STRATEGIC INITIATIVE REPORT OUT SEPTEMBER 2016

The 2015-2017 Strategic Initiatives have been in place for 14 months with another 10 months to complete implementation prior to the end of the biennium.

The purpose of the Strategic Plan is to implement, through agency initiatives, the Mission of the Board: The Oregon State Board of Nursing safeguards the public's health and well-being by providing guidance for, and regulation of, entry into the profession, nursing education, and continued safe practice.

The Boards Values are integrated into the Strategic Plan Initiatives: **Integrity, Collaboration, Stewardship, Simplicity, and Innovation**

To develop initiatives to meet the mission the agency utilizes the mission and values with the overarching goals of:

1. Focus on customer Service
2. Effective, high quality leadership and Governance.
3. Provide guidance for, and the regulation of, the nursing profession.

Each agency department develops initiatives to implement the mission of the Board.

The tables below will describe the Value, the Goal, the Objective and the current Objective status. For the sake of presentation the Measure, Data Source, and Timeline have been left off but can be seen in the attached original document.

Department: Administration

Value	Goal	Objective	Status
Collaboration Innovation	Effective high quality leadership and governance	Develop partnership with other state regulatory agencies, other state Boards of Nursing, and national organizations, to understand best practices for agency and regulatory management.	Peer to peer communication relationships established with the Boards of Nursing in Idaho, Washington, and Texas. Agency staff and Board members have attended national conferences related to Board regulation, Board staff members of various committees at the national level. Best practices adopted: Criminal Background Checks, assuring accurate reporting to NPDB. **Completed and ongoing**
		Establish partnership with two other state Boards of nursing to compare internal workflow processes.	Board investigator sent to Arizona Board to review the TERCAP process. Communication with Idaho Board to review the implementation of licensing data base: Visit Pending later in 2016. **On Target/ Ongoing**
		Establishment of internal performance standards for service, staff expectations, and management expectations	Performance management software purchased to establish expectations related to position descriptions. Currently reviewing position descriptions to match evaluation criteria. **On target/ongoing**

Collaboration Innovation	Effective high quality leadership and governance	Development of displayed dashboards to track progress of strategic plan utilizing NCSBN CORE measures and best practices for target measures.	**Completed:** Board developed and measures posted quarterly. Agency enrolled in TERCAP and have assigned staff to coordinate efforts. Currently the agency has submitted 59 cases, will require 100 cases to be included in national comparisons.
Integrity Simplicity Stewardship	Effective high quality leadership and governance	Develop internal capacity to run individual reports from agency data sources.	**Ongoing: Did not meet initial target date of June 2016.** Able to request a canned report from agency database but still lack the capacity to write ad hoc reports by anyone other than the system administrator.
		Utilize the daily management system to communicate information to staff regarding agency performance.	**Met:** Daily huddles done in Licensing and Investigations which will include IT staff as needed. Display Board updated quarterly.
Stewardship Collaboration	Effective, high quality leadership and governance	Increase public visibility of the Board by engaging in external education with community members focusing on returning impaired nurses to the workplace and reporting requirements.	**Met:** Worked with the Oregon Foundation for Nursing, Oregon Nurses Association, and Oregon Association of Hospitals and Health Systems to develop, record and implement the requirements for worksite monitors. Presented return to work requirements and management of impaired nurses at 6 different venues as of 1 Sept 2016.
Communications			
Innovation & Simplicity	Effective, high-quality leadership, governance	Reformat website to adopt a new state design, update online application/verification processes, and incorporate new features (exam applications, mailing list sections, new statistics page, and investigations case status)	**Ongoing:** Working with the state Department of Administrative Services have made initial progress towards placing all applications online. **Have not met** internal deadline for implementation of investigation case status but status report for applications which can be used by applicants has been developed.. **Deadline met** for card sort process.
Integrity, Stewardship	Effective, high-quality leadership, governance	Develop an orientation program for the new Board members that emphasizes the Board's role in state government, as well as providing a thorough review of the agency	**Met and ongoing:** Initial program developed and presented to several ongoing Board members. Will continue to refine based upon feedback from Board members. Legislatively mandated Board orientation at the state level also developed will review to avoid overlap and redundancy.

Human Resources			
Integrity, Collaboration Stewardship Simplicity Innovation	Effective, High quality Leadership and governance	Develop an employee performance evaluation form that includes core competencies and at least two job specific competencies that are measureable in collaboration with OD's Dev. Needs Assessment.	**Initial timeline not met.** Implementing Performance Pro Evaluation tool by Jan 2017 to meet all the objectives. Timeline not met due to decision to use external product to implement these objectives rather than internal development.
		Identify additional core competencies for managers and the tool for manager's performance evaluation form in collaboration with OD.	**Initial timeline not met:** The State of Oregon has developed Core Values for Managers, these have been aligned with the Board's values and competencies will be linked to these values and the manager's performance evaluation to begin Jan 2017.
		Provide Management training on employee performance evaluation.	**Initial timeline not met: Training occurred in Aug 2016.**
		Provide employee training on core competencies	**Initial timeline not met:** Training will occur once performance pro prior to implementation of performance pro.
		Develop procedures for performance evaluation tracking and compliance standards	**Initial timeline not met:** Will be implemented along with new performance measurement program.
		Implementation of evaluating all employees on core competencies and introduce job specific standards to be added for 2017	**Ongoing:** New performance standards and goals will be used for 2017 evaluation period. New form for evaluations will not be used until Jan 2018.
		Implementation of evaluating all employees on Core competencies and specific job standards.	**See previous objective.**
Integrity, Collaboration Stewardship Simplicity Innovation	Effective, High quality Leadership and governance	Provide communication to staff regularly on State HR initiatives and projects	**Ongoing:** Utilize staff meeting to communicate information. To date presentations regarding FMLA/OFLA, Collective Bargaining Agreement, and EAP program have been presented

