

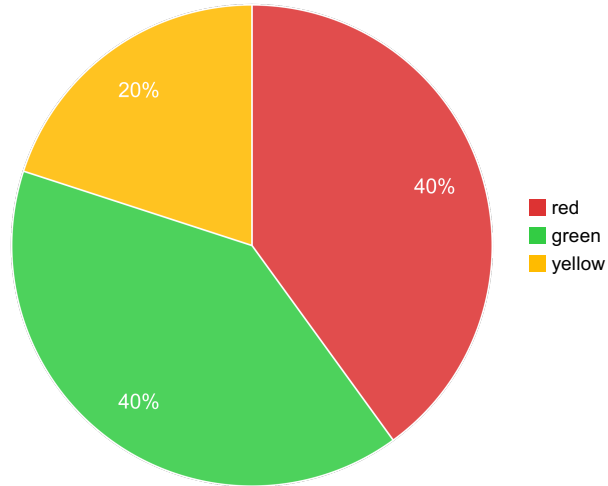
Board of Nursing

Annual Performance Progress Report

Reporting Year 2024

Published: 7/31/2024 4:26:52 PM

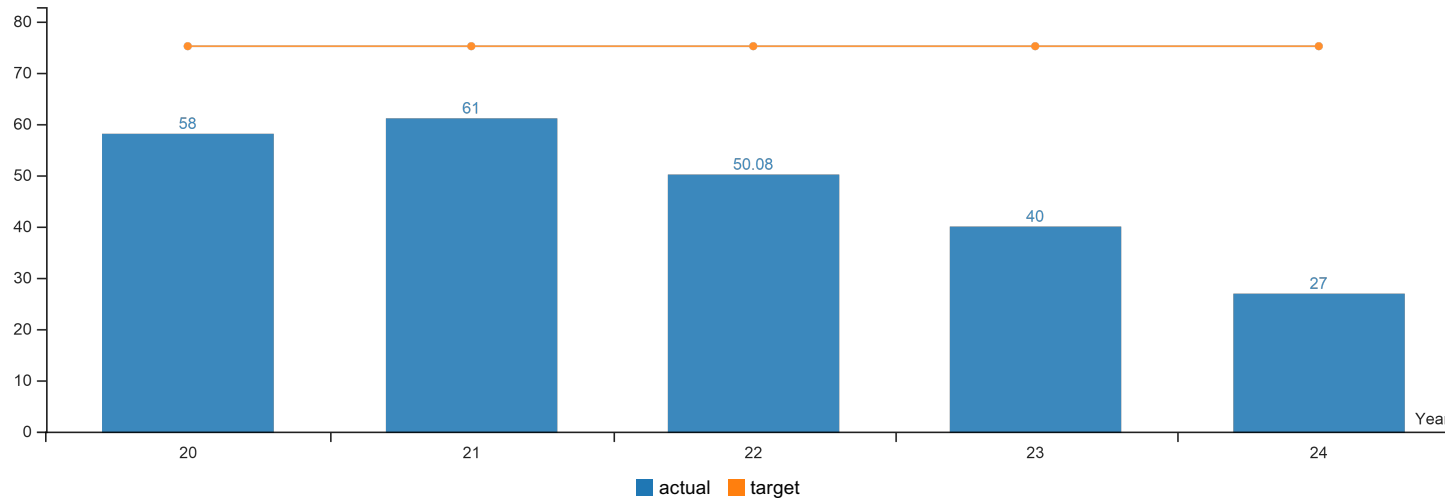
KPM #	Approved Key Performance Measures (KPMs)
1	TIMELY RESOLUTION OF COMPLAINTS - Percent of cases investigated and referred to Board within 120 days of receipt of complaint.
2	REDUCTION OF RECIDIVISM - Percent of disciplined licensees with a new complaint within three years of Board closing original case with a disciplinary action.
3	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.
4	TIMELY LICENSING - Percent of licensing applications processed within target.
5	EFFECTIVE GOVERNANCE - Percent of total best practices met by the Board.



