Item 5.2

Information Only: 2022-2025 Strategic Plan and Goal Progression

BRN Board Meeting | August 24-25, 2023

BOARD OF REGISTERED NURSING
Agenda Item Summary

AGENDA ITEM: 5.2
DATE: August 24-25, 2023

ACTION REQUESTED: Update on the 2022-2025 Strategic Plan and goal progression

REQUESTED BY: Mary Fagan, Vice President

BACKGROUND: The Board will receive updates on the progress towards the goals identified in the Strategic Plan for 2022 to 2025.

NEXT STEP:

PERSON TO CONTACT: Loretta Melby
Executive Officer
California Board of Registered Nursing
Loretta.Melby@dca.ca.gov



GOAL PROGRESSION 2022 – 2025 STRATEGIC PLAN

(Current as of August 14, 2023)

GOAL 1: LICENSING

<u>Goal 1: Licensing</u>		
The Board promotes licensing standards to protect consumers and support access to the profession for qualified individuals.		
1.1	Reduce license processing times to improve access and customer satisfaction.	
Success Measure(s)		Status
A.	California License by Examination: The license by exam process is reduced to within 2 weeks of graduation in California.	
1. Completed Activities		
a.	Deployed the California Graduate Nursing Program Director Portal to allow Program Directors to electronically submit graduate education data which is then imported to the applicants BreEZe application. (Enlighten Licensing Project (ELP))	
b.	Streamlined application requirements by removing photo requirement. (ELP)	
c.	Licensing staff email deficiency notices to applicants.	
d.	Updated BreEZe to allow the Enforcement Division to place and remove holds. (ELP)	
e.	Eliminated paper application from the BRN website which promotes a more efficient and expeditious application process via BreEZe. (ELP)	
f.	Implemented automatic application closure when no fee is included with the BreEZe application within a set period of time. (ELP)	
g.	Email notification sent to Program Directors every two (2) weeks to inform them of any pending approval request(s).	
h.	Streamlined the reasonable accommodation request process by removing the requirement that the nursing program submits specific documentation.	
2. Ongoing Activities		
a.	Automated email notification with status update details sent to applicants. (ELP)	
b.	To ensure accurate Board application processing time a milestone will be added based on graduation date	
c.	Automated email notification with deficiency(ies) to be sent to applicants at 30 days if program director has not entered education data in the portal	
d.	Continuing the reasonable accommodation request process improvement efforts by adding the applicant's request form to BreEZe and updating the Board's website.	
e.	Continuing with the reasonable accommodation request process improvement efforts, had initial discussions with NCSBN and the testing vendor, Pearson Vue, regarding the electronic submission of accommodation requests.	
f.	Continuous quality improvement efforts to automate the initial review and if deficiencies exist an email notification is sent; thereby, allowing staff to conduct their initial review once all documentation is received.	
g.	Identifying and implementing efficiencies to accurately reflect processing times, i.e., future graduation date.	

B.	Verifications: Process has been automated and reduced to 24 hours for license records in BreEZe/1-2 weeks for license records outside of BreEZe.	
1. Completed Activities		
a.	Effective March 10, 2022, License Verifications are completed through NURSYS®.	
b.	Requests and payment of fees for APRN certification verification and international license verification requests available online.	
c.	Identified streamlined processes allowing documents received via the mail or microfilm to be searchable by staff and attached to the BreEZe record more expeditiously.	
d.	BRN's website was updated to include a statement regarding "Primary Source" data which explains that DCA's License Search reflects the BRN's primary source information.	
e.	BreEZe interface was updated to include, but not limited to, delinquent and 8-year renewal license types allowing these records to be included in the NURSYS® daily interface.	
f.	Automated email notification with status update details sent to applicants. (ELP)	
2. Ongoing Activities		
a.	Working with NCSBN to develop and implement data cleanup process to assist with verifying information prior to BreEZe is accessible through NURSYS®.	
b.	Implementing adding APRN licensing data to NURSYS for license verification purposes.	
C.	Advanced Practice: Completion of initial review of APRN application within 30 days and review of deficient applications is completed within 30 days of receipt of documents.	
1. Completed Activities		
a.	Executed a contract with National Clearinghouse to improve the transmission and receipt of transcripts.	
b.	Expanded the California Graduate Nursing Program Director Portal (Portal) to allow Program Directors of Nurse Practitioner (NP) and Certified Nurse Midwife (CNM) programs to electronically submit NP, NP Furnishing, CNM and CNM Furnishing education data which is then imported to the applicants BreEZe application. (ELP)	
c.	Licensing staff email deficiency notices to applicants.	
d.	Identified streamlined processes allowing documents received via the mail or microfilm to be searchable by staff and attached to the BreEZe record more expeditiously.	
e.	Updated BreEZe to allow the Enforcement Division to place and remove holds. (ELP)	
f.	Eliminated paper application from the BRN website which promotes a more efficient and expeditious application process via BreEZe. (ELP)	
g.	Implemented automatic application closure when no fee is included with the BreEZe application within a set period of time. (ELP)	
h.	Executed contract with Parchment to improve the transmission and receipt of transcripts.	
i.	The Board's sunset bill, AB 2684 (Berman, Chapter 413, Statutes of 2022), provided authority to combine the initial Certified Nurse Midwife (CNM) and Nurse Practitioner (NP) license applications with the CNM and NP furnishing number applications.	
j.	Combined CNM and NP license applications with the CNM and NP furnishing number applications.	
k.	Streamlined the APRN application processes to ensure all processes/procedures adhere to the NPA which promotes a more efficient and expeditious application review process.	

