



Oregon

John A. Kitzhaber, MD, Governor

Health Licensing Agency

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Website: www.Oregon.gov/OHLA

WHO: Oregon Health Licensing Agency
Nursing Home Administrators Board

WHEN: October 12, 2011 – 9 am

WHERE: Oregon Health Licensing Agency
Rhoades Conference Room
700 Summer St NE, Suite 320
Salem, Oregon

What is the purpose of the meeting?

The purpose of the meeting is to conduct regular board business. Please use appropriate language, manners and protocols when conducting board business. A working lunch may be served for board members and designated staff in attendance. A copy of the agenda is printed with this notice. Please visit <http://egov.oregon.gov/OHLA/NHAB/meetings.shtml> for current meeting information.

Is the public or licensees allowed to attend the meeting?

Yes. Members of the public are invited and encouraged to be in attendance at all board/council meetings. All public audience members are asked to sign-in on the attendance roster prior to the meeting. Comments may be heard under public comment at the end of the meeting. Please wait to be recognized by the Chairperson prior to commenting.

Is it possible to watch the meeting live on the internet?

Yes. You may access the meeting at <https://oregon.ilinc.com/join/zkxvsw> (Link provided is specific to this meeting date) If you need assistance accessing the meeting contact the iLinc Join Help Desk at 1-800-799-4510, and select option "1."

What if the board/council enters into executive session?

Prior to entering into executive session the board/council chairperson will announce the nature of and the authority for holding executive session, at which time all audience members are asked to leave the room with the exception of news media and designated staff. Executive session would be held according to ORS 192.660.

No final actions or final decisions will be made in executive session. The board/council will return to open session before taking any final action or making any final decisions.

Who do I contact if I have questions or need special accommodations?

The meeting location is accessible to persons with disabilities. A request for accommodations for persons with disabilities should be made at least 48 hours before the meeting. For questions or requests contact a board specialist at (503) 373-2049.

All members are asked to please give at least 24-hour notice if they are unable to attend the meeting so arrangements may be made.



Oregon Health Licensing Agency
Nursing Home Administrators Board



9 am, Wednesday, October 12, 2011
700 Summer Street N.E., Suite 320
Salem, Oregon

Revised 10/5/2011

Call to Order

- 1. Approval of Agenda**
- 2. Approval of Minutes**
 - ◆ July 13, 2011
- 3. Reports**
 - ◆ Director's Report
 - 2013 Legislative Concept Discussion
 - 2012 Chair Summit
 - ◆ Statistical & Budget Report
 - ◆ Regulatory Report
 - ◆ Policy, Legislation & Administrative Rules
 - OHLA Permanent Administrative Rules
 - Legislation and Rules Committee Reports
 - a. September 21, 2011
 - b. October 3, 2011

Working Lunch

- 4. Items for Board Action**
 - ◆ Issue statement: Review and Recommend Reinstatement of Licensure
 - ◆ Issue statement: Approval of Proposed Administrative Rules
 - ◆ 2012 Chair/Vice-Chair
 - ◆ 2012 Committees
 - ◆ 2012 Board Meeting Dates
- 5. Public Comment**
- 6. Other Board Business/Board Interest**
- 7. Executive Session (If needed)**
- 8. AIT Interviews**

Agenda is subject to change.

For the most up to date information visit www.oregon.gov/OHLA

Approval of Minutes



July 13, 2011



Oregon Health Licensing Agency
Nursing Home Administrators Board



9 am, Wednesday, July 13, 2011
700 Summer Street NE, Suite 320
Salem, Oregon

MINUTES

MEMBERS PRESENT

Kathleen Elias, Chair
Nicolle King Deering, Vice-Chair
Lynn Howe
Arlene Gardner
Mike Weatherby
Nicole Burnham
Harry Krulewitch

STAFF PRESENT

Sylvie McMillan, Fiscal Services and Licensing Manager
David Sparks, Regulatory Operations Manager
Callie Zink, Administrative Services Manager
Kraig Bohot, Public Information Officer
Sinnamon Harris, Board Specialist
Amanda Perkins, Board Specialist

MEMBERS ABSENT:

None

GUESTS PRESENT:

Andrew Spencer
Andrew Fogg
Andrew Becker

(guests continued)

James Aldred
Jenna Corbly

*This meeting was live video streamed.

Call to Order

Kathleen Elias, Chair, called the meeting of the Nursing Home Administrators Board to order at 9:07 am, Wednesday, July 13, 2011, at the Oregon Health Licensing Agency (OHLA), Rhoades Conference Room, 700 Summer Street NE, Salem, Oregon. Roll was called.

1. Approval of Agenda

MOTION:

Arlene Gardner made a motion, with a second by Lynn Howe, to approve the agenda with the amendment of Andrew Spencer's midway interview to be performed immediately because of extenuating circumstances. Motion passed unanimously.

2. Approval of Minutes

MOTION:

Lynn Howe made a motion with a second by Nicole Burnham to approve the minutes for April 13, 2011. Motion passed unanimously.

3. Reports

◆ Directors Report

Sylvie McMillan, Fiscal Services and Licensing Manager, stood in for Randy Everitt, Director. She explained that due to staffing issues and a full slate of administrative rulemaking scheduled through the rest of 2011, rulemaking for certain OHLA regulated professions have been postponed. The agency can then successfully focus on rulemaking for those professions with the most immediate and significant issues related to public health, safety and risk.

McMillan stated that the agency has developed a strategic plan that prioritizes administrative rulemaking for the next 18 months, noting that the plan is flexible and subject to change dependent upon the agency's ability to address staffing issues. She pointed out that the agency is undergoing major changes to the makeup of its boards and councils and gaining one new board as a result of this year's session of the Oregon State Legislature. McMillan stated that professions that are new, have a temporary rule in place, or are experiencing a significant risk to public safety are top priority to undergo rulemaking in this strategic plan.

McMillan explained the Legislative concept process to the board and how odd-year Legislative Sessions are when new concepts are presented. She told the board it was time to start thinking about possible Legislative concepts as the agency would like to begin discussions in late September or early October. The agency will advise the board of any statutory issues that the agency has found that may need to be addressed.

McMillan gave examples of possible issues for Legislation concepts:

- It is very clear in current statutes that if you are not coming in from the United States or one of its territories you may not qualify for reciprocity in Oregon. It would take a statute change to include other countries. Kathleen Elias mentioned at the National Association of Long Term Care Administrator Boards (NAB) conference one issue being discussed was reciprocity with China.
- Under licensing qualification, the manner in which the current statute is written is that if an applicant has more than one-year dual facility experience they have met both the education and experience licensure criteria. They are not required to have a Bachelor's degree. McMillan stated she was not sure if this was an issue for the board. Elias stated that typically the applicant will have a Master's degree but it is not required. The issue should be researched.

◆ **Outreach and Communications**

Kraig Bohot, Public Information Officer, presented the latest draft issue of *Central Issues* for NHAB. The key issues being highlighted by the online publication were: *Nursing Home Care: A Regulatory Overview*, *Nursing Home Administrators: Their Roles, Responsibilities, and AIT*, *Administrative Rulemaking Update: Steady Progress on Revisions*. *Central Issues* also provides licensing and regulatory statistics and a resource page for licensees and consumers with links to the OHLA NHAB Web pages and related websites of interest.

◆ **Statistical Report**

McMillan provided an overview of statistics related to the board. Statistics included licensing, examination and regulatory statistics, authorization volume, complaints, and website traffic.

McMillan responded to questions from the board regarding the permanent limited and provisional licenses reflected in statistics. McMillan referred to the NHAB Legislation and Rules Committee discussion on July 12, 2011, surrounding the six-month permanent limited licenses and provisional. Part of the administrative rule-writing is aligning the licensees with the statutes and the OHLA model. McMillan made the point that “either you are licensed or you are not.” There is a temporary license for bona fide emergencies, such as, the sudden demise or hospitalization of the administrator. When rule-writing is complete NHAB will not have these other types of licenses titles.

◆ **2010-2011 Budget**

McMillan presented the statements of cash flow for 7/1/2009 – 5/31/2011 period and the 7/1/2011 – 6/30/2011 biennium. McMillan introduced new information about the “Silver” cost allocation model for the 7/1/2011 – 12/31/2013 biennium. This model breaks down the percentages of the “shared cost” of services provided to the board. McMillan explained how this model will generate cost saving to NHAB.

McMillan spoke about the potential changes to fees in the future that may be generated through the Legislation and Rules Committee administrative rule-writing. Currently, Nursing Home Administrator (NHA) licensees have a two-year license that will change to a one-year license. Newly licensed NHA will have a one-year license and then a roll-out will begin for those already licensed. The roll-out to a one-year license will be divided into twelfths so every month licensees are renewing. This will promote and stabilize revenue streams for NHAB.

Below is the projected statement of cash flows for the period of the 7/01/11 – 6/30/2013 biennium:

OREGON HEALTH LICENSING AGENCY NURSING HOME ADMINISTRATORS - FUND 7830 STATEMENT OF CASH FLOWS FOR THE PERIOD 07/01/2011 - 6/30/2013	
11-'13 Beginning Cash Balance, Projected	\$ 96,896.11
Revenues	\$ 142,702.00
Expenditures	\$ 96,087.00
Less: Accrued Expenditures	\$ -
Less: Total Expenditures	\$ (96,087.00)
Subtotal: Resources Available	\$ 143,511.11
Change in (Current Assets)/Liabilities	\$ -
Ending Cash Balance (Projected)	<u>\$ 143,511.11</u>
Cost Allocation - Silver Allocation Plan, 7/1/2011 - 12/31/2011	
Small Board Assessment Rate	0.60%
License Volume Rate	+ 0.54%
Shared Cost Rate for ADMIN, FISCAL/LICENSING, REGULATORY	<u>1.14%</u>
Educational Services, Cost Rate	5.25%
Qualifications and Licensing, Cost Rate	6.47%
Frontline and Customer Support, Cost Rate	0.54%
Direct Expenditures	100.00%

◆ **Regulatory Operations Division Report**

David Sparks, Regulatory Operations Manager, reported on enforcement activity. He stated between July 2009 and July 2011, 27 complaints had been filed with the agency of which five remain open. Below is a short summary:

Case # 10-5931

Received: March 2, 2010

Complaint alleges the respondent violated standards of practice by failing to ensure that the complainant was free from mental abuse and involuntary seclusion and failing to assure the facility complied with government regulations, including protecting residents, employees or staff from discrimination.