Performance Summary	Green	Yellow	Red
	= Target to -5%	= Target -5% to -15%	= Target > -15%
Summary Stats:	40%	20%	40%

KPM #1	TIMELY RESOLUTION OF COMPLAINTS - Percent of cases investigated and referred to Board within 120 days of receipt of complaint.
	Data Collection Period: Jul 01 - Jun 30

* Upward Trend = positive result



Report Year	2020	2021	2022	2023	2024
Timely Resolution of Complaints					
Actual	58%	61%	50.08%	40%	27%
Target	75%	75%	75%	75%	75%

How Are We Doing

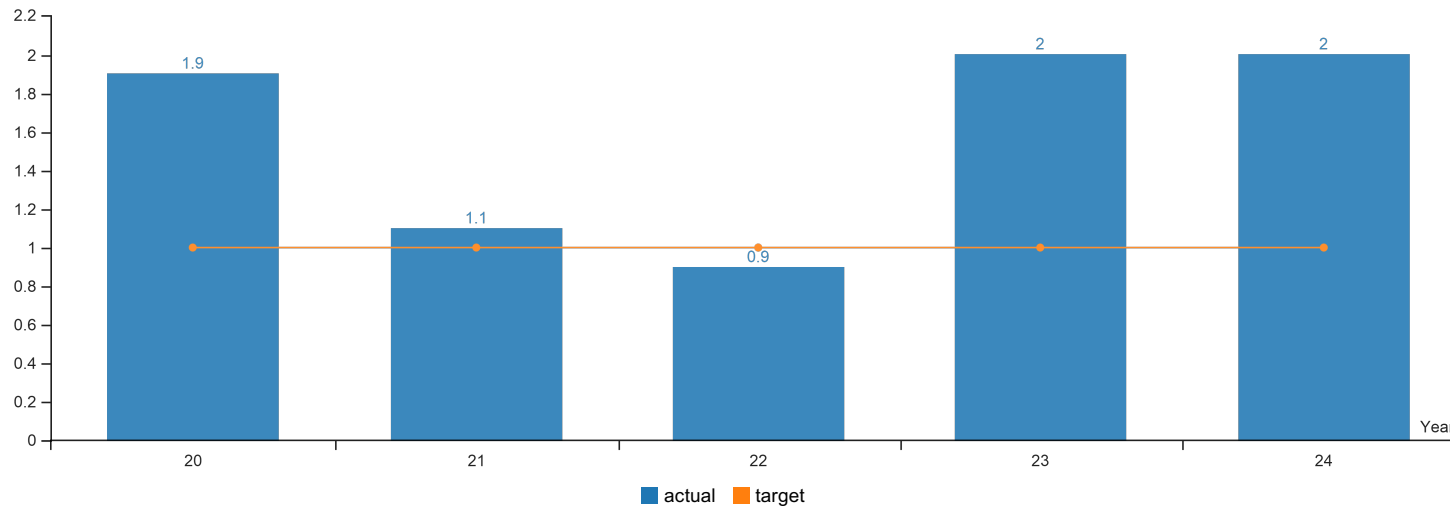
While the agency did not meet its goal in FY 24, our staff investigators remain committed to improving our investigative activities. They strive to complete investigations and promptly present reports to the Board. This includes gathering all necessary information, including HR records, medical records, consultant reviews, Licensee, and witness interviews, to enable the Board to take informed and appropriate action for violations of the Nurse Practice Act.

Factors Affecting Results

During FY 24, the Investigations department faced several challenges, including department leadership changes. Several key staff positions were either vacant or out on protected leave, which led to a lengthy delay in assigning cases and increased caseloads for the remaining investigators. We acknowledge the increased workload on our investigators and are taking steps to address this issue. To compound matters, the agency saw a change in the data system and a significant increase in licensee complaints. This surge in complaints has put additional strain on the department's resources and highlighted the need for more efficient processes. OSBN has also noted a longer timeline for receiving medical and HR records.

