

**Ohio Board of Nursing  
Budget Testimony  
Fiscal Years 2016-2017**

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Senate Medicaid Committee



**Ohio Board of Nursing  
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*“By virtue of its numbers and capacity, the nursing profession has the potential to effect wide-reaching changes in the health care system...Nurses thus are poised to help bridge the gap between coverage and access, to coordinate increasingly complex care for a wide range of patients, to fulfill their potential as primary care providers to the full extent of their education and training, and to enable the full economic value of their contributions across practice settings to be realized.” Institute of Medicine (IOM) report, “The Future of Nursing: Leading Change, Advancing Health.”*

## **Budget Testimony**

Chair Burke, Vice Chair Manning, Ranking Minority Member Cafaro, and members of the Senate Medicaid Committee, my name is Betsy Houchen and I am the Executive Director of the Ohio Board of Nursing (Board). Thank you for the opportunity to testify on behalf of the Board. By way of background, I have served as Executive Director since 2005, and I am a registered nurse and attorney.

The Board currently regulates over 270,000 licenses and certificates. Each fiscal year since 2009, newly licensed registered nurses (RNs) and licensed practical nurses (LPNs) have increased the total nursing population in Ohio by an average of 15,000. Complaint numbers have risen from just over 5,500 in fiscal year 2009 to nearly 9,800 in fiscal year 2014.

Our public protection role is critical; nursing touches virtually every citizen of Ohio. Ohioans expect nurses to obtain an adequate level of educational preparation, follow established practice standards, and provide competent nursing care. They also expect the Board to address unsafe practitioners so vulnerable populations are protected. Board operations are designed to meet these public and professional expectations.

### **Self-Sufficient Funding**

The Board receives no General Revenue funds. The Board of Nursing is totally funded by license fees paid by the health care professionals regulated by the Board. The current fees have been in place for over ten years, since 2004.

### **Staffing Levels, Increasing Workload, and Budget Request**

The Board is currently funded for 67 full-time and 7 intermittent/part-time staff to regulate over 270,000 licenses and certificates and over 224 education programs and training programs, and resolve nearly 9,800 complaints. Over the past decade, we have reported a steady and significant increase in complaints and numbers of licensees. These increases reflect nursing's critical and increasing role in meeting the health care needs of Ohioans. Complaint numbers are also impacted by the increased visibility of licensing boards and the proactive role the Board has taken in identifying dangerous practices, including collaborating more than ever with law enforcement and regulatory agencies and increasing the use of relevant prescriber information that is part of the OARRS drug reporting system. The Board recognizes the importance of being accountable and meeting the expectations of public and professional stakeholders.

The budget authorization request for fiscal years 2016-2017 will assist the Board to meet these expectations. The Board is requesting authorization to fund three additional positions, two investigators and one hearing examiner, to enable the Board to more rapidly resolve the escalating number of complaints and disciplinary cases.

Two additional investigators are needed to process the staggering number of complaints. For fiscal years 2013-2014, the Board received 17,818 complaints, as compared to 14,178 complaints in the prior biennium. The Board diligently works to investigate complaints in a timely manner, but with the increasing numbers of complaints, investigators are having difficulty managing their large caseloads. Currently the caseload of each Board investigator ranges from 88-169 cases; the National Council

of State Boards of Nursing recommends a caseload of 50 per investigator. The Board has more complaints and cases to investigate than any other professional regulatory board in Ohio, with comparably fewer investigators.

Investigators collect evidence by reviewing medical records, conducting interviews, and meeting with witnesses, health care employers and hospital administrators. They also assist law enforcement officials and local prosecutors, serve as witnesses in administrative hearings and court proceedings, and assist Assistant Attorneys General in preparing hearing cases.

The two additional investigators will enable the Board to increase its work with local law enforcement to jointly investigate cases; conduct prescription drug abuse and drug trafficking investigations; obtain police reports and court records; communicate with city or county prosecutors for grand jury testimony in common pleas court; and interview applicants and witnesses. Due to the absence of dedicated law enforcement for drug cases in some regions or counties in Ohio, Board investigators conduct the entire drug case investigation and take the cases directly to the County Prosecutor. These cases are extremely time consuming and complex, but have resulted in indictments.