The investigation is ongoing.

Case # 10-5934

Received: March 2, 2010

Complaint alleges the respondent violated standards of practice by causing the loss/theft of the complainant's personal belongings located at her former residence, failing to investigate and reimburse the alleged theft and withholding the complainant's mail resulting in delayed delivery.

The investigation is complete and was closed as unfounded.

Case # 10-6258

Received: December 01, 2010

Complaint alleged the respondent was aware of lack of care and staff errors and took no action to correct those problems.

This case is currently under investigation.

Case # 11-6263

Received: December 14, 2010

Complaint alleged respondent permitted staffing deficiencies on the night shift, which caused a lack of appropriate care for a clinically depressed and possibility suicidal client to be left alone for long periods of time. The complainant was allegedly told by the respondent that if they wanted more attention for the client they would have to hire a nurse on their own.

The investigation is ongoing.

Case# 11-6292

Received: January 3, 2011

Complaint alleged that two employees were fired after they brought several sexual harassment concerns and inappropriate work conditions to the respondent's attention. The complaint further alleges the respondent failed to investigate or take appropriate action to address the allegations of sexual harassment and wrongful termination.

The investigation is ongoing.

Case# 11-6344

Received: March 28, 2011

Complaint alleges the respondent violated standards of practice by failing to ensure that the complainant was free from mental and verbal abuse and failing to assure the facility complied with government regulations, including protecting residents, employees or staff from discrimination. Respondent alleges wrongful termination.

The investigation is ongoing.

For the current regulatory reporting period of April 4, 2011, through June 30, 2011 the agency received one new complaint.

Sparks gave a brief overview of the complaint process and demonstrated to the board where the complaints forms are located on <http://www.oregon.gov/OHLA> under “consumer help” in case any board member is asked in the field about how to file a complaint.

Kathleen Elias asked about sub-standard surveys received by OHLA from the Department of Human Services (DHS) Senior and People with Physical Disabilities Division (SPD). Elias noted it is a federal mandate for the board, or OHLA regulatory division on behalf of the board, to receive all sub-standard surveys conducted by DHS that are rated “G” or higher classification. McMillan explained when the sub-standard surveys are received they are assigned to an investigator in the same manner as all complaints. The board reviewed committee members for the Enforcement Committee and noted the lack of an administrator on the committee. McMillan explained the committee will only meet when regulatory has material for the committee to review so it does meet infrequently. Nicole Burnham asked to be added to the committee.

◆ **Policy, Legislation & Administrative Rules**

McMillan gave a brief report on the progress of the Legislation and Rules Committee who met on July 12, 2011. The committee began with the definitions section and then focused on revisions to the licensing section. The committee will work through the entire administrative rules to align them with the statutes. Here are highlights of proposed revisions under discussion:

- a. Clear pathways for Nursing Home Administrator application requirements that follow the OHLA model.
- b. All fees moved into one clear and consistent section.
- c. Clarity surrounding provisional licenses application and issuance for bona fide emergencies only.

The next Legislation and Rules Committee meeting will be held on August 22, 2011.

4. Items for Board Action

◆ **National Association of Long Term Care Administrator Boards (NAB) Conference**

The board reiterated their desire to send a board member to the NAB conferences. The next conference is November 9, 2011, held in Florida.

MOTION:

Lynn Howe made a motion with a second by Nicole Burnham to send Nicolle King Deering, Vice-Chair, to the NAB, November 9, 2011, conference. The motion passed unanimously.

◆ **Oregon Alliance of Senior & Health Services (OASHS) Preceptor Training Approval**

Kathleen Elias recused herself from the discussion and the ensuing vote citing a conflict of interest because she is one of the instructors. She asked Nicolle King Deering, Vice-Chair, to continue with the proceedings.

The Oregon Alliance of Senior and Health Services sought the Nursing Home Administrator Board approval for a preceptor training workshop proposal. Board members were provided with the proposal by email in advance of the board meeting. McMillan led the discussion and noted OASHS had provided preceptor training in the past but it had been a few years {March 2006} since their last board approval for preceptor training. Currently, Oregon Health Care Association provides preceptor training; this would allow for an additional preceptor training at another facility.

Lisa Murphy, Qualification Specialist, offered the board a brief summary of the preceptor training process. She addressed the agency's involvement in the preceptor training by providing information on the location of the agency's website, AIT training forms, etc. for current forms used by the agency. Murphy noted that a log is kept of all the qualified preceptors. The preceptor must have provided AIT training at least once within five years of completing the preceptor training workshop, or they must retake the preceptor training.

In answer to Lynn Howe's question, it was noted that the preceptor's are evaluated by the training facilitators after the preceptor training is completed.

McMillan mentioned that, during the current administrative rule-writing process, both the Education and Examination Committee and the Legislation and Rules Committee will discuss the qualifications, preceptor training and duties of a preceptor in more depth.

MOTION:

Mike Weatherby moved with a second by Lynn Howe to approve OASHS for preceptor training. The motion passed unanimously.

5. Public Comment

No public comment was received.

6. Other Board Business/Board Interest

◆ **Kathleen Elias and Sylvie McMillan's Report from the NAB Conference – Chicago**

Elias along with Sylvie McMillan, Fiscal Services and Licensing Manager, attended the NAB conference held in Chicago, IL, on June 8th and 9th, 2011

Below are highlights of Elias' comments and observations of the NAB conference:

- a. NHAB should become more involved with NAB and make sure Oregon is well represented on committees, etc.
- b. OHLA investigative protocols are well above the NAB standard and Elias expressed kudos to the agency.
- c. NAB is reaching out to China and other countries as emerging markets. Canada, for example is extremely short of workers.
- d. Oregon has higher degree requirements than some other states. A few only require high school graduation. It may become a reciprocity issue.
- e. Security issue with NAB examination. People have been paid to take and fail the NAB examination so they may share questions. NAB is actively pursuing criminal charges.

McMillan commented about the security issue with the NAB examinations. OHLA does not administer the NAB examination. The NAB examination is performed at off-site locations by other vendors. NAB new security protocols could include applicants having to sign legal documents that they will not share examination information. NAB may also require the off-site examination facilities to have video cameras in the examination areas. OHLA currently has these safeguards in place for our other examinations.

McMillan offered that other state's representatives applauded Oregon's licensing, qualifications and investigative protocols.

◆ **Nicolle King Deering – Overview of Consultant Pharmacist Role in Nursing Facilities**

King Deering began her presentation with a time-line overview of the Consultant Pharmacist Practice below:

1974—Pharmacist-conducted drug regimen review (DRR) required at least monthly in skilled nursing facilities (SNF's).

1980—Guidelines developed for surveyors to assess quality and enforce performance related to DRR, including specific examples of “unnecessary drugs” (Indicators).

1984—Guidelines developed for surveyors to evaluate the medication distribution system, including the medication pass.

1985—DRR Indicators updated and expanded.

1990—OBRA '87 implemented. The largest overhaul of nursing home regulations.

- Medication regimens free from unnecessary drugs
- Privacy rights for residents
- Proper use of physical restraints and psychoactive medications
 - Antipsychotics, Antidepressants, Antianxiety, Sedative/Hypnotics
 - (Geriatric dosing guidelines, behavior monitoring, gradual dose reductions)
- Comprehensive resident assessments
- Minimum competency requirements for nurses aides
- Provision of 24 hr licensed nursing services
- Expansion of DRR Indicators

1993—OBRA '90 implemented. Mandated prospective drug utilization review and patient counseling.

1999—Guidelines for surveyors expanded to include quality benchmarks and drug therapy guidelines for older adults (“Beers List”)

2000—Implementation of Medicare's prospective payment system for SNFs (PPS).

2004—DRR Indicators deleted from surveyors guidance (DRR remains).

2006—Guidelines for surveyors updated.

- Changed DRR to Medication Regimen Review (MRR)
- More frequent MRR's for some Residents
- Focus on ALL medications; not just Psychoactives
- Specific situations where GDR's are contraindicated

King Deering presented a list of Medication Regimen Review (MRR) goals and explained each point. She also presented a brief synopsis entitled “What is a Consultant Pharmacist?” and all the services provided by the Consultant Pharmacist. {Note: the complete documentation may be viewed online on

the NHAB web site with the meeting materials }.

King Deering stated that care has improved in nursing home facilities because of the computerization of records. There are new mechanisms in place for accountability and dialog between the pharmacist and the doctor. In the Northwest, she noted, typically consultant pharmacists are tied to the dispensing pharmacy. The pharmacist will consult with the nursing home administrator to analyze a patient's medication regime to make sure they are on the best treatment for the lowest costs. Medications may be reviewed as part of the survey process.

◆ **Next Educational Information Presenter – Arlene Gardner**

Arlene Gardner was asked to present the Ombudsman role in relation to the Nursing Home Administrator and the nursing home facilities at the next board meeting on October 12, 2011.

7. Executive Session-Place Holder

The board did not enter into executive session.

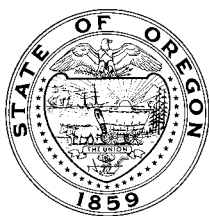
8. Midway Interviews

Andrew Spencer – Evergreen Healthcare
Andrew Fogg – Marquis Care at Wilsonville
Andrew Becker – Avamere Rehabilitation of Lebanon
James Aldred – Village Health Care
Jenna Corbly – Avamere at Keizer

The meeting adjourned at approximately 2:25 pm.

Prepared by: Sinnamon Harris, Board Specialist

Director's Report



2013 Legislative Concepts

OREGON HEALTH LICENSING AGENCY

The Oregon Health Licensing Agency (OHLA) begins the legislative process more than a year before the actual legislative session.

To begin the process the agency has compiled a list of possible legislative concepts for each program. Members are asked to review the list and make comments as well as add additional changes. As part of that process the agency will consider all comments and suggestions and may call on the individual boards and councils Legislative & Rules Committees to fine tune language or to act as experts in a particular profession.