Integrity, Collaboration Stewardship Simplicity Innovation	Effective, High quality Leadership and governance	Gather input from staff on information and preferred methods of communication	**Done:** Needs assessment done and presented to Board in Feb 2016.
		Based on input from staff, provide one written article or communication related to HR-for example "Know your Benefits" monthly.	**Not met:** this method of communication has not been implemented. Since developing this objective, HR staff has departed the agency and replaced with a .5 HR specialist. Staff meetings utilized to present HR information.
		Based on input from staff, schedule presentations and speakers at least quarterly for agency staff meetings	**Partially done:** Speakers have been brought in to present "staff safety" and "EAP" but external speakers have not been brought in quarterly.
		Attend DAS HR Directors Meetings and other topical meetings	**Met:** HR specialist attends state meetings as they are announced in order to bring the agency in compliance with DAS directives, objectives and policies.
		Shadow operations in other Boards, CHRO and HR professionals at major healthcare employers for best practices on a quarterly basis. Provide information on the Board and Board services	**This objective has been deleted:** Due to turnover in HR staff, it was determined that this was no longer necessary due to the extent of experience of new HR personnel.
		HR manager attend a minimum of two HR related conferences, courses or trainings	**Specific objective has been deleted:** Expectation is that HR specialist attend all state offered trainings.
		Contact and explore participation in some capacity with health occupation programs at the high school or college level.	**Ongoing and modification:** Eliminated high school students due to lack of context between the work of the Board and practice since many will go to other professions other than nursing. Have had 2 graduate students work on projects not requiring personal identification of licensees or applicants. Will continue to look for ability to work with nursing students/graduate students.

Licensing, Fiscal and Organizational Development			
Integrity Stewardship Simplicity Collaboration	Focus on customer service	Establish and measure customer service standard and measurements for Licensing and Fiscal operations.	**Ongoing:** Standards have been developed and are measured quarterly. Redefining objectives may be required to truly capture the customer defined service issues.
		Reduce the amount of time it takes to obtain a license.	**On target:** With the exception of Endorsement applications, this target has been achieved as of the 4th Q of FY 2016: Baseline measure 2.38 days, 4th Quarter measure 2.38 which represents a 5% decrease in 1 year. Will continue to monitor.
		Establish and implement service level agreement with internal customers.	**Not met:** Only internal agreement made is that "Support Requests" will be used when requesting assistance from IT in order to track IT workload. No other internal agreements have been made to date.
Integrity Stewardship Simplicity Collaboration	Effective, high quality leadership, governance	Create and begin implementation of an agency development strategy-offer courses both internally and externally	**Met:** Needs assessments done, log of staff education offerings shows internal and external offerings. 73% of the staff have taken advantage of external education offerings.
		Integrate and measure competencies into performance evaluations	**Ongoing:** New performance tool implemented in January 2017.
Investigations			
Integrity Simplicity Collaboration Stewardship Innovation	Effective high quality leadership, governance	Improve Internal workflow processes and ensure consistency by creating internal policies and procedures for work flow processes in investigations.	**Met:** Investigations desk manual published and online for all staff under the F: common drive in Aug 2016.
Integrity Simplicity Stewardship	Provide guidance for, and regulation of, the nursing profession	Reduce the number of SB235 (public complaints) cases over 120 days by 10% by improving tracking by management and CRM and improve upon current work flow processes	**Not met:** Current measures are well above the baseline of 113 days, currently at 129 days. Additional Investigator staff hired as result of E-Board approval to help decrease the number of days to the Board.
Policy Analysts			
Integrity Simplicity Collaboration Innovation	Provide guidance for and regulation of the nursing profession.	Consistent application of Board rules and policies across all departments.	**Partially Met:** Representatives from Licensing and Investigations attending the weekly practice question triage meeting. No formal review of rule and policies done for staff.

		Use OSBN Intranet to communicate frequently asked rule and policy questions for staff review.	**Not Met:** Not yet implemented, initial implementation date June 2016. Documentation of practice questions/answers documented but staff does not have access. Will prepare implementation plan to accomplish by June 2017.
		Provision of education to all departments on implementation of new rules and policies	**Ongoing:** Implementation date of Dec 2016
Integrity Collaboration		Gather information from internal sources to inform public and licensees of common concerns and themes identified in discipline	**Met:** Agency now has sentinel article planning meeting to discuss the topics for the next edition based upon appropriate and timely topics or if a repeat publication of a previous article is warranted.
		Communication and outreach to address issues identified	**Ongoing:** Public presentations reported in agency annual report. Agency continues to respond to requests for public education. Agency also sending information offering to come and provide education to schools and healthcare systems.
Integrity Simplicity Collaboration Stewardship		Nursing Education Advisory Group (NEAG) draft deliverable on survey process re-design	**Ongoing:** Has implementation date of Dec 2016. NEAG meeting regularly
		APRN Controlled Substances Policy	**Not met:** substance policy not yet online nor developed.
		Provide quarterly regional educational sessions for training program faculty	**Ongoing:** Training also occurring due to changes in CNA testing program.
		Provide a minimum of 20 Nurse Practice Act education events per year.	**Exceeded:** Currently averaging 30 per year
		Nursing Practice Policy Committee to update six draft policies per year	**Not Met:** Nursing Practice Policy Committee continues to work on policies. Have completed several policies but not the target of 6.
		Development of online education functionality	**Ongoing:** Agency has purchased online “Articulate” education software. Gretchen Koch has education in this new software with the intent to place online, CE awarding education onto the OSBN website. Jan 2017 due date for this objective