The Board is also requesting funding for an additional Hearing Examiner due to the increase in the number of administrative hearings and the need to conduct the hearings in a timely manner in order to remove dangerous practitioners from patient care. The Board issues a Notice of Opportunity for Hearing (Notice) with the intent to impose disciplinary sanctions based on violations such as criminal conduct, drug theft, patient abuse, or sub-standard nursing practice. After receiving a Notice, the nurse may request a hearing, similar to a court proceeding, where a Hearing Examiner presides and each side presents their evidence. Administrative hearings must be held in accordance with Ohio Revised Code Chapter 119. requirements and are considered quasi-judicial proceedings. Additionally, because the Board regulates all pre-licensure nursing education programs across the state, the Board is required to provide administrative hearings in order to take corrective actions with respect to programs failing to meet minimum standards.

In 2009, there were 15 hearing cases that were considered by the Board; this increased to 72 cases in fiscal year 2014. The Board issued 504 Board Orders based on Notices in fiscal years 2013-2014, as compared to 327 Board Orders in the 2009-2010 biennium.

The large number of hearing cases impacts how quickly the cases are scheduled for hearings. The goal is to schedule a case within 8 weeks after the case is assigned to the Hearing Examiner. (Approximately 8 weeks are required for all of the pre-hearing processes to take place, e.g. subpoena requests, exchange of documents, etc.) In 2013 there was a 14-week time period between the assignments.

The increased caseload also impacts the length of time between holding the hearing and when the report, known as the Report and Recommendation, is provided for the Board's consideration in order to impose disciplinary action. In 2013, there was an average 10-week time period between the hearing and the Board receiving the Report and Recommendation.

## **Summary**

The Board has a demonstrated track record of insuring an excellent level of public protection, funding initiatives to combat the nursing shortage, and effectively regulating the largest number of licensed professionals of any agency in the State of Ohio. While at the same time, the Board regularly seeks to reduce costs and enhance operational efficiencies through innovation and lean practices. These actions are documented in the attachment. The Board operates as a well-run, self-sufficient and publicly accountable business.

We look forward to our continued work with the Administration and the General Assembly as the budget bill moves closer to passage. We appreciate that the Governor and the Ohio House have recognized our challenges and supported this budget request, and the Board asks for your support on behalf of our licensees and the public for whom they care.

This concludes my prepared remarks and I will be happy to answer any questions.

## ATTACHMENT

### OPERATIONAL OVERVIEW

The Board issues and renews licenses and certificates to those who meet the legal requirements; establishes and interprets scopes of practice; establishes regulatory requirements and practice standards for registered nurses, licensed practical nurses, advanced practice registered nurses, dialysis technicians, certified community health workers, and medication aides; approves pre-licensure nursing education programs; approves training programs for dialysis technicians, community health workers, and medication aides; and, if licensees and certificate holders violate the Nurse Practice Act or administrative rules, imposes discipline and monitors their practice.

#### **Nationally Recognized**

The Board is nationally recognized through the National Council of State Boards of Nursing (NCSBN) for its regulatory excellence and public protection work.

- ✓ The Board is a recipient of the NCSBN Regulatory Achievement Award. The award is presented annually to the board that demonstrates significant contributions in promoting public policy related to the safe and effective practice of nursing in the interest of public welfare.
- ✓ Board Member Lisa Klenke is a recipient of the NCSBN Exceptional Leadership Award. This national recognition reflects the Board's outstanding regulatory achievements under her leadership as a past Board President.
- ✓ Board Member Sue Morano presented a leadership development conference call for state boards of nursing across the country as requested by the NCSBN Leadership Succession Committee. Her leadership spans a career as a nurse, Board member, and State Senator.
- ✓ Executive Director Betsy Houchen is a recipient of the R. Louise McManus Award. The award is described as the most prestigious of NCSBN's honors for individuals who have made substantial contributions to the improvement of nursing regulation and impacted public policy to enhance the health and well being of individuals and the community.
- ✓ Ohio is one of eighteen state nursing boards participating and submitting TERCAP data to establish a national database regarding patient safety and practice breakdown. TERCAP (Taxonomy of Error, Root Cause Analysis and Practice-Responsibility) is the tool used to gather data regarding nursing practice breakdown.
- ✓ Ohio was one of three states chosen by NCSBN to participate in a three-year nursing Transition to Practice study. The study has provided important data regarding the impact of residency programs for newly licensed nurses and patient safety outcomes.