OHLA ORS 676 – Streamline the following among all OHLA professions:

- Continuing education authority;
- Renewal requirements;
- Fee structure;
- Complaint and investigation confidential;
- Disclosure of confidential information to other public entity; and
- Charitable events exception for all programs or relevant programs;

Board of Athletic Trainers ORS 688:

- Remove NATA references; and
- Standardized definition of “Physician Extender”.

Board of Body Art Practitioners Oregon Laws 2011, Chapter 715 (ORS 690):

- Ear lobe piercing only field of practice with grandfathering provision;
- Make tattooing a minor illegal;
- Add freelance authorization for electrology allowing electrologists to be mobile licensees.

Board of Cosmetology ORS 690:

- Add work performed on the “face” related to esthetics;
- Practice standards and requirements for legend drugs and devices such as lasers and hydroquinone (skin lightening agent);
- Streamline public records confidentiality regarding complaints (690.195(2)); and
- Clarify authority to assess civil penalty to the Board (690.992) for violations of (676.612)

Board of Denture Technology ORS 680:

- Perform X-rays part of scope of practice.

Environmental Health Registration Board ORS 700:

- Exempt individuals under a supervised internship from registration with guidelines by rule;
- Define duties and parameters of an environmental health specialist;
- Designate title for waste water specialist as RWWS; and
- Elimination of waste water field of practice.

Advisory Council on Hearing Aids ORS 694:

- Council membership – designate four hearing aid specialists licensed under 694.065(a) and (c) and one audiologist licensed under ORS 681; and
- Add temporary licensure provisions by rule.

Board of Direct Entry Midwifery ORS 678:

- Mandatory licensing including exemptions;
- Broaden legend drugs and devices;

Nursing Home Administrators Board ORS 678:

- Standards for directors/administrators for Assisted/Residential Living Facilities.

Respiratory Therapist and Polysomnographic Technologists Licensing Board Oregon Laws 2011, Chapter 346 (ORS 690):

- Add training to requirements for licensure under polysomnography; and
- Add language related to the practice of respiratory care to include:
“the insertion of devices to draw, analyze, infuse or monitor pressure in arterial, capillary or venous blood as prescribed by medical director” and emergent intraosseous placement.

Sex Offender Treatment Board ORS 675:

- Designate titles for use by only a certified or associate sex offender treatment therapist as CCSOT and CASOT.
- Require that only certified or associate sex offender treatment therapists may treat minors or developmentally disabled;
- Mandatory licensure for all sex offender treatment therapists.

Other Issues:

- Durable medical equipment; and
- Home caregiver registry;

Oregon Health Licensing Agency

700 Summer Street NE, Suite 320
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Statistical & Budget Reports



Oregon Health Licensing Agency

Nursing Home Administrators Board

Licensing and Regulatory Division Statistics as of October 11, 2011

2011 - 2013 Biennium

Jul11-Sep11

Licenses Issued / Renewed	1st Quarter
Administrators-In-Training	2
Permanent Licenses Issued	9
Permanent Licenses Reinstated	7
Temporary Licenses Issued	2
Renewals Processed	60

Complaints / Proposed Sanctions / Final Orders	1st Quarter
Complaints Received	0
Notice of Proposed Sanctions	0
Final Orders	0
Complaints Closed	0

Oregon Health Licensing Agency

Nursing Home Administrators Board

Examination Statistics as of October 11, 2011

2011 - 2013 Biennium

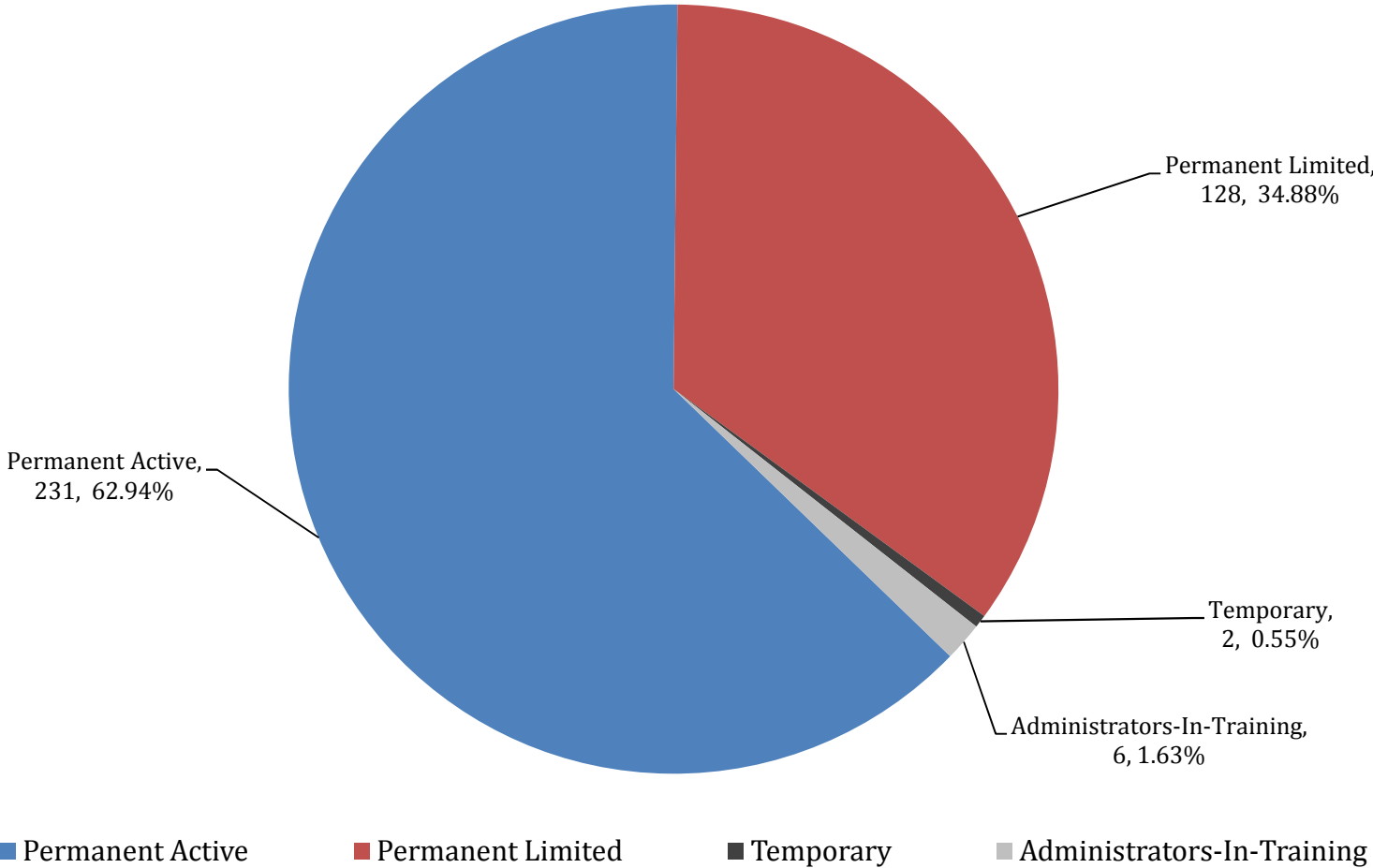
Jul11-Sep11

Examinations	1st Quarter
National Exam	
National Exams - Passed	0
National Exams - Failed	1
% of National Exams Passed	0%
State Exam	
State Exams - Passed	6
State Exams - Failed	2
% of State Exams Passed	75%

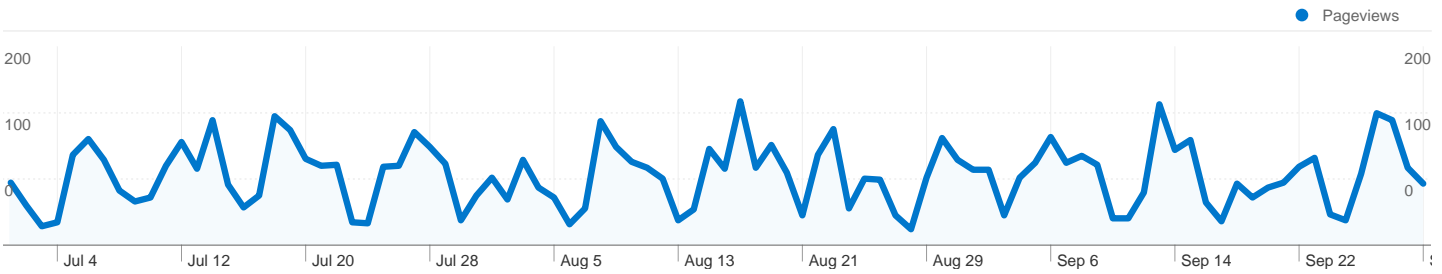
Oregon Health Licensing Agency

Nursing Home Administrators Board License Volume as of October 11, 2011 2011 - 2013 Biennium

Total Volume: 367



This report is generated in fast-access mode.