l.	The Board voted during the May 2023 Board meeting to remove Method Three pathway for licensure for qualifying APRN applicants.
m.	The Board voted during the May 2023 Board meeting to only accept electronic submission of transcripts (excluding international applicants).
2. Ongoing Activities	
a.	Developing an auto issuance of PHN certification for California graduates.
b.	Continuous expansion of the Portal to allow Program Directors of Clinical Nurse Specialist (CNS) and Public Health Nurse (PHN) programs to electronically submit education data which is then imported to the applicants BreEZe application.
c.	Automated email notification with status update details sent to applicants. (ELP)
d.	Improving the combined CNM/CNMF and NP/NPF license application process.
e.	Ongoing continuous quality improvements efforts and website enhancements to increase efficiency with the APRN additional document submission process.
f.	Streamlining the out-of-state PHN certification process.
D.	Out-of-State License by Examination: Reduce processing time down to 4-8 weeks.
1. Completed Activities	
a.	Executed a contract with National Clearinghouse to improve the transmission and receipt of transcripts.
b.	Streamlined application requirements by removing photo requirement. (ELP)
c.	Identified streamlined processes allowing documents received via the mail to be searchable by staff and attached to the BreEZe record more expeditiously.
d.	Identified streamlined processes allowing documents received via the mail or microfilm to be searchable by staff and attached to the BreEZe record more expeditiously.
e.	Licensing staff email deficiency notices to applicants.
f.	Updated BreEZe to allow the Enforcement Division to place and remove holds. (ELP)
g.	Eliminated paper application from the BRN website which promotes a more efficient and expeditious application process via BreEZe. (ELP)
h.	Implemented automatic application closure when no fee is included with the BreEZe application within a set period of time. (ELP)
i.	Executed contract with Parchment to improve the transmission and receipt of transcripts.
j.	The Board voted during the May 2023 Board meeting to remove Method Three pathway for licensure for qualifying APRN applicants.
2. Ongoing Activities	
a.	Automated email notification with status update details sent to applicants. (ELP)
b.	Final rulemaking package to add California Code of Regulations (CCR), title 16, section 1410.5 regarding the requirement for a course in anatomy, physiology or microbiology with a lab component for endorsement applicants is under review by the Office of Administrative Law (OAL).

Goal 1: Licensing

The Board promotes licensing standards to protect consumers and support access to the profession for qualified individuals.

1.2 Enhance stakeholder accessibility to and communication with the BRN to improve customer satisfaction.

Success Measure(s)	Status
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A. Significant reduction of repeat callers (volume cut by 25%).	
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1. Completed Activities

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| a. | Cross trained Public Information Unit staff to perform some licensing activities, including but not limited to endorsement applications, to address the callers at the initial point of contact. |
| b. | The “Contact Us” page on the BRN website was enhanced to improve ease of completion. |
| c. | Initiated a protocol for nursing registries, hospitals, and traveling nursing companies to obtain weekly application status(es). |

2. Ongoing Activities

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|----|---|
| a. | Licensing management and staff responding to general licensing emails received from external stakeholders and initiated a target date of one (1) to four (4) business days for responses. |
| b. | Continued quality improvement efforts to inform applicants and licensees if compliant with the fingerprint submission requirement. |

Goal 1: Licensing

The Board promotes licensing standards to protect consumers and support access to the profession for qualified individuals.

1.3 Analyze and ensure fees are reasonable and align with other states/boards to ensure BRN fiscal solvency while ensuring affordability to applicants and licensees.

Success Measure(s)		Status
A.	Identification and implementation of appropriate fees.	
1. Completed Activities		
a.	The Board's sunset bill, AB 2684 (Berman, Chapter 413, Statutes of 2022), removed the minimum fee range for all licensing fees	
b.	NP/NPF combined application does not require a fee for the furnishing license	
c.	CNM/CNMF combined application does not require a fee for the furnishing license	
d.	Fees charged for Continuing Approval Visits for prelicensure nursing education programs were removed by the Board's sunset bill.	
e.	BRN removed fees for all curriculum changes to a prelicensure nursing education program except for substantive changes defined in 16 CCR 1432.	
2. Ongoing Activities		
a.	Continued partnership with DCA's Budget Office to monitor and assess BRN's fund condition.	
b.	Information and training on fund condition presented to Board by DCA's Budget Office during quarterly Board meetings.	

Goal 1: Licensing

The Board promotes licensing standards to protect consumers and support access to the profession for qualified individuals.

1.4 Improve the process for licensing by endorsement to make it more timely and cost effective while maintaining low application fees.

Success Measure(s)	Status
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A. Processing times within 4-8 weeks of receipt of all documents.	
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1. Completed Activities

a.	Cross trained Public Information Unit staff to perform some licensing activities, including but not limited to endorsement applications, to address the callers at the initial point of contact.
b.	Identified streamlined processes allowing documents received via the mail or microfilm to be searchable by staff and attached to the BreEZe record more expeditiously.
c.	Executed a contract with National Clearinghouse to improve the transmission and receipt of transcripts.
d.	Streamlined application requirements by removing photo requirement. (ELP)
e.	Licensing staff email deficiency notices to applicants.
f.	Updated BreEZe to allow the Enforcement Division to place and remove holds. (ELP)
g.	Eliminated paper application from the BRN website which promotes a more efficient and expeditious application process via BreEZe. (ELP)
h.	Implemented automatic application closure when no fee is included with the BreEZe application within a set period of time. (ELP)
i.	Executed contract with Parchment to improve the transmission and receipt of transcripts.
j.	Enhanced BreEZe to allow for applicants and licensees to pay miscellaneous fees (e.g. fingerprint fees).
k.	The Board voted during the May 2023 Board meeting to remove Method Three pathway for licensure for qualifying APRN applicants.

2. Ongoing Activities

a.	Automated email notification with status update details sent to applicants.
b.	Final rulemaking package to add CCR, title 16, section 1410.5 regarding the requirement for a course in anatomy, physiology or microbiology with a lab component for endorsement applicants is under review by OAL.

GOAL 2: ENFORCEMENT

<u>Goal 2: Enforcement</u>		
2.1	Align the enforcement processing times with the Board's efforts to ensure safe nurses continue to practice.	
Success Measure(s)		Status
A.	Reduction of processing times with sixty percent (60%) of cases meeting or exceeding the CPEI 540-day goal currently not being met.	
1. Completed Activities		
a.	Eliminated paper case processing in several areas, including but not limited to, electronic complaint processing, electronic investigative cases, transmittals to the Attorney General's Office, Expert Consultants and created the Central Enforcement File.	
b.	Executed a Memorandum of Understanding (MOU) between the Superior Court of California, County of Los Angeles and BRN to improve the receipt of court documents.	
c.	Developed and implemented new marketing materials to inform a greater number of RNs of the Intervention Program which could assist in the reduction in processing times.	
2. Ongoing Activities		
a.	Partnered with the Organizational Improvement Office (OIO) to map out the process of the Enforcement Division and the Investigation Section to identify areas in which efficiencies can be achieved.	
b.	Division of Investigation (DOI) pilot continues.	
c.	Continued quality improvement efforts to identify and address processing delays related to the intake, triage and investigation of complaints.	

