NURSING, BOARD of


Original Submission Date: 2015
Finalize Date: 9/30/2015
<table>
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<tr>
<th>2014-2015 KPM #</th>
<th>2014-2015 Approved Key Performance Measures (KPMs)</th>
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<td>1</td>
<td>TIMELY RESOLUTION OF COMPLAINTS - Percent of cases investigated and referred to Board within 120 days of receipt of complaint.</td>
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<td>2</td>
<td>REDUCTION OF RECIDIVISM - Percent of disciplined licensees with a new complaint within three years of Board closing original case with a disciplinary action.</td>
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<td>3</td>
<td>CUSTOMER SERVICE - Percent of customers rating their satisfaction with the agency's customer service as good or excellent: overall customer service, timeliness, accuracy, helpfulness, expertise and availability of information.</td>
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<td>4</td>
<td>ON-LINE TRANSACTIONS: Percent of business transactions completed on-line.</td>
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<td>5</td>
<td>TIMELY LICENSING: Percent of licensing applications processed within target.</td>
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<td>6</td>
<td>EFFECTIVE GOVERNANCE: Percent of total best practices met by the Board.</td>
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<td>Proposed Key Performance Measures (KPM's) for Biennium 2015-2017</td>
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<tr>
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<td>Title:</td>
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The mission of the Oregon State Board of Nursing is to safeguard the public's health and well-being by providing guidance for, and regulation of, entry into the profession, nursing education, and continuing safe practice.

1. SCOPE OF REPORT

Most major agency programs and services are addressed by these key performance measures: Customer Service and Licensing, Investigations, and Information Technology.

2. THE OREGON CONTEXT
The mission of the Oregon State Board of Nursing is to safeguard the public's health, safety and wellbeing by providing regulation of, and guidance for, entry into the profession, nursing education, and continuing safe practice. The agency partners with many organizations to achieve this mission, including the Oregon Nursing Leadership Collaborative, the Oregon Nurses Association, the Oregon Center for Nursing, other Oregon health regulatory boards, colleges and universities, employers and the public.

3. PERFORMANCE SUMMARY

The agency met the majority of its targets. Following our database conversion in FY 2014, which adversely affected a couple of our Licensing performance measures, we have returned to our usually high marks. We were slightly deficient in our Effective Governance measure; we are currently revamping our Board Member orientation process to incorporate the new DAS iLearn orientation module, which we expect will result in a higher score in the next biennium.

4. CHALLENGES

As mentioned above, the issues surrounding the agency’s database conversion (that had affected some of the agency’s KPM results in FY 2014) have been resolved, and the agency has returned to its previously high performance levels.

5. RESOURCES AND EFFICIENCY
### II. KEY MEASURE ANALYSIS

<table>
<thead>
<tr>
<th>KPM #1</th>
<th>TIMELY RESOLUTION OF COMPLAINTS - Percent of cases investigated and referred to Board within 120 days of receipt of complaint.</th>
<th>2003</th>
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<tbody>
<tr>
<td><strong>Goal</strong></td>
<td>Ensure the safety of those Oregonians who are cared for by nurses: Timeliness of complaint resolution.</td>
<td></td>
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<td><strong>Oregon Context</strong></td>
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<tr>
<td><strong>Data Source</strong></td>
<td>Database query, Board meeting documents</td>
<td></td>
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<tr>
<td><strong>Owner</strong></td>
<td>Investigations Manager: Jacy Gamble</td>
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#### 1. OUR STRATEGY

The Investigations department completes its investigations and reports to the Board in as timely a manner as possible. This includes gathering all information necessary (including document review and witness interviews) to enable the Board to take informed and appropriate actions for violations of the Nurse...
Practice Act. A timely process removes violators from the workplace when and where appropriate, protecting patients from future incidents. The timeframe of this measurement is based on ORS 676.165, which provides that all complaints received by the Board regarding nursing conduct be assigned to an investigator, investigated and reported to the Board within 120 days of receipt. Although the statute provides a mechanism to extend the period beyond the 120 days when needed, the Board encourages staff to use extensions sparingly.