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Page	Total	google	(direct)	bing	yahoo	us.mg5.mail.yahoo.com
Page	Pageviews	Pageviews	Pageviews	Pageviews	Pageviews	Pageviews
/OHLA/NHAB/Administrator-In-Training_Program.shtml	939	591	34	173	69	34
/OHLA/NHAB/index.shtml	834	521	173	69	0	0
/OHLA/NHAB/How_to_Get_Licensed.shtml	486	243	104	69	69	0
/OHLA/NHAB/docs/AIT/Preceptors.pdf	104	69	0	34	0	0
/OHLA/NHAB/Fees.shtml	69	69	0	0	0	0
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/OHLA/NHAB/contact_us.shtml	69	34	34	0	0	0
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Oregon Health Licensing Agency

Nursing Home Administrators Board

Cumulative Revenue and Expenditures

For the Biennium 2009-11

OREGON HEALTH LICENSING AGENCY NURSING HOME ADMINISTRATORS - FUND 7830 STATEMENT OF CASH FLOWS FOR THE PERIOD 07/01/2009 - 6/30/2011	
09-'11 Beginning Cash Balance	\$ 92,993.87
Revenues	\$ 157,450.24
Expenditures	\$ 140,599.77
Less: Accrued Expenditures	\$ -
Less: Total Expenditures	\$ (140,599.77)
Subtotal: Resources Available	\$ 109,844.34
Change in (Current Assets)/Liabilities	\$ -
Ending Cash Balance (Actual) as of 8/31/2011	\$ 109,844.34
Cost Allocation 7/1/2009 - 1/31/2010	
Small Board Assessment Rate	1.60%
License Volume / Workload Complexity Rate	0.66%
Cost Allocation Rate	2.26%
Cost Allocation 2/1/2010 - 9/30/2010	
Small Board Assessment Rate	1.60%
License Volume / Workload Complexity Rate	0.74%
Cost Allocation Rate	2.34%
Cost Allocation 10/1/2010 - 6/30/2011	
Small Board Assessment Rate	1.50%
License Volume Rate	0.53%
Indirect Rate for - (ASD, FSD, LICEN, ROD)	2.03%
Direct Expenditures	100.00%

Agency Divisions	Shared Cost Categories	FTE ALLOCATION	Cosmetology	Board of Body Art	Denturists, Hearing Aids, Nursing Home Administrators and Environmental Health Specialists	Athletic Trainers, Respiratory Therapists and Polysmonographic Technologists , Direct Entry Midwives, Sex Offender Treatment Therapists and Dietitians
			Cosmetology Plan	Small Board Gold Plan	Small Board Silver Plan	Small Board Bronze Plan
Administrative Services Division	Management, Rules and Legislation and Board Support	10.00 FTE	X	X	X	X
	Education Services	1.00 FTE	X	X	X	
Fiscal Services / Licensing Division	Fiscal Services and Information Technologies	7.00 FTE	X	X	X	X
	Cosmetology Direct Support	1.00 FTE	X			
	Small Board Qualifications and Licensing	1.00 FTE		X	X	X
	Front Line	4.00 FTE	X	X	X	X
Regulatory Operations Division	Inspections	4.00 FTE	X	X		
	Investigations	4.00 FTE	X	X	X	X
	Admin Support	1.00 FTE	X	X	X	X
TOTAL FTE / COST CATEGORIES		33.00 FTE	8	8	7	6

Oregon Health Licensing Agency

Nursing Home Administrators Board

Cumulative Revenue and Expenditures

For the Biennium 2011-13

OREGON HEALTH LICENSING AGENCY NURSING HOME ADMINISTRATORS - FUND 7830 STATEMENT OF CASH FLOWS FOR THE PERIOD 07/01/2011 - 8/31/2011	
11-'13 Beginning Cash Balance <i>as of 8/31/2011</i>	\$ 109,844.34
Revenues	\$ 27,475.00
Expenditures	\$ 7,567.30
Less: Accrued Expenditures	\$ (60.10)
Less: Total Expenditures	\$ (7,507.20)
Subtotal: Resources Available	\$ 129,812.14
Change in (Current Assets)/Liabilities	\$ (136.65)
Ending Cash Balance (Actual)	\$ 129,675.49
Silver Allocation Plan, 7/1/2011 - 12/31/2011	
Shared Services Rate (ASD, FSD, ROD)	1.14%
Educational Services	5.25%
SMB Qualifications and Licensing	6.47%
Frontline and Customer Support	0.54%
Direct Expenditures	100.00%

**Regulatory
Operations Division
Report**



Oregon Health Licensing Agency
Regulatory Division

NURSING HOME ADMINISTRATORS BOARD

2009 – 2011 Biennium

Between July 2009 and June 2011, 27 complaints were received by the Agency. Of the 27 complaints, 3 remain open.

Below is a detailed list of the 2 open complaints with an ongoing investigation:

Case #	Received Date	Complaint Allegations
11-6263	12/14/2010	Unprofessional Conduct
11-6344	3/28/2011	Unprofessional Conduct

Below is a summary of the closed complaints categorized by investigation result. These 3 complaints were closed out since the last Board meeting.

Investigation Result	Count
Unfounded	2
Civil Penalty	1

Below is a summary of all other closed complaints categorized by investigation result. These 22 complaints were closed out prior to the last Board meeting.

Investigation Result	Count
Civil Penalty	3
Unfounded	15
W/O Action	4

2011 – 2013 Biennium

Between July 1, 2011 and October 3, 2011, no complaints were received by the Agency.

Policy, Legislation & Administrative Rules

Secretary of State
Certificate and Order for Filing
PERMANENT ADMINISTRATIVE RULES

I certify that the attached copies* are true, full and correct copies of the PERMANENT Rule(s) adopted on August 15, 2011 by the _____
Date prior to or same as filing date

<u>Oregon Health Licensing Agency</u>	<u>OAR 331</u>
Agency and Division	Administrative Rules Chapter Number
<u>Samantha Patnode, Policy Analyst</u>	<u>700 Summer St. NE, Suite 320, Salem, Oregon 97301-1287</u>
Rules Coordinator	Address
	<u>503-373-1917</u>
	Telephone

to become effective August 15, 2011. Rulemaking Notice was published in the June 2011 Oregon Bulletin.**
Date upon filing or later Month and Year

RULE CAPTION

Define terms used in ORS 676.612 and active military status protocols for authorization holders.

Not more than 15 words that reasonably identifies the subject matter of the agency's intended action.

RULEMAKING ACTION

List each rule number separately (000-000-0000)

Secure approval of new rule numbers (Adopted or Renumbered rules) with the Administrative Rules Unit prior to filing.

ADOPT: 331-010-0050

AMEND: 331-020-0040, 331-020-0070

REPEAL:

Stat. Auth.: ORS 676.615

Other Auth.: ORS 408.450

Stats. Implemented: ORS 676.607, 676.608, 676.612, 408.450

RULE SUMMARY

Adopt 331-010-0050 allowing authorization holders in active military status waiver of renewal, fees and continuing education requirements, as well as protocols for restoration of former authorization status.

Define and clarify what constitutes an appearance before the agency during investigations of alleged violations of statutes or rules under the authority of the Oregon Health Licensing Agency (OHLA), its boards or councils.

Define and clarify the terms incompetence and negligence used in ORS 676.612 in relation to the boards or councils under the OHLA.

<u>Randall Everitt, Director</u>	<u>8/11/11</u>
Authorized Signer	Printed name
	Date

*With this original, file one photocopy of certificate, one paper copy of rules listed in Rulemaking Actions, and electronic copy of rules. **The Oregon Bulletin is published the 1st of each month and updates rules found in the OAR Compilation. For publication in Bulletin, rule and notice filings must be submitted by 5:00 m on the 15th day of the preceding month unless this deadline falls on a weekend or legal holiday, when filings are accepted until 5:00 pm on the preceding workday.
ARC 930-2005

OREGON HEALTH LICENSING AGENCY

DIVISION 10

AGENCY GENERAL ADMINISTRATION RULES

331-010-0050

Authorization Holders; Military Leave

(1) A practitioner authorized to practice under a program listed in ORS 676.606 is not required to renew the authorization or pay renewal fees while in active military service unless required by the authorization holders branch of the military.

(2) To be restored to former authorization status the authorization holder must notify the agency in writing within 60 days of being honorably discharged.

(3) No fees will be due until the following renewal period.

(4) Requirements for completing continuing education hours during an authorization holder's active duty period shall be evaluated on a case by case basis.

DIVISION 20

AGENCY REGULATORY OPERATIONS RULES

331-020-0040

Complaint Processing and Investigation

Pursuant to ORS 676.608, complaints filed with the Oregon Health Licensing Agency will be handled as follows:

(1) The agency will determine if the complaint is related to a profession or occupation regulated and administered by the agency and the complaint falls within authority delegated to the agency by statute.

(2) The agency investigator(s):

(a) Will review the information and as applicable, interview parties and witnesses, and examine physical evidence relating to the complaint;

(b) Will advise on whether an authorization holder or other individual practiced within the acceptable standards of the particular program;

~~(c) May attempt to informally resolve the matter;~~

~~(d)~~ (c) Will make recommendations for agency action.

(3) After receiving advice from the investigator(s), the agency will determine what action will be taken in accordance with ORS 676.608.

(4) As used in ORS 676.608(8), to "appear before the agency" includes: an investigative interview conducted under oath, under subpoena or otherwise compelled; an interview or hearing before a board, council, or subcommittee of a board or council; any depositions authorized by the agency; pre-hearing conferences; and contested case hearings. It does not include interrogatories, written admissions, other written communications, or voluntary communications.

Stat. Auth.: ORS 183, 676.605, 676.608, 676.615
Stats. Implemented: ORS 183, 676.605, 676.608, 676.615
Hist.: HLO 1-2004, f. & cert. ef. 2-13-04; HLA 1-2009, f. & cert. ef. 6-1-09

331-020-0070

Discipline

(1) The Oregon Health Licensing Agency may discipline authorization holders for violations of laws and rules, in accordance with ORS 676.612 and 676.992.

(2) Failure to cooperate with the agency or its agent is unprofessional conduct and is subject to disciplinary sanctions, which may include suspension or revocation and refuse to issue or renew or place on probation and assessment of civil penalties. Failure to cooperate with the agency or its agent includes, but is not limited to, the following:

(a) Failing to provide information within the specified time allotted and as requested by the agency;

(b) Failing to temporarily surrender custody of original client records to the agency upon request, which includes treatment charts, models, health histories, billing documents, correspondence and memoranda;

(c) Interference, use of threats or harassment which delays or obstructs any person in providing evidence in any investigation, contested case, or other legal action instituted by the agency;

(d) Interference, use of threats or harassment which delays or obstructs the agency in carrying out its functions under individual programs administered and regulated by the agency as listed in ORS 676.606 and rules adopted thereunder;
or

(e) Deceiving or attempting to deceive the agency regarding any matter under investigation including altering or destroying any records.

(3) The agency, at its discretion, may require supplemental training in an appropriate area of study as determined by the agency, board or council, as a disciplinary sanction. Supplemental training may be in addition to assessment of a monetary penalty or the agency, board or council may waive or reduce a penalty, in cases requiring supplemental training.