Goal 2: Enforcement

2.2	Review the Board’s approach to discipline to make sure it is evidence-based and effective to protect the public.	
Success Measure(s)		Status
A.	Uniform in our approach, with regards to other healing arts boards.	
1. Completed Activities		
a.	Hired the two vacant Enforcement Deputy Chief positions which allows BRN to begin the process of reviewing the Board’s approach to discipline.	
b.	Initiated using BreZE for assigning and tracking cases for job placement and course assignments for probationers.	
c.	Coordination with DCA for a third-party cost recovery service.	
d.	Developed an Intervention Evaluation Committee Member guide which included retraining of existing and training of new Intervention Evaluation Committee (IEC) members.	
e.	Established a pilot process where Executive Management attends all IECs to provide guidance and identify efficiencies.	
f.	Hired the vacant Enforcement Nursing Education Consultant (NEC) which allows BRN to continue to review the realignment of the employment approvals and modifications process and the course assignments and approvals process.	
2. Ongoing Activities		
a.	Continue the realignment of the probation employment approval and modification of employment processes.	
b.	Continue the realignment of the probations course approvals and modification of course approval processes.	
c.	Participating with other healing arts boards in the DCA Enlightened Enforcement Project which is reviewing the Dental Board of California which includes the Chief of Enforcement acting as a subject matter expert to the co-chairs.	

GOAL 3: CONTINUING EDUCATION

<u>Goal 3: Continuing Education</u>		
The Board establishes continuing education standards to ensure ongoing nursing competency and promote public safety.		
3.1	Increase audits of RNs and education providers to ensure compliance with continuing education requirements.	
Success Measure(s)		Status
A.	Complete RN audits per Comprehensive Plan for Approving and Disapproving Continuing Education Opportunities.	
1. Completed Activities		
a.	Hired a Retired Annuitant (RA) NEC to begin streamlining the RN audit process to ensure alignment with the Comprehensive Plan for Approving and Disapproving Continuing Education Opportunities. RA NEC resigned, and a new RA NEC was hired.	
b.	Redirected a staff member who was returned from the contract tracing assignment to work with the RA NEC to streamline the RN audit process and ensure alignment with the Comprehensive Plan for Approving and Disapproving Continuing Education Opportunities.	
2. Ongoing Activities		
a.	Executive Leadership Team continues to look at the organizational structure to ensure optimal effectiveness and efficiency.	
b.	Partnering with DCA's Office of Information Services (OIS) to research the development of an IT tool to maintain continuing education (CE) provider and course data.	
c.	Review and updating the website to for transparency of the CE requirements.	
B.	Complete CEP audits per Comprehensive Plan for Approving and Disapproving Continuing Education Opportunities.	
1. Completed Activities		
a.	Hired a RA NEC to begin streamlining the RN audit process to ensure alignment with the Comprehensive Plan for Approving and Disapproving Continuing Education Opportunities. RA NEC resigned, and a new RA NEC was hired.	
b.	Approval of CCR, title 16, sections 1450 and 1456 by OAL on August 12, 2022.	
2. Ongoing Activities		
a.	Executive Leadership Team continues to look at the organizational structure to ensure optimal effectiveness and efficiency.	
b.	Partnering with OIO to map out the process of the Continuing Education Provider (CEP) audit process.	

Goal 3: Continuing Education

The Board establishes continuing education standards to ensure ongoing nursing competency and promote public safety.

3.2 Analyze, and update if needed, ways to improve the continuing education reporting process to streamline and improve customer service.

Success Measure(s)		Status
A.	CE reporting consistent with Comprehensive Plan for Approving and Disapproving Continuing Education Opportunities.	
1. Completed Activities		
a.	Hired a RA NEC to begin developing the CEP audit process and ensure alignment with the Comprehensive Plan for Approving and Disapproving Continuing Education Opportunities. RA NEC resigned, and a new RA NEC was hired.	
2. Ongoing Activities		
a.	Updating the Continuing Education request and approval process to include, but not limited to, integrating the form submitted by the continuing education provider for course approval into BreEZe.	

GOAL 4: EDUCATIONAL OVERSIGHT

<u>Goal 4: Educational Oversight</u>		
The Board establishes nursing education standards to ensure the quality of education and consumer protection.		
4.1	Align educational oversight activities with national accreditation programs to identify and reduce any redundancies.	
Success Measure(s)		Status
A.	Visits conducted in collaboration with accreditors.	MET
1. Completed Activities		
a.	Conducted the first joint Continuing Approval Visit (CAV) with accreditors to increase efficiencies.	
b.	Implemented new policies and procedures to align with accreditation processes, where appropriate (i.e., allowing nursing programs to submit the accreditors report and supplement any missing information with an addendum thereby minimizing the workload of the Dean or Director).	
c.	Faculty approvals available on the DCA License Search page.	
d.	Data migration of existing faculty approvals completed in August 2022.	
2. Ongoing Activities		
a.	Staff is reviewing the faculty approval process to streamline, data collection to track growth and recession by region, and creating a faculty resource for academia.	
b.	Initiated the development of the uniform methods required per the Board's sunset bill. This development has included, but is not limited to, meeting with three nursing accrediting agencies.	

Goal 4: Educational Oversight

The Board establishes nursing education standards to ensure the quality of education and consumer protection.

4.2 Support regional consortiums to promote equitable clinical placements and reduce clinical impactation.

Success Measure(s)	Status
A. Regional data accessible on website for public and Board use.	