2. ABOUT THE TARGETS

Ideally, 100% of all complaints would be resolved within the 120 day window. In reality, outside delays in procuring needed documents, as well as a failure to cooperate on the part of some individuals, lengthens the process in many cases. Targets were set based on historical data and expected changes in resources.

3. HOW WE ARE DOING

As of the date of this report, 59 percent of disciplinary cases in FY 2015 were presented to the Board within 120 days, which falls just below the agency target of 60 percent.

4. HOW WE COMPARE

There are no known industry standards to provide a comparative measurement.

5. FACTORS AFFECTING RESULTS

Although the new CRM database gives investigative staff more tools to manage their caseloads, more work needs to be done regarding the consistent use of the tools. Agency management has implemented additional clarifying policies which should stabilize this measure in coming years.

6. WHAT NEEDS TO BE DONE

Staff needs to remain diligent in monitoring the aging of caseloads and use extension requests appropriately.

7. ABOUT THE DATA

The data is reported on an Oregon fiscal-year basis. Our agency CRM database is queried for complaint timeliness based on the date a case is seen by the
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<tr>
<td>Board.</td>
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### 1. OUR STRATEGY

Recidivism relates to the number of licensees and certificate-holders who are reported to the Board for misconduct despite having had disciplinary action taken against them within the preceding three fiscal years. The Board tracks this measure as a means of indicating the effectiveness of the initial sanction. It is...
II. KEY MEASURE ANALYSIS

premised on the concept that individuals will not be reported to the Board a second time if the original sanction was appropriate to resolve the underlying misconduct. Although true recidivism would be if a licensee was reported to the Board within the timeframe for the same type of offense, the legislature indicated in 2009 that it prefers a broader interpretation.

2. ABOUT THE TARGETS

A low rate of recidivism indicates the Board is disciplining licensees appropriately and protecting the public.

3. HOW WE ARE DOING

The OSBN's rate of 2 percent exceeded its target of 3 percent. The number reflects the licensees who were disciplined in FY 2012, 2013, or 2014, and were reported to the Board for any offense during FY 2015.

4. HOW WE COMPARE

The National Council of State Boards of Nursing reported in 2009 that the ten-year average (1996-2006) recidivism rate as a result of nursing board disciplinary action was 21 percent (with states reporting from a low of 0 percent to a high of 43 percent). Oregon's rate is much better than that. There is no more recent data.

5. FACTORS AFFECTING RESULTS

In its investigative and disciplinary process, the Board works to determine what factors led to the violation. Disciplinary action is thus based on addressing those factors to the greatest extent possible. Many situations can be resolved through additional education or monitored practice. In this manner, the root cause is fixed and a return to competent and safe practice can be achieved. In other situations that are not suitable to remediation, the Board action is more punitive in nature as a deterrent to any such future violations, or to remove that individual from practice altogether if necessary.

6. WHAT NEEDS TO BE DONE

The Board needs to remain attentive to the factors leading to violations, and be consistent in its decisions.
7. ABOUT THE DATA

The data is reported on an Oregon fiscal year basis from queries of our CRM database.
1. OUR STRATEGY

As an agency supported entirely by its constituency, excellent customer service is essential to sustaining operations and meeting the agency mission. The OSBN Customer Service Survey was developed following the Recommended Statewide Customer Service Performance Measures Guidelines. Respondents were asked to rate select criteria as excellent, good, fair, poor or don’t know. The Guidelines define customer satisfaction as the percentage sum of good and excellent ratings for six service criteria: timeliness, accuracy, helpfulness, expertise, information availability and overall quality. While the current performance
measure has been standardized and implemented state-wide, OSBN has been conducting similar surveys since 1996. Previously to 2008, surveys were performed biennially. Since launching the improvements to our online renewal system in April 2009, we have been able to greatly increase the accuracy of our data regarding licensees. We now conduct this survey electronically on an annual basis. The next scheduled survey is 2016.

2. ABOUT THE TARGETS

We set our customer service expectations high, based on previous survey results. As our customer base is very large, at almost 80,000 people, 100% satisfaction may not be attainable.

3. HOW WE ARE DOING

The agency met all of its targets in FY 2015 except one: Availability of Information. We are planning a redesign of our agency website in 2016 and expect higher scores next year.

4. HOW WE COMPARE

Customer satisfaction is highly subjective, at least from one population to another. OSBN seems to be on a par with other Oregon health licensing agencies.