KPM #2	REDUCTION OF RECIDIVISM - Percent of disciplined licensees with a new complaint within three years of Board closing original case with a disciplinary action.
	Data Collection Period: Jul 01 - Jun 30

* Upward Trend = negative result



Report Year	2020	2021	2022	2023	2024
Reduction of Recidivism					
Actual	1.90%	1.10%	0.90%	2%	2%
Target	1%	1%	1%	1%	1%

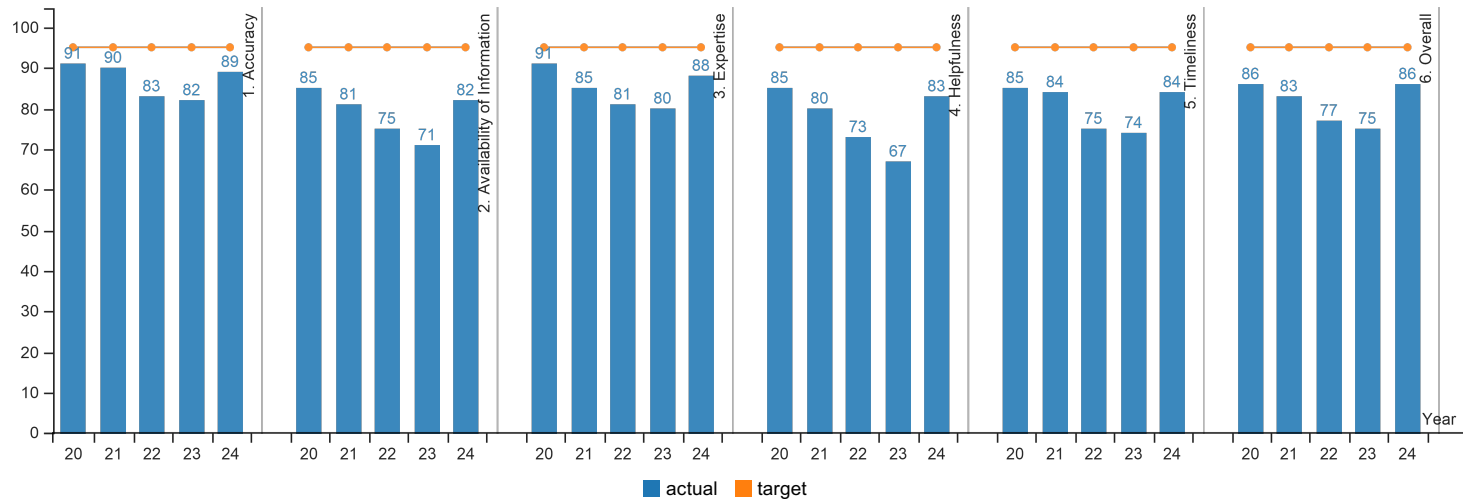
How Are We Doing

Although the agency did not meet its target of 1 percent, it was consistent with the previous year's result. The number reflects the licensees who were disciplined in fiscal years 21, 22, or 23 and were reported to the Board for any offense during FY 24. It is an indication of the effectiveness of the Board's disciplinary decisions regarding its licensees.

Factors Affecting Results

In its investigative and disciplinary process, the Board works to determine what factors lead to the violation of the Nurse Practice Act. Disciplinary action is based on addressing those factors to the greatest extent possible. Many situations can be resolved through additional education or monitored practice. 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.