1. Completed Activities

a.	The Board's sunset bill, AB 2684 (Berman, Chapter 413, Statutes of 2022) prohibits the Board from considering nursing workforce issues, including those identified under BPC section 2717 as factors for purposes of enrollment increase considerations. This conflicts with CSA Audit 2019-120 Recommendation 2 issued to the Board.
b.	The Board's sunset bill, AB 2684 (Berman, Chapter 413, Statutes of 2022) amended BPC Section 2786 to read: (c)(3)(A) The board shall annually collect, analyze, and report information related to the number of clinical placement slots that are available and the location of those clinical placement slots within the state, including, but not limited to, information concerning the total number of placement slots a clinical facility can accommodate and how many slots the programs that use the facility will need. (B) The board shall utilize data from available regional or individual institution databases. (C) The board shall place the annual report on its internet website.
c.	Updated CCR, title 16, sections 1432 to require the EDP-I-01 for any new campus location(s).
d.	Developed and implemented a regional data tool that reflects Board actions of enrollment increase requests to inform the Board when making evidence-based decisions and increase transparency to the public.

2. Ongoing Activities

a.	The Board will continue implementation activities for amended BPC Section 2786(c)(3)(A-C).
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4.3	Continue to assess and report on workforce needs and the availability of clinical placement sites to ensure the Board’s decisions are evidence-based.	
Success Measure(s)		Status
A.	Regional data accessible on website for public and Board use.	
1. Completed Activities		
a.	Nursing Education and Workforce Advisory Committee (NEWAC) restructure approved during the November 2021 Board meeting with the Charter approved during the May 2022 Board meeting.	
b.	The contract for the University of California, San Francisco (UCSF) was extended and updated to include regional analysis as a contract deliverable.	
c.	Approval of CCR, title 16, section 1427 by OAL on October 14, 2022.	
d.	During the December 2022 and March 2023 meetings, NEWAC created the following subcommittees: 1) Simulation Standards, 2) Workforce Survey, 3) Clinical Placement and Impaction, 4) Cultural Competency, Diversity Pathway to Nursing, 5) Theory Practice Gap and New Grad Orientation, 6) Workforce Retention, 7) Curriculum Standards and Guidelines, and 8) Faculty. These subcommittees will assist NEWAC in the assessment and reporting of workforce needs and the availability of clinical placement sites to the Board.	
e.	Posted the “California Board of Registered Nursing 2020 Survey of Registered Nurses” report, dated May 1, 2023, to the BRN website and a presentation by University of California, San Francisco on the analysis of nursing workforce was given during the May 2023, Board meeting.	
2. Ongoing Activities		
a.	In partnership with DCA’s OIS a clinical placement technological tool was developed and is in the testing phase. This tool that will compile and aggregate facility and school specific information and compare data with HCAI’s (formerly OSHPD), list of health care facilities.	
b.	Initiated discussions at the February 2023 Board meeting regarding the requirements of BPC 2717 in which the Board shall develop a plan to address regional areas of shortage identified by its nursing workforce forecast.	
c.	Initiate collaboration with DCA’s OIS to implement an interactive map displaying information, including but not limited to, student enrollment numbers, faculty resources, and nursing workforce.	
d.	Continuous quality improvement efforts to enhance the Board’s website to make nursing workforce data easily accessible.	

Goal 4: Educational Oversight

The Board establishes nursing education standards to ensure the quality of education and consumer protection.

4.4	Evaluate educational requirements and initiate evidence-based revisions as appropriate.	
Success Measure(s)		Status
A.	16 CCR 1426 is current and is evidence based to ensure preparation of the applicant and meet the mission of the Board.	
1. Completed Activities		
a.	The Board’s request to add language to AB 2684 (Berman, Chapter 413, Statutes of 2022) regarding 500-hour direct patient care requirement was successful. BPC 2756(a)(2) was added to state: An approved school of nursing or nursing program shall meet a minimum of 500 direct patient care clinical hours in a board-approved clinical setting with a minimum of 30 hours of supervised direct patient care clinical hours dedicated to each nursing area specified by the board.	
b.	Enhanced the Board’s website to include nursing program’s tuition and enrollment numbers.	
c.	Implemented second look process on any faculty approval request submitted by the Board approved Program Directors to ensure all information has been reviewed prior to denying a request for faculty approval	
2. Ongoing Activities		
a.	Final rulemaking package to add CCR, title 16, section 1410.5 regarding the requirement for a course in anatomy, physiology or microbiology with a lab component for endorsement applicants is under review by OAL.	
b.	Initial rulemaking package to update CCR, title 16, section 1426 to remove the requirement for 75 percent of clinical hours to be completed in direct patient care in a specified nursing content area is under review by DCA Legal.	

GOAL 5: LAWS AND REGULATIONS

<u>Goal 5: Laws and Regulations</u>	
The Board enforces the laws within its purview, establishes regulations and advocates for legislation to effectively carry out its mission.	
5.1	Ensure all stakeholder voices are heard and given equal consideration for better informed policies.
Success Measure(s)	
A.	Increased stakeholder engagements.
1. Completed Activities	
a.	Reviewed and restructured the membership composition of non-legislative advisory committees to include a public member.
b.	Held public interested parties meetings to solicit comments on regulatory language that the NPAC was recommending to the Board.
c.	The Board's Executive Officer (EO) and staff attended California Organization of Associate Degree Nursing (COADN) and California Association of Colleges of Nursing (CACN) joint conference in Monterey in October 2022.
d.	Board voted during the November 2022 meeting to create a Certified Registered Nurse Anesthetist Advisory Committee (CRNAAC).
e.	Board voted during the November 2022 meeting to create a Created a Clinical Nurse Specialist Advisory Committee (CNSAC).
f.	Conducted an in-depth training in January 2023, including but not limited to, the Recommended Guidelines for Disciplinary Orders and Conditions of Probation (Disciplinary Guidelines) through a joint NPAC and NMAC public meeting.
g.	EO attended NCSBN Executive Officer Orientation meeting in Chicago in January 2023.
h.	EO and staff attended COADN spring conference in Palm Springs in March 2023.
i.	EO and Board President attended 2023 NCSBN Midyear Meeting Executive Leadership and President Forum in Seattle in March 2023.
j.	EO and staff attended CACN spring conference in Long Beach April 2023.
k.	Implemented a process to email a reminder to the Deans and Directors via the ListServ on Board and Committee meeting days.
l.	EO appointed CRNA members to the CRNAAC and CNS members to the CNSAC.
m.	Held a public NEWAC interested parties meeting to solicit comments on issues pertinent to registered nursing education and/or workforce on June 15, 2023.
n.	EO and Board President attended 2023 NCSBN Annual Meeting in Chicago in August 2023.
Status	