5. FACTORS AFFECTING RESULTS

The stabilization of the new database is reflected in our high customer satisfaction numbers. In addition, an increased focus in the agency on customer service has positively affected our performance measures.

6. WHAT NEEDS TO BE DONE

With continued staff training and further optimization of the new CRM database in Licensing, we expect to continue to achieve or exceed our targets in all categories in FY 2016.

7. ABOUT THE DATA
5,115 surveys were sent during August 2014 to a randomly-selected 25 percent of licensees who received a new or renewal license between January 1 and June 30, 2015. Initial applications for licensure are on demand, and renewals are biennial and by birth date. We received 1,697 return surveys (33 percent).

The online survey was conducted via SurveyMonkey. The survey questions were exactly as recommended in the "Statewide Customer Service Performance Measures Guidance," as follows:

--How do you rate the timeliness of the services provided by the OSBN?
--How do you rate the ability of the OSBN to provide services correctly the first time?
--How do you rate the helpfulness of OSBN employees?
--How do you rate the knowledge and expertise of OSBN employees?
--How do you rate the availability of information at the OSBN?
--How do you rate the overall quality of service provided by the OSBN?

Answer choices were as follows: Poor, Fair, Good, Excellent, Don’t Know.
1. OUR STRATEGY

The Board's online renewal system has been a success since it was launched in 2004. A significant upgrade to the system was done in April 2009, and further enhancements were launched in August 2010. We expect to implement further changes in 2016 to take full advantage of the capabilities of the agency's new licensing database.
2. ABOUT THE TARGETS

100 percent utilization won’t occur until paper forms are no longer accepted.

3. HOW WE ARE DOING

As stated earlier, the stabilization of the new CRM database in the Licensing department brought the agency back up to its usual high marks.

4. HOW WE COMPARE

Informal discussions with other state boards of nursing who have previously implemented online services indicate that Oregon's success rate has been consistently higher than rates in other states, which peak at approximately 70 percent.

5. FACTORS AFFECTING RESULTS

A number of applicants who don't meet various licensing requirements and need further evaluation are still processed via paper applications.

6. WHAT NEEDS TO BE DONE

The agency is in the planning stages of a redesign of all of its online services in accordance with new state website design standards and to take full advantage of our new database's capabilities. The redesign will incorporate exam applications for nurses and nursing assistants into the system for endorsements and renewals. Work should be completed in FY 2016.

7. ABOUT THE DATA

The data is reported on an Oregon fiscal year basis. Statistics are available through our licensee database.
NURSING, BOARD of

II. KEY MEASURE ANALYSIS

<table>
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<tr>
<th>KPM #5</th>
<th>TIMELY LICENSING: Percent of licensing applications processed within target.</th>
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<tbody>
<tr>
<td>Goal</td>
<td>Timely Licensing: Percent of licenses processed within five business days.</td>
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<tr>
<td>Oregon Context</td>
<td>Mission</td>
</tr>
<tr>
<td>Data Source</td>
<td>Licensing database query.</td>
</tr>
<tr>
<td>Owner</td>
<td>Licensing, Fiscal, and Organizational Development Manager: Helen Bamford</td>
</tr>
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</table>

1. OUR STRATEGY

It is the agency’s goal to issue a license, or notify applicants of deficiencies in their application, within five business days of receiving an application.
2. ABOUT THE TARGETS

The five-day target is similar to other health regulatory boards.

3. HOW WE ARE DOING

As stated earlier, the stabilization of the new CRM database in the Licensing department brought the agency back up to its usual high marks.

4. HOW WE COMPARE

Although the complexity of licensing requirements varies, thus affecting the length of the licensing process, OSBN seems to be on a par with other Oregon health licensing agencies.

5. FACTORS AFFECTING RESULTS

The stabilization of the new Licensing database was key to improving our results. As mentioned before, the system is now stable, and we expect to maintain our high level of service.

6. WHAT NEEDS TO BE DONE

The Board needs to be vigilant in its licensing processes to maintain its current high level of performance.