KPM #3	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.
	Data Collection Period: Jul 01 - Jun 30



Report Year	2020	2021	2022	2023	2024
1. Accuracy					
Actual	91%	90%	83%	82%	89%
Target	95%	95%	95%	95%	95%
2. Availability of Information					
Actual	85%	81%	75%	71%	82%
Target	95%	95%	95%	95%	95%
3. Expertise					
Actual	91%	85%	81%	80%	88%
Target	95%	95%	95%	95%	95%
4. Helpfulness					
Actual	85%	80%	73%	67%	83%
Target	95%	95%	95%	95%	95%
5. Timeliness					
Actual	85%	84%	75%	74%	84%
Target	95%	95%	95%	95%	95%
6. Overall					
Actual	86%	83%	77%	75%	86%
Target	95%	95%	95%	95%	95%

How Are We Doing

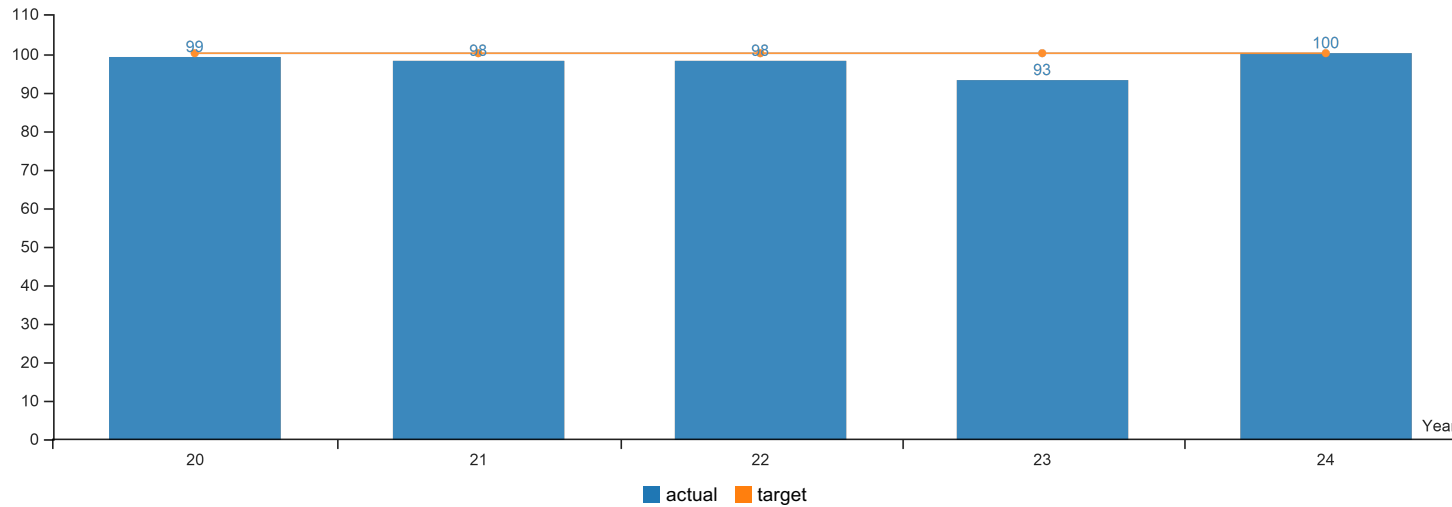
The agency showed significant improvement in every element of this measure. As our customer base is very large, at more than 100,000 people, 100 percent satisfaction may not be attainable. We emailed a survey link to a random 25% of board customers that obtained a license between the dates of January 1, 2024, and June 30, 2024. Out of 7,714 surveys sent, we received 701 responses for an overall response rate of 9%.

Factors Affecting Results

After three years, we reopened the phone lines to the public in January 2024. The phone lines had been closed during the pandemic to allow staff time to process the massive increase in applications received. Since the new OSBN Executive Director began in July 2023, the agency has focused on improving our customer service in all departments, and reopening the phones to provide more direct access for licensees and applicants was a major initiative. The improvement in this year's measure shows our efforts to rebuild our relationships with customers and the public are succeeding.