2. Ongoing Activities	
a.	Continue the WebEx platform for all public meetings to allow for greater public participation.
b.	DCA and BRN staff, including but not limited to, DCA Regulations Attorney, Board Legal Counsel, Executive Officer, Chief of Legislative Affairs, attend Board meetings, stakeholder meetings and taskforce meetings to provide information.
c.	Continue public member recruitment for both CRNAAC and CNSAC.
d.	Continue outreach and onboarding activities for advisory committee members, as appropriate.

Goal 5: Laws and Regulations

The Board enforces the laws within its purview, establishes regulations and advocates for legislation to effectively carry out its mission.

5.2 Review statutes and advocate for updates or new statutes as appropriate to ensure they are current and based on evidence and best practices.

Success Measure(s)		Status
A.	Established policies and procedures with a monitoring and reevaluation component.	
1. Completed Activities		
a.	Hired and initiated the on-boarding of the new Chief of Legislative Affairs to lead this endeavor and the change agent for the organization.	
b.	Submitted legislative proposal for code clean up to the Senate Business and Professions Committee.	
c.	Provided technical assistance and proposed language for inclusion in a legislative bill creating a retired license (AB 633 (Patterson)).	
2. Ongoing Activities		
a.	Enhanced partnership with DCA to include regular meetings on bill impact and implementation plans; identification of outdated statutes requiring repeal; and advocate for updates to existing or new statutes.	
b.	Developing policies and procedures to ensure statutes and regulations are current and based on evidence and best practices.	

Goal 5: Laws and Regulations

The Board enforces the laws within its purview, establishes regulations and advocates for legislation to effectively carry out its mission.

5.3 Review regulations and revise as necessary to ensure currency and alignment with best practices and evidence.

	Success Measure(s)	Status
A.	Enhanced regulation process to clear backlogs and prevent future backlogs.	

1. Completed Activities

a.	Hired and initiated the on-boarding of the new Chief of Legislative Affairs to lead this endeavor and the change agent for the organization.
b.	Approval of CCR, title 16, section 1480 on December 23, 2021.
c.	Approval of CCR, title 16, section 1484 on February 8, 2022.
d.	Approval of CCR, title 16, section 1486 on August 8, 2022.
e.	Approval of CCR, title 16, sections 1450 and 1456 on August 12, 2022.
f.	Approval of CCR, title 16, section 1427 on October 14, 2022.
g.	Approval of CCR, title 16, sections 1423 and 1432 on October 18, 2022.
h.	Established a ListServ for regulations packages.
i.	Approval of CCR, title 16 section 1452 on December 14, 2022.
j.	Approval of CCR, title 16 section 1426 on December 19, 2022.
k.	Approval of CCR, title 16, sections 1480, 1481, 1482.3, 1482.4, and 1487 on December 23, 2022.
l.	Conducted an in-depth training in January 2023, including but not limited to, the Disciplinary Guidelines through a joint NPAC and NMAC public meeting.

2. Ongoing Activities	
a.	The Board is continuing its efforts to address the backlog of regulations along with the current regulation packages.
b.	Enhanced partnership with DCA to include regular meetings on bill impact and implementation plans; identification of outdated statutes requiring repeal; and advocate for updates to existing or new statutes.
c.	Developing policies and procedures to enhance bill analyses processes.
d.	Developing, repairing, and fostering relationships with Legislators, legislative staff, and external stakeholders.
e.	Established regular meetings with the Board President and/or Chair of the Legislative Committee and Board staff.
f.	Final proposed rulemaking package to add CCR, title 16, section 1410.5 regarding the requirement for a course in anatomy, physiology or microbiology with a lab component for endorsement applicants is under review by OAL.
g.	Proposed text to add CCR, title 16, section 1419.5 for a retired license category is under development.
h.	Initial rulemaking package to update CCR, title 16, section 1452 to clarify that the implicit bias training requirement is not eligible for an exemption is under review by DCA Legal.
i.	Initial rulemaking package to update CCR, title 16, section 1426 to remove the requirement for 75 percent of clinical hours to be completed in direct patient care in a specified nursing content area is under review by DCA Legal.

GOAL 6: ORGANIZATIONAL DEVELOPMENT

<i>Goal 6: Organizational Development</i>	
The Board strives to build an excellent organization through effective and responsible Board governance, leadership, management.	
6.1	Assess dialogue with stakeholders to increase transparency.
Success Measure(s)	
A.	Numbers and ratings for customer service survey improved.
1. Completed Activities	
a.	Conducted BRN All Staff meeting in June 2022.
b.	Conducted BRN All Staff meeting in November 2022.
c.	Established an internal SharePoint site to improve efficiency of the review and record keeping process for media inquiries.
d.	Conducted BRN All Staff meeting in May 2023.
2. Ongoing Activities	
a.	Continue media campaign to increase engagement through social media utilizing Facebook, Instagram, LinkedIn, and the BRN website.
b.	Increase transparency by encouraging individuals to sign up for the BRN ListServ.
c.	Engage with various stakeholders regarding the Enforcement processes.
d.	Pro-actively communicate with media to share Board updates (e.g. AB 890).
e.	Developing outreach to encourage individuals to use Livescan technology when submitting their fingerprints for an endorsement application. The use of Livescan technology can reduce the processing time for endorsement applications.
f.	Continuous quality improvement efforts to enhance and increase the accessibility of the Board's website.

Goal 6: Organizational Development

The Board strives to build an excellent organization through effective and responsible Board governance, leadership, management.

6.2 Identify and implement opportunities to improve practices and communication with Board Members to ensure the highest level of meeting preparation and transparency.