(4) As used in ORS 676.612(2)(j) incompetence means engaging in conduct which evidences a lack of ability or fitness to perform the holder's professional functions.

(5) As used in ORS 676.612(2)(j) negligence means engaging in conduct detrimental to the client.

Stat. Auth.: ORS 676.607, 676.612, 676.992
Stats. Implemented: ORS 676.607, 676.612, 676.992
Hist.: HLO 1-2004, f. & cert. ef. 2-13-04; HLA 1-2009, f. & cert. ef. 6-1-09

Legislation & Rules Committee Update



**Oregon Health Licensing Agency
Nursing Home Administrators Board
Legislation & Rules Committee**

Date: September 21, 2011

Members Present: Kathleen Elias
Arlene Gardner
Nicole Burnham

Members Absent: Lynn Howe

Staff Present: Sylvie McMillan, Fiscal Services and Licensing Manager
Sinnamon Harris, Board Specialist

Guests Present: None

Kathleen Elias called the Nursing Home Administrators Board Legislation & Rules Committee meeting to order at 9:04 am, on September 21, 2011, at the Oregon Health Licensing Agency (OHLA), Rhoades Conference Room, 700 Summer Street NE, Salem, Oregon. Roll was called.

The purpose of the meeting was to focus on the review and revision of the Administrator-in-Training (AIT) registration and program requirements along with the preceptor registration and program requirements. The committee members were provided with the following documentation for review prior to the meeting:

- a. A working copy of the administrative rules OAR 853-010-0060 regarding AIT and preceptors.
- b. NHAB issue statement dated 7/14/10 regarding the approval of waiver request.
- c. NHAB issue statement dated 10/13/11 regarding the approval of AIT forms and survey process.
- d. Copy of the AIT packet of forms, revised to date, by the Education and Examination Committee.

AIT Registration and Program Discussion

The committee, working with McMillan, re-organized the framework of the AIT registration and program for clarification and to streamline the process for new registrants. The Education and Examination Committee had revised the AIT forms to include a Certificate of Training form to be completed and signed off by both the AIT and Preceptor. It was necessary to review and revise those sections of the administrative rules that had become unnecessary or outmoded.

- The committee recommended a minimum of six months and no more than two years for completion of AIT program.
- The committee reviewed the waivers for a CNA, LPN, or RN, that had already been approved by the board on July 14, 2010. After discussion, the committee decided to recommend the following revisions or additions:

- a. A revision to discontinue the 50 per cent allowance for an LPN or RN, pertaining to the resident care and quality of life domain, and instead to allow: “up to 160 hours if the AIT is currently licensed and has no unresolved or outstanding disciplinary actions and has three years of experience within the last five years as a LPN or RN of a long-term care facility.”
- b. Add clarification of the type of documentation needed for proof of CNA training to include the “certificate of completion” or “current CNA certification.”
- c. After much discussion the committee decided to remove the exemption for CNA training if an AIT “is training in a facility that does not have a CNA class or is not located within 60 miles of a facility with a CNA class”.

Preceptor Registration and Program Discussion

Recognizing the importance and the responsibility of the role of a preceptor, the committee made the following revisions or additions:

- a. Preceptor may train only one AIT at a time.
- b. Preceptor must sign the Certificate of Training completion form.
- c. The preceptor must have attended a Board-approved workshop for preceptors, in Oregon, within three years of the date of application for registration as a preceptor.
- d. In order to maintain current registration with the agency as a preceptor the preceptor must attend a Board-approved workshop for preceptors, in Oregon, every three years.

Interviews Discussion

The Legislation and Rules Committee discussed in great length the purpose, outcomes, and traditions behind the AIT interviews. Recognizing that the board may have strong attachments/feelings to the interview portion of the board meetings, Kathleen Elias requested the issue be placed on the next board meeting’s agenda for October 12, 2011 for discussion. Nevertheless, the committee recommended the discontinuation of *any* interviews for the following reasons:

- a. Other states do not require AIT interviews with the board.
- b. The revision of the Certificate of Training form and the tightening of preceptors continued training have alleviated the board’s purpose in using the AIT interview to flesh-out concerns with preceptors not performing their responsibilities towards the AIT.
- c. The surveys provided the AIT upon full licensure will be provided to the board on an annual basis for review, thus, adding another avenue to monitor preceptor’s performance. (Note: the agency will provide immediate feedback to the board if surveys indicate any recurring problems that warrant the board’s attention).
- d. The board cannot prohibit an AIT candidate from obtaining licensure nor taking the examination based on the outcome of any interview.
- e. It appears that engaging the board with an AIT through the interview process is steeped in tradition that does not have any bearing on licensure requirements.

The meeting adjourned at approximately 2:09 pm.

Prepared by: Sinnamon Harris, Board Specialist



**Oregon Health Licensing Agency
Nursing Home Administrators Board
Legislation & Rules Committee**

Date: October 3, 2011

Members Present: Kathleen Elias
Lynn Howe
Kim Fuson, Invited Technical Expert

Members Absent: Arlene Gardner
Nicole Burnham

Staff Present: Sylvie McMillan, Fiscal Services and Licensing Manager
Sinnamon Harris, Board Specialist

Guests Present: None

Kathleen Elias called the Nursing Home Administrators Board Legislation & Rules committee meeting to order at 9:08 am, on October 3, 2011, at the Oregon Health Licensing Agency (OHLA), Mill Creek Conference Room, 700 Summer Street NE, Salem, Oregon. Roll was called.

Sylvie McMillan, Fiscal Services and Licensing Manager, presented the proposed administrative rules to the committee members for review. She stated that Katharine Lozano, the agency's Assistant Attorney General (AAG), had worked together with McMillan to review the proposed administrative rules for legal content and fine-tune the proposed rules that were developed by the September 21, 2011, NHAB Legislation and Rules Committee. The committee thoroughly reviewed and discussed each section. Points of discussion were:

- For a preceptor registered before January 1, 2012, to give the preceptor one-year to attend a Board-approved preceptor workshop in Oregon if they had not had a workshop within the last three years.
- Changes to the minimum amount of hours (four per month) that a preceptor must provide an Administrator-in-training (AIT) of in-person consultation regarding the strengths, progress, and competency development of the AIT, and to suggest methods of improvement.
- Continuing education requirements reduced from 3.0 credits (or 30 hours) to 2.0 credits (or 20 hours).

The committee also discussed and reviewed any possible fiscal impacts the revised administrative rules may have on licensees, stakeholders, and the public.

McMillan explained that these proposed administrative rules will go before the full board at the regular meeting on October 12, 2011, for approval before becoming published in the Oregon Bulletin on

November 1, 2011. The agency will gather any public comments and present them to the Legislation and Rules Committee on December 7, 2011. The committee will make any revisions to the proposed administrative rules at that time before the full board meets on December 8, 2011 to adopt permanent administrative rules. It is anticipated that NHAB permanent administrative rules will go into effect on January 1, 2012.

The meeting adjourned at approximately 12:15 pm.

Prepared by: Sinnamon Harris, Board Specialist

Items for Board Action

Issue:

A licensee requests reinstatement of their Nursing Home Administrator's license, NHA-P-001383. The licensee has not completed the required continuing education for renewal. The license expired four years ago: 6/30/2007. The Board may require the applicant to present evidence of continuing education in long-term care or to complete a specified period of time in an Administrator-in-Training program prior to issuing the license.

Discussion:

The licensee stated that they have not completed the required continuing education for renewal. The Board may require additional training in the AIT program that the licensee would be required to complete to qualify for reinstatement/ renewal of their license. The board may refer to Oregon Administrative Rules governing the requirements for license renewal and continuing education, listed below:

OAR 853-010-0055(2) Relicensing - *A nursing home administrator whose license has lapsed for a period longer than one year but less than five years may be relicensed upon completion of a license application and a fee of \$500. The Board may require the applicant to present evidence of continuing education in long-term care or to complete a specified period of time in an Administrator-in-Training program prior to issuing the license.*

OAR 853-010-0040(3) Renewal of Licenses - *Beginning with the initial licensing date commencing July 1, 1992, each individual holding a permanent nursing home administrator license for 12 months or longer shall submit evidence satisfactory to the Board that 30 classroom hours of continuing education have been completed annually as required by OAR 853-010-0050, and, if not accomplished, the license is not renewable. Beginning with the renewal licensing date commencing July 1, 1995, an individual shall submit evidence satisfactory to the Board that sixty (60) classroom hours of continuing education have been completed every two years, if the licensee has been employed as a nursing home administrator in Oregon for twelve months or more during the two year period. Beginning July 1, 1999, at least five (5) of the sixty (60) classroom hours must be in the area of personal/professional ethics. A licensee who is employed as a nursing home administrator may submit continuing education hours after the time specified upon payment of a late fee of \$10 for each credit hour submitted. The nursing home administrator who is not employed as a nursing home administrator and who has not completed the continuing education requirement will have one (1) year to make up the deficit hours. Beginning July 1, 1995, an inactive administrator shall submit thirty (30) hours of continuing education by evidence satisfactory to the Board every two years. Beginning July 1, 1999, at least three (3) of the thirty (30) classroom hours must be in the area of personal/professional ethics. Administrators who fail to make up the deficit hours in the period specified shall meet the requirements of OAR 853-010-0015. The Board may grant exceptions to the continuing education requirement for good reasons such as, but not limited to personal health and military conflict;*

Recommendation:

The licensee completes total of 120 hours of training in the AIT program, equivalent to the number of hours of continuing education required to renew an active license.

Issue:

Review administrative rules for consistency, standardization and professional practice.

Discussion:

On April 13, 2011, the Nursing Home Administrator Board approved an administrative rulemaking schedule for the year 2011. The Legislation and Rules Committee met on June 13, 2011, July 12, 2011, August 22, 2011, September 21, 2011, and October 3, 2011, in order to review and recommend changes to administrative rules.