## A PROVEN TRACK RECORD OF EFFICIENCY, COST CONTAINMENT, AND EFFECTIVE REGULATORY PRACTICE

### Efficiency and Cost Reduction

The LeanOhio Licensure/Renewal Kaizen Event, held in November of 2013, was groundbreaking and helped begin the transformation of the licensure and renewal processes. Our team worked with LeanOhio facilitators and Subject Matter Experts to create new lean processes:

- ✓ Starting with the 2014 renewal cycle, all nurses are required to renew their licenses online.
- ✓ To eliminate thousands of calls, faxes, and emails, Board IT staff, in conjunction with DAS, developed a secure web based, look-up system so renewal applicants who could not locate their passwords and user IDs could directly access and obtain the information.
- ✓ To reduce processing steps, time, and costs, the Board developed and began testing an online LPN licensure application and will expand the online capability for all applications.
- ✓ To eliminate volumes of paper and hours of filing, the Board developed an electronic record for licensure applicants with disciplinary issues and is in the process of establishing electronic records for all applicants.
- ✓ To facilitate the submission and receipt of documents, the Board determined it would accept nursing education program completion letters electronically rather than in paper format.
- ✓ To reduce costs for applicants in obtaining money orders or cashier's checks and to expedite Board deposits to the State Treasurer's Office, credit or debit cards will be used for all financial transactions.
- ✓ For greater coordination between work areas, designated staff in compliance, licensure, and renewal are "Compliance Liaisons" who track the status of the application through the compliance and licensing or renewal process from start to finish.
- ✓ For clarity about the process and requirements, an Applicant Checklist was developed and made available to all applicants as a tool to inform applicants of the required documents and processes.
- ✓ To reduce costs and time, an applicant attestation is now accepted rather than requiring a notarized license application.

### **Implementation of Effective Regulatory Practices for Disciplinary Cases**

To efficiently handle complaints, investigations, and adjudications to safeguard the health of the public, the Board:

- ✓ Hired paralegals to assist attorneys with disciplinary processes, as approved in the last budget. As the disciplinary caseloads continue to increase, paralegals assist in obtaining court documents needed for evidence, publication of notices when needed for obtaining service, and preparation of evidence for “No Request” cases for Board action.
- ✓ Managed staffing and workloads by transferring existing positions to areas where the workload, based on the data, is the greatest. Since 2008, the Board has transferred eight positions from the administration, licensure, and education units to the compliance/disciplinary unit.
- ✓ Maintained the Board Hearing Committee to expedite cases through the hearing process and realize cost savings by the use of the Committee.
- ✓ Applied for and received funding through NCSBN to contract for dedicated staffing to submit disciplinary data to Nursys, a national licensure and disciplinary nursing database used by boards of nursing across the country.
- ✓ Continued monthly meetings with the Assistant Attorneys General to coordinate disciplinary processes and assure the timely resolution of disciplinary cases.
- ✓ Maintained the reduction of the average processing time for discipline cases, known as “no request for hearing cases,” from 2.5 years to seven months, by the discontinuation of outsourcing this function.
- ✓ Developed the Patient Safety Initiative linked to the review and disposition of complaints and disciplinary actions to establish “just culture” analysis, promote patient safety and increase collaboration with nursing employers.

### **Veterans, Service Members and Spouses**

The Board streamlined and improved licensure and certification processes for veterans, service members and spouses. In furtherance of the Governor Kasich’s Executive Order 2013-05K and legislative initiatives in House Bill 98 and House Bill 488 (130th GA), the Board:

- ✓ Amended administrative rules to require that nursing education and dialysis, medication aide and community health worker training programs establish policies for review of military education and training, and also require education and training programs to award the student credit for any military education or skills training that are substantially similar to the curriculum established in rule.
- ✓ Adopted rules to specify that renewal and reinstatement fees for military personnel and/or spouses be waived according to Ohio law for LPNs, RNs, APRNs, dialysis technicians, medication aides and community health workers.
- ✓ Adopted rules allowing time extensions for completion of continuing education

(CE) for nurses, dialysis technicians, community health workers, and medication aides called to active duty, equal to the number of months spent in active duty.