Success Measure(s)	Status
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A. Numbers and ratings for customer service survey improved.	
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1. Completed Activities

a.	Restructured the Committee and Board meeting formats so that the Board meetings focus on decision making and education while the Committee meetings concentrate on the matters being presented to the Committees.
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b.	Established a procedure to include a standing agenda item to report information to the Board on advisory committee activities and Board activities to the advisory committees.
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2. Ongoing Activities

a.	Identified efficiencies in posting materials in advance of meetings and in formats more accessible to the public.
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b.	Meetings with BRN liaisons and committee chairs are scheduled as appropriate.
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c.	Provide educational presentations and tools to Board members as appropriate.
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d.	Reviewing and enhancing BRN Board member onboarding and continued training processes to support DCA's Board Member Orientation Training (BMOT).
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Goal 6: Organizational Development

The Board strives to build an excellent organization through effective and responsible Board governance, leadership, management.

6.3 Provide ongoing continuing education for Board Members to increase their effectiveness in serving as a Board Member.

Success Measure(s)	Status
A. Provide informational sessions at Board meetings.	

1. Completed Activities

a.	Provided training during the January 13, 2022, Board meeting on how to research a legislative bill using LegInfo.com.
b.	Presentation on the role and scope of the RN in aesthetic medicine during the May 18-19, 2022, Board meeting.
c.	Implemented and trained Board Members on new discipline voting platform processes.
d.	Presentation by HCAI on scholarship and loan repayment programs for nursing students during the February 15-16, 2023, Board meeting.
e.	Presentation by BRN’s Chief of Legislative Affairs on the legislative process during the March 16, 2023, Board meeting.
f.	Presentation by the BRN’s Chief of the Enforcement Division on the Disciplinary Guidelines during the March 16, 2023, Board meeting.
g.	Presentation by University of California, San Francisco on analysis of nursing workforce conducted pursuant to BPC section 2717 during the May 17, 2023, Board meeting.
h.	Presentation by Surani Kwan with Sutter Health on employment for Nurse Practitioners with the 103-distinction during the June 29, 2023, Nursing Practice Committee meeting.

2. Ongoing Activities

a.	Information and training on fund condition presented to Board by DCA’s Budget Office during quarterly Board meetings.
b.	Information and training on the nursing profession presented to Board during quarterly Board meetings as appropriate.
c.	Updating the on-boarding materials and general information for Board Members.
d.	Continuous quality improvement efforts to provide BRN process training and tools at Board meetings.

GOAL 7: OUTREACH

<u>Goal 7: Outreach</u>		
The Board informs and educates consumers, licensees, and stakeholders about the practice and regulation of the profession.		
7.1	Create, implement, and evaluate a comprehensive outreach plan to build and maintain relationships and support licensees and consumers while carrying out the Board's mission.	
Success Measure(s)		Status
A.	Numbers and ratings for customer service survey improved.	
1. Completed Activities		
a.	Developed and implemented new marketing materials to inform a greater number of RNs of the Intervention Program.	
b.	Developed and implemented new outreach materials to inform a greater number of individuals and grow the visibility of the expert practice consultant opportunity.	
2. Ongoing Activities		
a.	Developing policies and procedures to implement and evaluate a comprehensive outreach plan.	
b.	Continuous quality improvement efforts on outreach and marketing efforts, including but not limited to, grow participation in the Intervention Program, grow the visibility of the expert practice consultant opportunity and recruit and retain IEC members.	
c.	Continue media campaign to increase engagement through social media utilizing Facebook, Instagram, and LinkedIn.	
d.	Increase transparency by encouraging individuals to sign up for the BRN ListServ.	
e.	Collaborate with CDPH to provide outreach and facilitate relationship with CDPH licensees and facilities.	
f.	Collaborate with NCSBN and Executive Officers of Boards of Nursing in all jurisdictions.	
g.	DCA and BRN staff, including but not limited to, Executive Officer, Board Legal Counsel, Assistant Executive Officer, Chief of Legislative Affairs, Chief of Enforcement, Chief of Licensing, NECs, attend Board meetings, stakeholder meetings and taskforce meetings to provide information.	



Agenda Item 5.3

Information Only: Registered Nursing Fund Condition (presentation by DCA Budget Office)

BRN Board Meeting | August 24-25, 2023

BOARD OF REGISTERED NURSING
Agenda Item Summary

AGENDA ITEM: 5.3
DATE: August 24-25, 2023

ACTION REQUESTED: Fund condition report

REQUESTED BY: Board

BACKGROUND: Presentation on the condition of the Board of Registered Nursing Fund

NEXT STEP:

PERSON TO CONTACT: Matthew Yeates
Deputy Chief, Consumer Services and Board Operations Division
California Board of Registered Nursing
Matthew.Yeates@dca.ca.gov

0761 - Board of Registered Nursing Fund Analysis of Fund Condition
(Dollars in Thousands)
2023 Budget Act