7. ABOUT THE DATA

The data is reported on an Oregon fiscal year basis from queries of our licensing database.
II. KEY MEASURE ANALYSIS

<table>
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<th>KPM #6</th>
<th>EFFECTIVE GOVERNANCE: Percent of total best practices met by the Board.</th>
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<tr>
<td>Goal</td>
<td>Strategic Board Leadership</td>
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<tr>
<td>Oregon Context</td>
<td>Mission</td>
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<tr>
<td>Data Source</td>
<td>Annual Board Self-Evaluation</td>
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<tr>
<td>Owner</td>
<td>Executive Director: Ruby Jason, MSN, RN, NEA-BC</td>
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1. OUR STRATEGY

The strategy to achieve this target includes: reinforcing governance principles with the Board, strengthening our Board member orientation, and continuing to provide management reports focused on governance principles to the Board and staff.
2. ABOUT THE TARGETS

It is the goal of the board to achieve 100 percent on this key measure.

3. HOW WE ARE DOING

The Board’s 93 percent compliance rate almost met its goal of 100 percent compliance.

4. HOW WE COMPARE

OSBN seems to be on a par with other Oregon health licensing agencies.

5. FACTORS AFFECTING RESULTS

Several current Board members began their terms during the 18 months in Fiscal Years 2013 and 2014 where the agency was without a permanent Executive Director, during which time the orientation process was not as thorough as usual.

6. WHAT NEEDS TO BE DONE

The agency is currently updating its Board Member orientation process, to strengthen the Board’s knowledge of public meeting requirements and best practices. The Board will continue to require data and management reports to ensure the accountability of its staff.

7. ABOUT THE DATA

The 15 Best Practices for Effective Governance:
1. Executive director’s performance expectations are current.
2. Executive director receives annual performance feedback.
3. The agency’s mission and high-level goals are current and applicable.
4. The board reviews the Annual Performance Progress Report.
5. The board is appropriately involved in review of agency key communications.
6. The board is appropriately involved in policy-making activities.
7. The agency’s policy option budget packages are aligned with their mission and goals.
8. The board reviews all proposed budgets.
9. The board periodically reviews key financial information and audit findings.
10. The board is appropriately accounting for resources.
11. The agency adheres to accounting rules and other relevant financial controls.
12. Board members act in accordance with their roles as public representatives.
13. The board coordinates with other where responsibilities and interests overlap.
14. The board members identify and attend appropriate training sessions.
15. The board reviews its management practices to ensure best practices are utilized.
### III. USING PERFORMANCE DATA

**Agency Mission:** The mission of the Oregon State Board of Nursing is to safeguard the public's health and well-being by providing guidance for, and regulation of, entry into the profession, nursing education, and continuing safe practice.

<table>
<thead>
<tr>
<th>Contact</th>
<th>Barbara Holtry</th>
<th>Contact Phone</th>
<th>971-673-0658</th>
</tr>
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<tbody>
<tr>
<td>Alternate</td>
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<td>Alternate Phone</td>
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The following questions indicate how performance measures and data are used for management and accountability purposes.

#### 1. INCLUSIVITY

* **Staff:** One quarter of the agency staff was involved in developing the agency’s original performance measures. The entire management team was involved in gathering data.

* **Elected Officials:** Members of the state Joint Ways and Means committee reviewed all and eliminated some proposed measures during the 2011 Legislative Session.

* **Stakeholders:** Some stakeholders and licensees are involved with the annual Customer Satisfaction survey.

* **Citizens:**

#### 2 MANAGING FOR RESULTS

The management team makes program decisions based on performance measure data. Performance measures are used to identify causes of lower-than-expected results and to institute corrective actions to improve performance.

#### 3 STAFF TRAINING

Departmental managers have worked with their staff members during the past year to communicate the value of performance measures to the agency's success and solicit ideas as to how to better meet our goals. Additional information has been distributed during all-staff meetings, as well.

#### 4 COMMUNICATING RESULTS

* **Staff:** Performance measure results are shared with staff at all-staff meetings, as well as manager and Board meetings. Information is used to help prioritize workload.

* **Elected Officials:** Results are communicated through annual reporting and budget presentations.

* **Stakeholders:** Annual reports are provided through the agency website. Individual data also is provided as requested.

* **Citizens:** Annual reports are provided through the agency website. Individual data also is provided as requested.