A summary of proposed rule changes include:

- 853-020-0000 Definitions: in order to meet rulemaking protocols and define relevant terms where utilized within the rule for efficiency.
- 853-030-0000 Nursing Home Administrator Application Requirements: to establish standardized pathways for licensure and to streamline the application process. The pathways include:
 - ◆ Qualification through the AIT program
 - ◆ Qualification through dual facility experience
 - ◆ Qualification through advanced education and experience
 - ◆ Reciprocity
- 853-030-0010 Provisional Licenses –Application and Issuance: for bona fide emergencies.
- 853-030-0020 Application for Registration as an AIT: for individuals applying for an AIT registration.
- 853-030-0030 Application for Registration as a Preceptor: to strengthen the AIT supervisory role and to outline minimum qualifications that a preceptor must meet in order to qualify to train AITs.
- 853-030-0040 Administrator-in-Training (AIT) Program: requirements in order to add clarity and to provide the AIT with a streamlined process for the training period.
- 853-030-0050 General Examination Information: requirements to include all information related to examinations are streamlined into one administrative rule.
- 853-030-0060 Examination Retake: to clarify the retake process.
- 853-030-0070 Nursing Home Administrator Issuance and Renewal: to align with statutory provisions pursuant to ORS 678.775, by establishing a reactivation fee and the number of years a licensee can renew late up to three years to align with

renewal requirements and agency protocol. The rule also addresses those authorizations that have expired beyond three years.

- 853-040-0000 Fees: establishing and changing fees.
- 853-050-0000 Continuing Education Requirements: to clarify and establish continuing education credit criteria. Nursing Home Administrators must complete a minimum of 2.0 credits or 20 hours every year.
- 853-050-0010 Continuing Education: Audit, Required Documentation and Sanctions: provide the licensee clarity regarding the process if selected for an audit of attested continuing education credits.
- 853-060-0000 Standards of Practice: to establish and maintain a high standard of integrity and dignity in the profession of nursing home administrators.
- 853-060-0010 Standards of Professional Conduct: to protect the public against unprofessional conduct on the part of nursing home administrator.

If the board approves proposed administrative rules, the public comment period will begin on November 1, 2011 and end as of November 28, 2011. The board is scheduled to adopt permanent rules on December 8, 2011.

Recommendation:

1. Approve proposed administrative rules regarding OAR Chapter 853 Divisions 020-060.

**OREGON HEALTH LICENSING AGENCY,
NURSING HOME ADMINISTRATORS BOARD**

DIVISION 20

GENERAL ADMINISTRATION

853-020-0000

Definitions

(1) "Agency" means the Oregon Health Licensing Agency. The agency is responsible for the budget, personnel, performance-based outcomes, consumer protection, fee collection, mediation, complaint resolution, discipline, rulemaking and record keeping.

(2) "CEU" means a continuing education unit and the numerical value determined by the board to be earned by a renewal applicant by attending a specified training course. The terms "continuing education credit" and "continuing education unit" are synonymous and may be used interchangeably.

(3) "Continuing Education" means post-licensure education in health care administration undertaken to maintain professional competency to practice nursing home administration, and improve administration skills, in the interest of safety, health and welfare of the people served.

(4) "Experience" means prior performance in administration, including planning, organizing, directing, staffing, and budgeting of a licensed long-term care facility.

(5) "Experience in Health Care Management" means experience in administration, planning, organizing, directing, staffing and budgeting of a licensed health care facility.

(6) "Long-Term Care Facility" means a licensed facility as defined in ORS 441.005.

(7) "NAB" is the National Association of Boards of Examiners for Nursing Home Administrators.

(8) "Nursing Home Administrator" means an individual responsible for planning, organizing, directing, and controlling the operation of a nursing home.

(9) "Official Transcript" means an original document certified by an accredited college or university indicating hours and types of course work, examinations and scores that the student has completed, which has been submitted by the accredited college or university by mail or courier to the agency in a sealed envelope in accordance with ORS 678.730.

(10) "One Year" when related to employment means a period equivalent to 40 hours a week for 48 weeks.

(11) "Preceptor" means a person who is registered to train and supervise an AIT.

(12) "Trainee"; "Administrator-in-Training"; or "AIT" means a person who is completing the residency or intern requirements leading to licensure as a nursing home administrator. See ORS 678.730(1)(a)

DIVISION 30
LICENSURE OF NURSING HOME ADMINISTRATORS

853-030-0000

Nursing Home Administrator Application Requirements

An individual applying for a nursing home administrator license must:

- (1) Meet the requirements of OAR 331 division 30.**
- (2) Submit a completed application form prescribed by the agency, which must contain the information listed in OAR 331-030-0000 and be accompanied by payment of the required application fees.**
- (3) In addition to requirements listed in subsection (1) and (2) of this rule, an applicant must provide documentation of one of the following pathways:**
 - (a) Licensure Pathway 1 – Qualification through the AIT Program. Applicant must submit:**
 - (A) Official transcript as defined in OAR 853-020-0000(9) demonstrating attainment of qualifying Bachelor's degree pursuant to ORS 678.730(3);**
 - (B) Certificate of Training completion forms prescribed by the agency;**
 - (C) Examination fees;**
 - (D) Official documentation of a passing score on the NAB examination, successfully completed within one year *following* the date of application, sent directly by the NAB to the agency. Copies of examination results or other documentation provided by the applicant are not acceptable. The applicant is responsible for payment of fees assessed by NAB in obtaining required official documentation. See ORS 678.740 and OAR 853-030-0030 [Note: Upon completion and approval of all application requirements listed in (1), (2), and (3)(a)(A) through (B) of this rule the agency may notify NAB an applicant is qualified to take the NAB examination];**
 - (E) Proof of having completed and passed the board approved state examination within one year *preceding* or one year *following* the date of application. See ORS 678.740 and OAR 853-030-0030; and**

(F) Upon passage of all required examinations and before issuance of license, applicant must pay all license fees.

(b) Licensure Pathway 2 – Qualification through dual facility experience. Applicant must submit:

(A) Proof, from the organization, of one year experience as an administrator serving a dual facility as per ORS 678.710(1);

(B) Examination fees;

(C) Official documentation of a passing score on the NAB examination, successfully completed within one year *following* the date of application, sent directly by the NAB to the agency. Copies of examination results or other documentation provided by the applicant are not acceptable. The applicant is responsible for payment of fees assessed by NAB in obtaining required official documentation. See ORS 678.740 and OAR 853-030-0050 [Note: Upon completion and approval of all application requirements listed in (1), (2), and (3)(b)A of this rule the agency may notify NAB an applicant is qualified to take the NAB examination;

(D) Proof of having completed and passed the board approved state examination within one year *preceding* or one year *following* the date of application. See ORS 678.740 and OAR 853-030-0050; and

(G) Upon passage of all required examinations and before issuance of license, applicant must pay all license fees.

(c) Licensure Pathway 3 – Qualification through advanced education and experience. Applicant must submit:

(A) Official transcript as defined in OAR 853-020-0000(9) demonstrating attainment of a postgraduate degree in management pursuant to ORS 678.730(4);

(B) Proof of ten years of experience in health care management as defined in OAR 853-020-0000(5).

(C) All licensing fees.

(d) Licensure Pathway 4 – Reciprocity

(A) Submit an affidavit of licensure pursuant to OAR 331-030-0040 demonstrating proof of current license, which is active with no current or pending disciplinary action, as a nursing home administrator. The license must have been issued by another state or territory of the United States and the licensing requirements must be at least equivalent to those in ORS 678.730

(B) Examination fees;

(C) Proof of having completed and passed the board approved state examination within one year preceding or one year following the date of registration application. See ORS 678.740 and OAR 853-030-0050.

(D) Upon passage of all required examinations and before issuance of license, applicant must pay all license fees.

853-030-0010

Provisional Licenses -- Application and Issuance

(1) Whenever a bona fide emergency exists such as, but not limited to, the death, incapacitation, or unexpected resignation of a licensed nursing home administrator and the nursing home which such person was administering is unable to employ a regularly licensed nursing home administrator, the long-term care facility may be administered by a provisionally licensed nursing home administrator, valid for only the nursing home in which the emergency exists, until a licensed nursing home administrator can be employed, but not to exceed six months.

(2) An individual applying for a nursing home administrator provisional license must:

(a) Meet the requirements of OAR 331 division 30.

(b) Submit a completed application form prescribed by the agency, which must contain the information listed in OAR 331-030-0000 and be accompanied by payment of the required application fees.

(c) Submit a formal request from the owner or manager of the nursing home explaining the emergency situation and the need for a provisional administrator.

(d) In addition to requirements listed in subsection (a), (b) and (c) of this rule, an applicant must provide documentation of one of the following:

(A) Qualifies under licensure pathway 2, 3 or 4;

(B) Is the Assistant Administrator; or

(C) Is the Director of Nursing.

853-030-0020

Application for Registration as an AIT

An individual applying for an AIT registration must:

(1) Meet the requirements of OAR 331 division 30;

(2) Submit a completed application form prescribed by the agency, which must contain the information listed in OAR 331-030-0000 and be accompanied by payment of the required application fees.

Comment [s1]: Reference residency in ORS 678.730(1)(a) (this is for filing rules)

853-030-0030

Application for Registration as a Preceptor

An individual applying for a Preceptor registration must:

(1) Meet the requirements of OAR 331 division 30;

(2) Submit a completed application form prescribed by the agency, which must contain the information listed in OAR 331-030-0000 and be accompanied by payment of the required application fees.

(3) In addition to requirements listed in subsection (1) and (2) of this rule, a preceptor must:

(a) Hold a current Oregon nursing home administrator license with no outstanding or unresolved disciplinary action;

(b) Have been a licensed nursing home administrator for the least three years; and

(c) Have attended a Board-approved workshop for preceptors in Oregon within three years preceding the date of application for registration.

(4) In order to maintain current registration as a Preceptor with the agency;

(a) For a preceptor registered before January 1, 2012 the preceptor must attend a Board-approved workshop for preceptors in Oregon by December 31, 2012.

(b) A preceptor must attend a Board-approved workshop for preceptors in Oregon every three years.

853-030-0040

AIT Program

The AIT program consists of 960 hours of training under the supervision of a preceptor. The training program documentation can be reviewed at www.oregon.gov/OHLA/NHAB.