Prepared on 8.7.23

w_2022-23 projections based on FM 12

	PY 2022-23	CY 2023-24	BY 2024-25	BY +1 2025-26
BEGINNING BALANCE	\$ 55,941	\$ 72,780	\$ 85,387	\$ 126,527
Prior Year Adjustment	\$ -	\$ -	\$ -	\$ -
Adjusted Beginning Balance	\$ 55,941	\$ 72,780	\$ 85,387	\$ 126,527
REVENUES, TRANSFERS AND OTHER ADJUSTMENTS				
Revenues				
4121200 - Delinquent fees	\$ 829	\$ 1,120	\$ 1,120	\$ 1,120
4127400 - Renewal fees	\$ 49,542	\$ 48,593	\$ 48,593	\$ 48,593
4129200 - Other regulatory fees	\$ 626	\$ 2,215	\$ 2,215	\$ 2,215
4129400 - Other regulatory licenses and permits	\$ 27,945	\$ 26,304	\$ 26,304	\$ 26,304
4143500 - Miscellaneous Services to the Public	\$ 10	\$ -	\$ -	\$ -
4163000 - Income from surplus money investments	\$ 1,097	\$ 1,229	\$ 1,423	\$ 2,021
4171100 - Other Revenue Cost Recoveries	\$ 2	\$ -	\$ -	\$ -
4171400 - Escheat of unclaimed checks and warrants	\$ 18	\$ -	\$ -	\$ -
4172500 - Miscellaneous revenues	\$ 305	\$ -	\$ -	\$ -
Totals, Revenues	\$ 80,374	\$ 79,461	\$ 79,655	\$ 80,253
Loan from/to the Board of Registered Nursing Fund (0761) to/from the General Fund (0001) per Item 1111-011-0761, Budget Act of 2020	\$ -	\$ -	\$ 30,223	\$ -
Totals, Transfers and Other Adjustments	\$ -	\$ -	\$ 30,223	\$ -
TOTALS, REVENUES, TRANSFERS AND OTHER ADJUSTMENTS	\$ 80,374	\$ 79,461	\$ 109,878	\$ 80,253
TOTAL RESOURCES	\$ 136,315	\$ 152,241	\$ 195,265	\$ 206,780
Expenditures:				
1111 Department of Consumer Affairs Regulatory Boards, Bureaus, Divisions (State Operations)	\$ 58,510	\$ 62,785	\$ 64,669	\$ 66,609
9892 Supplemental Pension Payments (State Operations)	\$ 654	\$ 654	\$ 654	\$ -
9900 Statewide General Administrative Expenditures (Pro Rata) (State Operations)	\$ 4,371	\$ 3,415	\$ 3,415	\$ 3,415
TOTALS, EXPENDITURES AND EXPENDITURE ADJUSTMENTS	\$ 63,535	\$ 66,854	\$ 68,738	\$ 70,024
FUND BALANCE				
Reserve for economic uncertainties	\$ 72,780	\$ 85,387	\$ 126,527	\$ 136,757
Months in Reserve	13.1	14.9	21.7	23.4

NOTES:

1. Assumes workload and revenue projections are realized in BY +1 and ongoing.



Agenda Item 5.4

**Information Only: Presentation by the
National Council of State Nursing Boards (NCSBN)
on the New Nursing Shortage Report**

BRN Board Meeting | August 24-25, 2023

BOARD OF REGISTERED NURSING
Agenda Item Summary

AGENDA ITEM: 5.4
DATE: August 24-25, 2023

ACTION REQUESTED: Presentation by the National Council of State Nursing Boards (NCSBN) on the new nursing shortage report

REQUESTED BY: Board

BACKGROUND: In April 2023 NCSBN shared a [news release](#) that “Projects Significant Nursing Workforce Shortage and Crisis”. NCSBN’s Director of Research will provide the Board a presentation on the findings, including a general overview of the study and a detailed dive into the effects from COVID and the projected shortage results.

NEXT STEP:

PERSON TO CONTACT: Loretta Melby
Executive Officer
California Board of Registered Nursing
Loretta.Melby@dca.ca.gov



Agenda Item 5.5

**Information Only: Presentation by the
Department of Consumer Affairs Internal Audit Office on
the State Leadership Accountability Act (SLAA)**

BRN Board Meeting | August 24-25, 2023

BOARD OF REGISTERED NURSING
Agenda Item Summary

AGENDA ITEM: 5.5
DATE: August 24-25, 2023

ACTION REQUESTED: Presentation by the Department of Consumer Affairs Internal Audit Office on the State Leadership Accountability Act (SLAA)

REQUESTED BY: Board

BACKGROUND: [Government Code sections 13400 through 13407](#), known as the State Leadership Accountability Act (SLAA), was enacted to reduce the waste of resources and strengthen internal control.

SLAA requires each state agency to maintain effective systems of internal control, to evaluate and monitor the effectiveness of these controls on an ongoing basis, and to biennially report on the adequacy of the agency's systems of internal control.

This presentation is given as continuing education to the Board and interested stakeholders.

NEXT STEP:

PERSON TO CONTACT: Evon Lenerd Tapps
Assistant Executive Officer
California Board of Registered Nursing
Evon.Lenerd@dca.ca.gov

INTERNAL AUDIT OFFICE

1625 N. Market Boulevard, Suite N-324, Sacramento, CA 95834
P (916) 574-8190 | InternalAudit@dca.ca.gov | www.dca.ca.gov

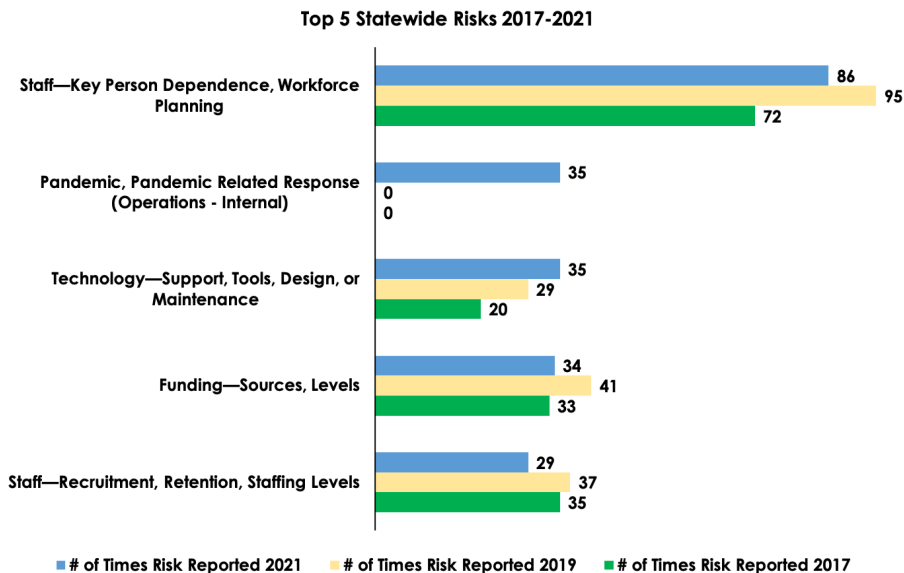


STATE LEADERSHIP ACCOUNTABILITY ACT (SLAA)

Authority and Background:

Government Code sections 13400 through 13407, known as the State Leadership Accountability Act (SLAA), was enacted to reduce resource waste and strengthen internal controls under guidelines provided by the Department of Finance (DOF).