KPM #4	TIMELY LICENSING - Percent of licensing applications processed within target.
	Data Collection Period: Jul 01 - Jun 30

* Upward Trend = positive result



Report Year	2020	2021	2022	2023	2024
Timely Licensing: Percent of licensing applications processed within target.					
Actual	99%	98%	98%	93%	100%
Target	100%	100%	100%	100%	100%

How Are We Doing

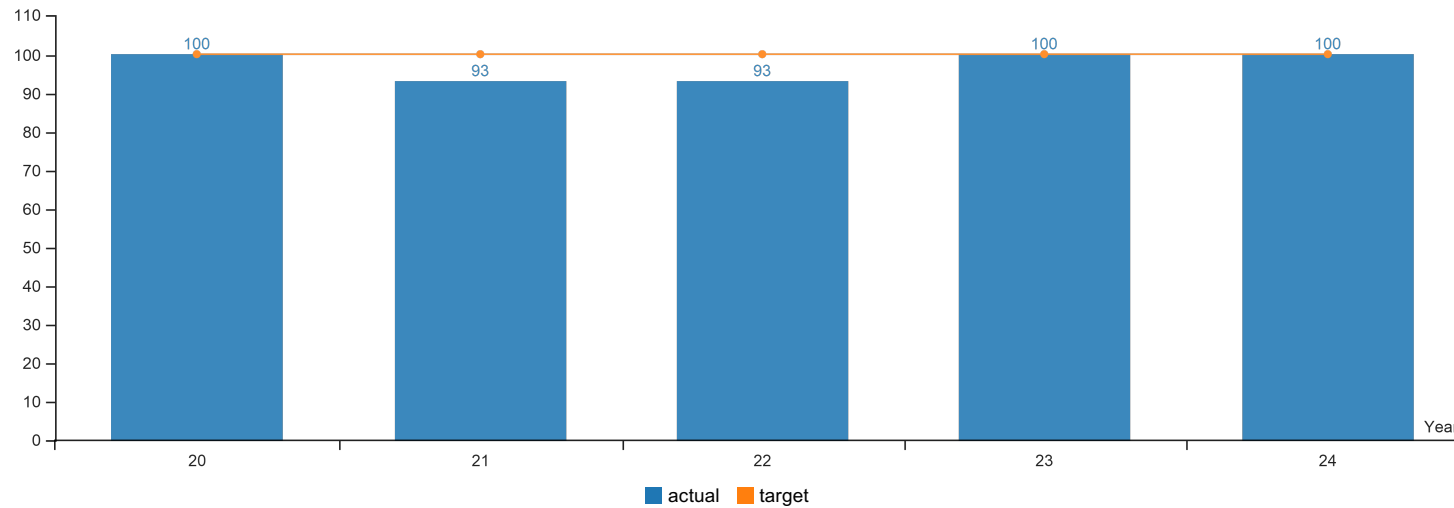
The agency met its target in FY24. This measure demonstrates our efficiency in issuing nursing licenses and nursing assistant certificates once all the appropriate documentation has been received.

Factors Affecting Results

We strive to process applications efficiently and in keeping with our public safety standards. It is the agency's goal to issue a license within five business days of receiving a complete application. A complete application consists of a submitted paid application, background check results, and any other required documentation, such as transcripts.

KPM #5	EFFECTIVE GOVERNANCE - Percent of total best practices met by the Board.
	Data Collection Period: Jul 01 - Jun 30

* Upward Trend = positive result



Report Year	2020	2021	2022	2023	2024
Effective Governance					
Actual	100%	93%	93%	100%	100%
Target	100%	100%	100%	100%	100%

How Are We Doing

The agency met its goal of 100 percent. This measure demonstrates that we are meeting management best practices with respect to governance oversight by our Board.

Factors Affecting Results

The agency uses the Oregon boards and commissions best practices for governance as a guide for this measure. The criteria being evaluated includes executive director performance expectations and feedback, strategic management and policy development, and fiscal oversight and board management. Board members discuss fiscal, oversight, and governance issues at Board meetings on a regular basis. The Board president frequently communicates with the agency executive director on various issues.