(1) An AIT applicant must register as defined in OAR 853-030-0020 prior to beginning the AIT program. Acceptance into the AIT program in no way authorizes an AIT to serve in the capacity of a nursing home administrator; such service by the AIT is a violation of ORS 678.720(1), and the agency may disqualify the AIT from the AIT program in part or in its entirety.

(2) A registered AIT must complete the AIT program in no less than six months and no more than two years. An AIT failing to complete the program must reapply as defined in OAR 853-030-0020 and begin the program again.

(3) A registered AIT may apply for a waiver of up to 80 hours of the AIT program pertaining to resident care and quality of life if the AIT submits:

(a) Proof of current CNA certification with no unresolved or outstanding disciplinary actions. Applicants must submit an affidavit of licensure pursuant to OAR 331-030-0040; or

(b) A certificate of completion from a CNA program within the last two years preceding the date of registration application.

(4) A registered AIT may apply for a waiver of up to 160 hours of the AIT program pertaining to resident care and quality of life if the AIT:

(a) Submits proof of current licensure as a LPN or RN in a long-term care facility, with no unresolved or outstanding disciplinary actions; and

(b) Has three years of experience within the last five years as a LPN or RN in a long-term care facility. Applicants must submit an affidavit of licensure pursuant to OAR 3310-030-0040.

(5) A registered AIT may apply for a waiver under subsection (3) or (4) of this rule, but not both.

(6) A registered preceptor must provide the AIT a minimum of four (4) hours per month of in-person consultation regarding the strengths, progress, and competency development needs of the AIT, and to suggest methods of

improvement. In-person consultation must be documented on a form prescribed by the agency.

(7) A registered preceptor must:

(a) Train only one AIT at any one time;

(b) Sign the Certificate of Training completion forms;

(8) Both the AIT and preceptor registrants must notify the agency of any discontinuation of, change or interruptions in the AIT program.

853-030-0050

General Examination Information

1) The board approved examinations for a nursing home administrator license are the NAB examination with a NAB passing score and the state prepared examination administered by the agency with a board approved passing score.

(2) An applicant must meet identification requirements listed under OAR 331-030-0000.

(3) The examination is administered in English only, unless an agency approved testing contractor or vendor provides the examination in languages other than English.

(4) Examination candidates may be electronically monitored during the course of testing.

(5) The Board will establish by policy a maximum time allowance for each section of the examination.

(6) Taking notes, textbooks, notebooks, electronic equipment or communication devices, such as personal computers, pagers and cellular telephones or any other devices deemed inappropriate by the agency, are prohibited in the examination area.

(7) A candidate may be immediately disqualified before, during, or after the examination for conduct that interferes with the examination or otherwise violates this rule. At the time of disqualification, the examination may be invalidated and examination fees may be forfeited. Disqualifying conduct includes but is not limited to:

- (a) Directly or indirectly giving, receiving, soliciting, and attempting to give, receive or solicit aid during the examination process;**
- (b) Violations of subsection (6) of this rule;**
- (c) Removing or attempting to remove any examination-related information, notes or materials from the examination site;**
- (d) Failing to follow directions relative to the conduct of the examination; and**
- (e) Exhibiting behavior that impedes the normal progress of the examination.**
- (8) The applicant may be required to reapply, submit additional examination fees, and request in writing to schedule another examination if applicant is disqualified from taking the examination.**

853-030-0060

Examination Retake -- All retake examinations are subject to examination fees and an approved examination schedule set by the agency

853-030-0070

Nursing Home Administrator Issuance and Renewal

(1) AUTHORIZATION AND RENEWAL: A licensee is subject to the provisions of OAR Chapter 331, division 30 regarding the issuance and renewal of a license, provisions regarding authorization to practice, identification, and requirements for issuance of a duplicate license.

(2) AUTHORIZATION RENEWAL: To avoid delinquency penalties, license renewal must be made prior to the license entering inactive status. The licensee must submit the following:

- (a) Renewal application form;**
- (b) Payment of required renewal fee pursuant to 853-040-0000; and**
- (c) Documentation of having obtained required annual continuing education under OAR 853-050-0000, on a form prescribed by the agency.**

(3) INACTIVE AUTHORIZATION: A license may be inactive for up to three years. When renewing after entering inactive status, the licensee must submit the following:

(a) Renewal application form;

(b) Payment of delinquency and license fees pursuant to OAR 853-040-0000;

(c) Documentation of having obtained required annual continuing education under OAR 853-050-0000, on a form prescribed by the agency, whether license has been current or inactive;

(4) EXPIRED AUTHORIZATION: A license that has been inactive for more than three years is expired and the licensee must reapply and meet the requirements listed in OAR 853-030-0000.

(5) A licensee failing to meet continuing education requirements listed under OAR 853-050-0000 is expired and must reapply and meet requirements pursuant to OAR 853-030-0000.

(6) A licensee may not practice with an inactive or expired license.

DIVISION 40

Fees

853-040-0000

Fees

(1) Applicants and registrants are subject to the provisions of OAR 331-010-0010 and 331-010-0020 regarding the payment of fees, penalties and charges.

(2) Fees established by the Oregon Health Licensing Agency are as follows:

(a) Application:

(A) License: \$100

(B) Provisional license: \$100

(C) AIT registration: \$100

(D) Preceptor registration: \$100

(b) State examination: \$125

(c) Original issuance:

(A) License (including by reciprocity): \$175 for one year

(B) Provisional license: \$100 for six months

(d) Renewal of license: \$175 for one year

(e) Other administrative fees:

(A) Delinquency fee: \$50 for each year in inactive status up to three years.

(B) Replacement of license, including name change: \$25.

(C) Affidavit of licensure: \$50.

(D) An additional \$25 administrative processing fee will be assessed if a NSF or non-negotiable instrument is received for payment of fees, penalties and charges. Refer to OAR 331-010-0010.

DIVISION 50
CONTINUING EDUCATION REQUIREMENTS FOR NURSING HOME
ADMINISTRATORS

853-050-0000

Continuing Education Requirements

(1) To maintain registration, nursing home administrators must complete a minimum of 2.0 credits or 20 hours every year. Hours in excess of those required for the one-year reporting period shall not be carried forward and applied toward the succeeding year CEU renewal requirements.

(2) Each licensee shall document compliance with the continuing education requirement through attestation on the license renewal application. Licensees are subject to provisions of OAR 338-050-0010 pertaining to periodic audit of continuing education.

(3) Continuing education must be obtained by participation or attendance at an accredited college or university, a program approved by NAB or agency pre-approved courses.

(4) Continuing education must address subject matter related to nursing home administration in accordance with ORS 678.710(3) and OAR 853-020-0000(3).

(5) CEU credit will be awarded based on the following criteria:

(a) Completion and passing of academic courses taken from an accredited college or university at the same rate of credit established by that institution;

(b) Professional courses which meet academic requirements in content, instruction and evaluation will be assigned CEU credit at the same rate.

(c) Courses that do not meet standards as set forth in paragraphs (a) and (b) of this subsection, such as workshops, symposiums, seminars, laboratory exercises, or any applied experience with or without formal classroom work may receive credit at the rate of 1.0 CEU for each ten hours of attendance.

(6) Documentation supporting compliance with continuing education requirements must be maintained for a period of two years following renewal and be available to the agency upon request.

853-050-0010

Continuing Education: Audit, Required Documentation and Sanctions

- (1) The Oregon Health Licensing Agency will audit a percentage of licensees, as determined by the Board, to verify compliance with continuing education requirements.**
- (2) Licensees notified of selection for audit of continuing education attestation shall submit to the agency, within 30 calendar days from the date of issuance of the notification, satisfactory evidence of participation in required continuing education in accordance with OAR 853-050-0000.**
- (3) If selected for audit, the registrant must provide documentation of the required continuing education, which must include:**
 - (a) A certificate of completion or other agency approved documentation that includes the agency pre-approval number;**
 - (b) Official transcript from the accredited college or university; or**
 - (c) Certificate of completion that includes the NAB approval number.**
- (4) If documentation of continuing education is incomplete, the registrant has 30 calendar days from the date of notice to submit further documentation to substantiate having completed the required continuing education.**
- (5) Failure to meet continuing education requirements shall constitute grounds for disciplinary action, which may include but is not limited to assessment of a civil penalty and suspension or revocation of the registration.**

DIVISION 60

STANDARD OF PRACTICE AND PROFESSIONAL CONDUCT

853-060-0000

Standards of Practice

The board adopts the following standards of practice to establish and maintain a high standard of integrity and dignity in the profession of nursing home administrators. A licensee must:

- (1) Develop policies which govern the continuing care and related medical and other services provided by the facility which reflects the facility's person-centered philosophy;
- (2) Maintain a clean and safe environment to ensure the health, safety, and welfare of residents and staff in the licensee's facility;
- (3) Ensure a quality of care and quality of life that is consistent with the health and safety of the residents in the facility. This includes, but is not limited to, the promotion of care, related medical and other services provided by the facility to assist each resident to attain or maintain the highest practicable mental, physical, and psychosocial well being to the extent it is consistent with the resident's wishes;
- (4) Participate with the ownership, management, or facility governing board to plan, implement, and evaluate written policies and procedures to promote facility systems to function properly and ensure compliance with all local, state, and federal laws and regulations;
- (5) Communicate and problem solve regularly with the governing body, department heads, facility staff and residents to allocate resources properly. The nursing home administrator must foster effective communication and problem solving between management, staff, residents, family, community, and all parties involved to ensure appropriate management and operation of the facility and to provide for residents' rights, health, safety, and welfare; and
- (6) Plan, implement, and evaluate an integrated financial program for the facility which ensures compliance with all local, state, and federal laws and regulations; quality of care and life; and appropriate and accurate billing for services.