The SLAA requires that the Department of Consumer Affairs (DCA or Department) Proper¹, and Boards, Commission and Committee (Boards) report on the adequacy of the entity’s internal controls and monitoring practices by December 31 of each odd numbered year.² SLAA is applicable to operational, programmatic, and administrative activities of state agencies and intended to reinforce the responsibility of management. The following chart³ is a comparison of the most commonly reported risks.



Process and Roles:

The reporting process and roles specific to DCA Boards is as follows:

The SLAA Report (required December 31st of every odd year):

- Identifies the highest risks⁴ for the Board
- Submitted by the Agency Head -- Executive Officer
- Submitted to DOF through the SLAA web portal on/before December 31 of odd years
- Posted to the Board’s website

Note: SLAA Reports are public documents and can be viewed at any time on the DOF website.

¹ Bureaus and Programs all fall under DCA Proper, which has a reporting relationship to the DCA Director.

² Reporting requirements are in Government Code section 13405(a) and State Administrative Manual section 20060. Templates and tools are available at <http://www.dof.ca.gov/Programs/Osae/SLAA/>.

³ DOF chart available at <https://dof.ca.gov/programs/osae/state-leadership-accountability-act-slaa/>.

⁴ Per lessons learned for the 2021 Odd Year Report, DOF will not accept the designation of a risk as “other.” A specific category must be selected from the drop-down menu in the DOF SLAA portal.

STATE LEADERSHIP ACCOUNTABILITY ACT (SLAA)

The SLAA Implementation Plan (required every six months):

- Reports on the progress made to address identified risks in the SLAA Report
 - Includes mitigation activities to ensure appropriate corrective action(s) is being taken
 - Submitted by the Agency Head -- Executive Officer
 - Submitted to DOF through the SLAA web portal
- Note:** Implementation Plans are not public documents and therefore not posted by DOF.

Internal Audits Office (IAO) Role:

- Serve as the Department's coordinator and point of contact with DOF
- Provide advice/consulting support services to DCA and Boards
- Coordinate review of draft SLAA Report and Implementation Plans by the DCA Internal Audits Committee (IAC) and the Business, Consumer Services, and Housing Agency (Agency)
- Notify Boards when final approval is received to submit via the SLAA portal
- Retain a final copy of the SLAA Report and Implementation Plans

Board Executive Officer Role:

- Draft the SLAA Report, which identifies and documents the Board's risks
 - Develop SLAA Implementation Plan(s) for each identified risk to ensure it is properly controlled and monitored – reporting every six months on progress made to mitigate risks
 - Submit draft SLAA Report and Implementation Plans to IAO for review
 - Respond to questions from the Department, Agency, or DOF as requested
 - Submit the final approved SLAA Report and SLAA Implementation Plans to DOF through the SLAA portal on or before the designated due date(s)
 - Post the SLAA Report to the Board's public website
- Note:** Implementation Plans do not need to be posted to the Board's website.

Reporting Deadlines:

- December 31, 2023: **NEW** SLAA Report
 - October 31, 2023: Board draft SLAA Report due to IAO
 - November 30, 2023: IAC to review and approve SLAA Report
 - December 23, 2023: Agency to provide final approval of SLAA Report
 - December 31, 2023: SLAA Report must be submitted to DOF via SLAA Portal
- June 30, 2024: SLAA Implementation Plan
- December 31, 2024: SLAA Implementation Plan
- June 30, 2025: SLAA Implementation Plan
- December 31, 2025: **NEW** SLAA Report

Resources:

- DCA 2021 SLAA Report: [DCA 2021 SLAA Odd Year Report](#)
- Example of other entities' SLAA Reports: [State Leadership Accountability Act Reports](#)
- SLAA Risk Catalog: [State Leadership Accountability Act Risk Catalog](#)

Contact Information:

- DCA Internal Audit Office: Dadang Prihadi, Audit Chief, Dadang.Prihadi@dca.ca.gov
- DCA Internal Audit Office: Hoang Ngo, Audit Supervisor, Hoang.Ngo@dca.ca.gov



Agenda Item 5.6

Discussion and Possible Action: Regarding 2024 Board and Committee Meeting Dates

BRN Board Meeting | August 24-25, 2023

BOARD OF REGISTERED NURSING
Agenda Item Summary

AGENDA ITEM: 5.6
DATE: August 24-25, 2023

ACTION REQUESTED: Discussion and possible action regarding Board and Committee meeting dates for 2024

REQUESTED BY: Dolores Trujillo, President

BACKGROUND: In September 2020, the Board adopted a plan for the selection of future meeting dates which included flexibility with regard to meeting dates, format, and location, depending on factors such as the state of emergency.

The Board needs to post the meeting dates for 2024 on its website. Consideration of future Board and Committee meeting dates should include delegating authority to the Executive Officer to make changes, if necessary, in regard to dates, format, and location of the meetings based on business needs.

NEXT STEP: Place on Board agenda

PERSON TO CONTACT: Dolores Trujillo
President
California Board of Registered Nursing
Dolores.Trujillo@dca.ca.gov

BRN Board and Committee Meetings - 2024

January 25, 2024

Board Committee Meetings

Nursing Practice Committee
Education/Licensing Committee
Enforcement/Intervention Committee
Legislative Committee

February 28-29, 2024

Board Meeting

March 2024

No Scheduled Meetings

April 18, 2024

Board Committee Meetings

Nursing Practice Committee
Education/Licensing Committee
Enforcement/Intervention Committee
Legislative Committee

May 22-23, 2024

Board Meeting

June 20, 2024

Board Committee Meetings

Nursing Practice Committee
Education/Licensing Committee
Enforcement/Intervention Committee
Legislative Committee

July 2024

No Scheduled Meetings

August 21-22, 2024

Board Meeting

September 2024

No Scheduled Meetings

October 24, 2024

Board Committee Meetings

Nursing Practice Committee
Education/Licensing Committee
Enforcement/Intervention Committee
Legislative Committee

November 20-21, 2024

Board Meeting

December 2024

No Scheduled Meetings