- ✓ Revised all applications, so veterans, service members and/or their spouses can indicate their military status on the application to enable Board staff to prioritize the application for immediate processing upon receipt.
- ✓ Implemented a new policy to decrease the processing time for veterans, service members and spouses licensed in other states seeking reciprocity by “endorsing” their out-of-state licenses into Ohio. Applicants no longer need to submit transcripts and photographs prior to the issuance of Temporary Permits and licenses. The Board determined that educational preparation could be verified and the identity of the applicant could be established through the use of the Nursys national database and other methods.
- ✓ Established a dedicated Military and Veterans web page on the Board web site that includes information related to availability of fee waivers and CE time extensions, and a crosswalk table mapping veterans’ pathway to licensure or certification. Updated and new information is posted on the Military and Veteran web page on an ongoing basis.
- ✓ Assured that licensure and certification examinations are on the Department of Veterans Affairs qualified list of non-federal government licensure and certification examinations allowing eligible veterans and their dependents to be reimbursed for the cost of the test.

### **Opiate and Other Prescription Drug Abuse**

The Board collaborated with the administration, legislators, law enforcement, and other state boards and agencies in the continued fight against prescription drug abuse. Ohio’s commitment to end opiate and other prescription drug abuse is consistent with the Board’s mission to actively safeguard the health of the public through the effective regulation of nursing care. The Board:

- ✓ Supported and contributed to efforts of the Governor’s Cabinet Opiate Action Team (GCOAT) and a group of professional health care provider regulatory boards, associations, individual providers and other key stakeholders to focus on educating health care professionals and patients to help reduce and eliminate the misuse and abuse of opioid drugs.
- ✓ Issued the “Joint Regulatory Statement on the Prescription of Naloxone to High-Risk Individuals” in conjunction with the Medical and Pharmacy Boards to endorse the prescription of naloxone to those who are at high-risk for opioid drug overdose.
- ✓ Contracted with an APRN with a background in the treatment of pain and knowledge about prescribing controlled substances to assist in investigations and serve as an expert witness for opioid and other prescribing cases.
- ✓ Encouraged OARRS registrations, since the 2013 renewal cycle, for APRNs with prescriptive authority. The Board’s initiatives have increased the number of

APRN OARRS registrants to approximately 73% of all APRNs who hold prescriptive authority.

- ✓ Adopted Rule 4723-9-12, OAC, which requires that under certain circumstances APRN prescribers use the Ohio Automated Rx Reporting System (OARRS) information in their practice when prescribing controlled substances.
- ✓ Obtained the authority for increased access to relevant prescriber information in the OARRS drug reporting system.

### **Focusing on the Nursing Workforce**

The Board focuses on the nursing workforce in the following ways:

- ✓ The Board provided data to assist with workforce planning initiatives by adding workforce data questions to nursing renewal applications. The Board published RN, APRN, and LPN Workforce Data Reports summarizing the data collected by the Board. The Data Reports and the raw data are available to all interested parties for use through the Board web site.
- ✓ The Board continues to provide grant funding through the Nurse Education Grant Program (NEGP) to nursing education programs for the purpose of increasing nursing student enrollment capacity. The program is funded by ten dollars of each nurse license renewal fee.
- ✓ To encourage nursing graduates to remain in Ohio as they enter the workforce, the Board assists the Ohio Board of Regents in administering the Nurse Education Assistance Loan Program (NEALP) which provides educational financial assistance to Ohio students seeking to become nurses or nursing faculty. Five dollars of each nurse license renewal fee is used to fund NEALP.
- ✓ The Ohio Action Coalition (Coalition) was formed to bring nursing across Ohio together to implement the recommendations of the Institute of Medicine (IOM) report, *The Future of Nursing: Leading Change, Advancing Health*. The Board is a member of the Coalition Steering Committee and working with nursing practitioners, educators, administrators, employers, and associations to implement the report's recommendations in order to positively impact the quality and effectiveness of Ohio's health care systems.