853-060-0010

Standards of Professional Conduct

The Board adopts the following standards of professional conduct to protect the public against unprofessional conduct on the part of nursing home administrators. A licensee must:

- (1) Comply with all local, state, and federal laws and regulations concerning the operation and reimbursement of nursing homes and/or nursing home administrators. The licensed nursing home administrator shall cooperate with any investigation of these regulatory bodies;**
- (2) Exercise supervision over the activities of nursing home personnel;**
- (3) Protect resident rights as required by state and federal laws including, but not limited to, the protection against abuse, neglect, and other mistreatment pursuant to ORS 676.150 and 678.725;**
- (4) Possess and maintain the competencies necessary to effectively perform the responsibilities as a nursing home administrator, including by but not limited to:
 - (a) Exercising ethical and professional decision making and judgment;**
 - (b) Assuming leadership in the facility;**
 - (c) Exemplifying an administrative philosophy congruent with the mission and goals of the organization as well as generally accepted standards;**
 - (d) Planning, organizing, and directing those responsibilities delegated to the administrator by the ownership, management, or governing board of the facility and inherent in the role of an administrator;**
 - (e) Abiding by and keeping confidential resident information; and**
 - (f) Keeping current with standards of practice; and****
- (5) Take appropriate steps to avoid discrimination against residents on basis of race, color, sex, religion, age, national origin, disability, marital status, ancestry, sexual orientation or any other factor that may be discriminatory or not related to bona fide requirements of quality care.**

Issue:

With the end of 2011 approaching it is necessary for the Nursing Home Administrator Board to elect a Chair and Vice-Chair for the year 2012.

Discussion:

Kathleen Elias has served as Chair during the year of 2011.
Nicolle King Deering has served as Vice-Chair during the year of 2011.

Recommendation:

Nursing Home Administrator Board nominates and elects a board Chair and Vice-Chair for the year 2012.

CHAIRPERSON

VICE-CHAIRPERSON

DIVISION 40

Fees

853-040-0000

Fees

(1) Applicants and registrants are subject to the provisions of OAR 331-010-0010 and 331-010-0020 regarding the payment of fees, penalties and charges.

(2) Fees established by the Oregon Health Licensing Agency are as follows:

(a) Application:

(A) License (including by reciprocity): \$100

(B) Provisional license: \$50

(C) AIT registration: \$100

(D) Preceptor registration: \$100

(b) State examination: \$125

(c) Original issuance:

(A) License (including by reciprocity): \$130 for one year

(B) Provisional license: \$50 for six months

(d) Renewal of license: \$130 for one year

(e) Other administrative fees:

(A) Delinquency fee: \$50 for each year in inactive status up to three years.

(B) Replacement of license, including name change: \$25

(C) Affidavit of licensure: \$50

(D) Information Packet: \$10

(E) An additional \$25 administrative processing fee will be assessed if a NSF or non-negotiable instrument is received for payment of fees, penalties and charges. Refer to OAR 331-010-0010.

Issue:

With the end of the year 2011 approaching, it is necessary for the Nursing Home Administrators Board to review the make up of committees and designated members to each committee.

Discussion:

The purpose of committees is to allow for review and discussion of specific issues, which usually require more in-depth fact-finding and deliberation than can be scheduled at periodic board meetings. Committees also serve as a resource to staff in the daily administration of the program with members providing technical expertise and direction, particularly in scope of practice, practice standards, education and regulatory aspects.

A committee may be comprised of one member acting, as liaison between the board and office staff, but must include a total number of members that equates to less than an a quorum.

Committee	Committee Purpose/Description
Legislation/Rules	Gain consensus on rule development and make recommendations for action to the board/agency. Committee work is centered on "fact-finding"-discussion of facts, perspectives and concerns.
Education/Examination	Establish requirements for training and education, equivalencies and continuing education.
Enforcement	Advise agency during investigation or review of disciplinary cases.
Customer Connection	Advises agency on areas affecting all board/councils uniformly. Projects may include Website review, agency publications and agency rulemaking.
Practice & Procedures Standards	Review and discuss inquiries received regarding scope of practice

Recommendation:

Nursing Home Administrators Board designates committee members for the year of 2012.

Oregon Health Licensing Agency

Nursing Home Administrators Board

2012 Recommended Committee Nominees

2011 COMMITTEE LIST	
Legislation/Rules	Kathleen Elias, Arlene Gardner, Lynn Howe, Nicole Burnham
Education & Examination	Nicole Burnham, Lynn Howe, Nicille King Deering
Enforcement	Michael Weatherby, Nicolle King Deering, Dr. Harry Krulewitch, Nicole Burnham
Practice & Procedures Standards	Arlene Gardner, Kathleen Elias, Alt: Dr. Harry Krulewitch
Customer Connection	Michael Weatherby

2012 COMMITTEE NOMINEES	
Legislation/Rules	<hr/> <hr/> <hr/>
Education / Examination	<hr/> <hr/> <hr/>
Enforcement	<hr/> <hr/> <hr/>
Practice & Procedures Standards	<hr/> <hr/> <hr/>
Customer Connection	<hr/> <hr/> <hr/>

Issue:

With the end of 2011 approaching it is necessary for the Nursing Home Administrators Board to approve meeting dates for the year 2012.

Discussion:

The following dates are proposed for the Nursing Home Administrators Board to conduct regular council business:

Wednesday, January 11, 2012 @ 9 am
Wednesday, April 11, 2012 @ 9 am
Wednesday, July 11, 2012 @ 9 am
Wednesday, October 10, 2012 @ 9 am

Recommendation:

Nursing Home Administrators Board approves meeting dates for the year 2012.
Approved meeting dates:

Public Comment

Other Board Business



Board Interest File

RECIPROCITY

LONG TERM CARE ADMINISTRATION - SURVEY RESULTS

Purpose

The National Association of Long Term Care Administrator Boards (NAB) conducted a survey of four groups to better understand the issue pertaining to licensure mobility.

SURVEYED GROUPS

The following groups were selected allowing NAB to see the reciprocity issue from different perspectives.

First, State Executives of Licensing Boards would give insight to candidates seeking licensure or reciprocity and barriers preventing mobility in practicing from state to state. Thirty eight (38) completed the survey.

Secondly, the American College of Health Care Administrators (ACHCA) has been a leading advocate of training and education among it's members. It focuses on the professional and advancing their knowledge and skills in achieving excellence in long term care. Seven hundred eighty eight (788) licensed nursing home administrators responded to the survey. This allowed for a perspective of the both new and seasoned practicing administrators.

NAB also surveyed five hundred seventy eight (578) newly licensed administrators. These administrators would help identify entry level barriers to licensure mobility.

Lastly, NAB surveyed five (5) colleges that have met NAB's criteria for certification of education and standards consistent with the credentialing long term care professionals.

Highlighted Results

State Executives

- 90% of states do not have reciprocity agreements with other states
- 55% of states do not offer reciprocity if initial licensure was in another state
- 70% of states view licensure mobility as an important issue to address

ACHCA

- 45% of licensees are reluctant to move to another jurisdiction because of perceived barriers
- 46% of licensees applying to another jurisdiction did not receive license due to additional education or training requirements needed
- 93% of licensees view licensure mobility as an important issue to address

Newly Licensed Administrators

- 94% of licensees are still licensed in the state of initial licensure
 - 36% of them are reluctant to move because of perceived barriers
- 62% of licensees that applied to other states were denied because of additional education or training required
- 83% of states view licensure mobility as an important issue to address

Certified NAB Colleges

- Graduates usually receive license in state they did their training
- 80% of colleges view licensure mobility as an important issue to address

Survey conducted by,

National Association of Long Term Care Administrator Boards
1444 I Street, NW
Washington, DC 20005

(202) 712-9040



NAB Board Member Meeting Attendance Funding Proposal

NAB Strategic Plan Goal: *To Enhance Member Effectiveness and Success*

Strategy: *Increase Member Participation and Engagement by funding one delegate from each member board/agencies to both the NAB Annual and Mid-Year Meetings. Funding would include registration, travel and lodging. Funding would be in effect for the Mid-Year meeting in November 2012.*

Benefits to Member Boards and Agencies

- Learn and share best practices through networking with colleagues from other jurisdictions
- Relieve state boards of the cost of sending a board delegate to NAB Meetings
- Opportunity to actively participate in NAB committees, task forces and leadership positions
- Utilize existing travel funds to support additional board member participation
- Provide input to NAB on ways NAB can support member effectiveness and success
- Participate in the development of standards, policy, programs and services
- Enhanced effectiveness and success for your state regulatory board/agency

Benefits to NAB

- Increased participation at all levels of the organization
- Consistent Board of Governors delegate representation at Annual and Mid-Year Meetings
- Ability to establish consistent standing committee member participation
- Access to content expertise for examination program support
- Strength in numbers in influencing policy direction
- Ability to engage additional members to assure ongoing leadership succession
- Reduce costs for exam content expertise participation by utilizing member expertise
- Reduce costs for standing committee leadership and participation through member engagement

Proposed Funding Initiative

Modest annual member dues increase from \$1,200 to \$1,500 effective January 2013

Increase in examination fees, effective April 1, 2012:

	<u>Current</u>	<u>Proposed</u>
NHA	\$285	\$350
RCAL	\$260	\$300
State	\$155	\$175

In comparison to other licensed professions that are members of the Federation of Associations of Regulatory Boards (FARB) NAB examination fees are on the lower end of the scale of averages as listed below. Those professions with lower fees have significantly higher exam volume which reduces cost due to volume of scale.

Profession	Fees	# Exams
Massage Therapy	\$195.00	20,000
Nursing NCLEX	\$200.00	500,000
Social Work	\$230.00	34,085
NAB RCAL	\$260.00	300
NAB NHA	\$285.00	2,550
Vet Techs	\$300.00	6,000
Physical Therapy	\$370.00	unknown
Funeral Directors NBE	\$400.00	3,300
Pharmacy NAPLEX	\$485.00	40,000
Occupational Therapy	\$500.00	9,150
Psychology	\$600.00	5329
Chiropractic Part 4	\$1,235.00	*13500
Architecture (7 divisions - \$210 each)	\$1,470.00	34,000
Chiropractic written exams (3 Parts \$535 each)	\$1,605.00	*included
Optometry (3 Parts \$625 each) + TMOD \$450	\$2,325.00	unknown

What is required of you?

- Approval of the proposed fee increases
- Identify a board delegate (either your board/agency Executive Director or a member of your Board to serve for a term of at least two years to assure consistent board member representation
- Commitment of Board delegate to join a committee or task force and actively participate

Executive Session

Midway Interviews



