IDAHO BOARD OF NURSING

STRATEGIC PLAN

FISCAL YEARS 2019-2022

Sandra Evans, MAEd, RN, Executive Director

Vicki Allen, RN, Chair

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IDAHO BOARD OF NURSING
ORGANIZATIONAL CHART

Revised June 2018

MISSION

The Mission of the Idaho Board of Nursing is to regulate nursing practice and education for the purpose of safeguarding the public health, safety, and welfare

VISION

Regulating nursing with collaboration, innovation and strategic leadership to ensure the nursing workforce meets the changing needs of Idahoans

VALUES

Accountability: Acknowledging and assuming responsibility for actions, decisions and policies

Collaboration: Working with others with courtesy, attentiveness and understanding and utilizing their diverse expertise to reach solutions

Innovation: Embracing change as an opportunity to improve organizational endeavors and turn ideas into action

Integrity: Being honorable, forthright, and acting with conviction based upon a firm intention to seek the impartial truth and act justly

Leadership: Using knowledge and experience to influence the perceptions, understanding and behaviors of others

STRATEGIC GOALS

Licensure/Certification: License/Certify Qualified Persons for Practice

Practice: Establish and Communicate Standards of Conduct and Scope and Standards of Practice

Discipline/Alternatives to Discipline: Receive and Investigate Alleged Violations of the Act/Rule and Initiate Disciplinary Actions and Alternatives to Discipline

Education: Establish, Communicate, and Enforce Standards for Educational Programs Preparing Individuals for Practice at all Levels

Governance: Cultivate Governance Framework and Culture that Sustains Board Relevance and Supports Accomplishment of Vision, Mission, and Goals

Communication: Foster Communication between the Board, its Colleagues, Internal and External Stakeholders and the Public

Organization: Support Organizational Infrastructure Necessary to Accomplish the Vision, Mission, and Goals.

KEY EXTERNAL FACTORS THAT MAY IMPACT GOAL ACCOMPLISHMENT

Changing economic, political, social, and healthcare environments have an effect on the Board of Nursing's ability to accomplish strategic goals and objectives and have the potential to alter outcomes and projected timelines reflected in the Board's Strategic Plan. Idaho's changing population demographics, national healthcare reform initiatives, the shift from nursing care delivered at the bedside to care delivered via telehealth may result in necessary shifts in direction as the Board strives to adequately protect the public health and welfare.

Economic
State and national economic fluctuations impact the nursing workforce both in terms of the number of nurses applying for and receiving licenses as well whether or not licensed nurses choose to enter, remain in or leave the profession. In addition, state and national economic fluctuations impact healthcare economics which in turn affect Board revenue projections and actual income.

Political
As a self-governing agency of state government, the Board is directly affected by the state's political climate and resulting policy decisions and directives. Appropriated spending authority, progress on proposed initiatives, and political hurdles encountered during the enactment of statutory revisions all affect Board accomplishment of strategic goals and benchmarks.

Sociologic/Demographic
Consumer demand for access to home and community based care, client-directed care, and care delivered via telehealth continue to impact how nurses are educated and how/where they are licensed. Social issues that may impact the health of Idahoans, such as substance use and mental health disorders, the effects of aging, and work-related stress, among others affect the performance and behavior of nurses as well as the clients for whom they provide care. Many of these same factors will impact the number and complexity of investigations into the practice and behavior of nurses alleged to have violated provisions of the law and may result in special licensure considerations for these nurses to assure public protection.

Environmental
Support systems, policies, and logistics for environmentally-friendly processes and transactions affect Board functions and operations strategies. Efforts to conserve natural resources and protect and nurture the environment affect the way the Board accomplishes its objectives, from paperless processes, to virtual meetings, to telecommute policies for staff.

Technological
Emergency preparedness and planned business recovery strategies present significant operational challenges for the Board of Nursing and our external systems partners. Sophisticated electronic systems and processes, complex interface requirements, anticipated and unanticipated obsolescence and threats to the security and integrity of data require timely replacement and upgrades of existing electronic systems as well as the application of new emerging technology and cybersecurity methodologies.

LICENSURE/CERTIFICATION GOAL: LICENSE/CERTIFY QUALIFIED PERSONS FOR PRACTICE

Objectives	Performance Measures	Benchmarks	Time frame
L.1. Licensure related Board authorities and beliefs guide licensure and certification decisions	• Board affirms licensure/certification processes and decisions are consistent with the Board's *Statement on Licensure* • Licensure statute, rules, policies guide MA-C certification and LPN, RN, APRN licensure by examination, endorsement, renewal, reinstatement decisions	• Belief statements on licensure and continued competence/continuous lifelong learning reviewed for currency and relevance • BON annually self-assesses congruence of licensure decisions with adopted Board beliefs	• 2022/ 2018-19 • Annually each Spring
L.2. Nurses demonstrate professional competence at entry to practice and at each subsequent issuance of license	• Initial licensure by examination requires success on NCLEX-RN/PN® • Initial APRN licensure requires national APRN certification • Initial licensure by endorsement and licensure by reinstatement require successful recent practice and unencumbered licensure/eligibility for unencumbered licensure in Idaho or another jurisdiction • License by renewal requires demonstrated continuous professional development/lifelong learning	• Professional competence/conduct and fitness to practice is assessed for 100% of LPN, RN, APRN applicants • Licensure by equivalence policies guide restrictions for LPN, RN licensure • LPN, RN, APRN license renewal is dependent on compliance with established renewal criteria	• Ongoing with quarterly reporting • Ongoing; quarterly reporting • Biennial reporting for LPNs in even years, RNs/APRNs in odd years ○ Begins 2020 for LPNs; 2021 for RNs; ○ Process development for LPNs, RNs complete 2019
L.3 Applicants who meet adopted Uniform Licensure Requirements (ULRs) and adopted state and national standards are licensed as LPNs, RNs and APRNs by:	• NCSBN ULRs are the criteria for LPN and RN multistate licensure • Licensing decisions for applicants with criminal background, substance use and health impairment histories, are guided by established policies and guidelines	• 100% of applications for licensure are assessed for conformity with each ULR prior to license decision • Single and multistate license determination; practice restrictions; terms and conditions for monitoring; and license denial decisions	• Ongoing, quarterly Reporting • Ongoing, quarterly reporting

Objectives	Performance Measures	Benchmarks	Time frame
• Examination • Endorsement • Reinstatement • Renewal	• APRN Consensus Model informs APRN license decisions • Licenses subject to special restrictions, terms and conditions allow for continued practice under strictly defined parameters • Licensure/certification is dependent on demonstrated professional competence and conduct, and determination of fitness to practice	are consistent with related statute, rules, policies • APRN license decisions conform to Consensus Model criteria for ○ Education for role and population ○ National certification ○ Supporting RN licensure	• Ongoing, quarterly reporting
L.4. The Board's adopted nursing regulatory model is Mutual Recognition	• Idaho adopts/implements the Nurse Licensure Compact (NLC) and APRN Compact • Idaho demonstrates compliance with terms and conditions of each Compact • Until implementation of the APRN Compact, the *Consensus Model for APRN Regulation* provides the framework for APRN regulation	• NLC adopted 70/1/16, implemented 1/19/18 ○ Rules promulgated/adopted ○ Policies developed/adopted • APRN Compact adopted 7/01/16 • NLC compliance/APRN Consensus Model compliance self-assessments completed	• Updates provided quarterly • Pending implementation threshold of #10 states • 2019 then annually
L.5.Licensure/certification standards are responsive to changes in the healthcare and regulatory environments	• Issues and trends in the healthcare environment impacting licensure/certification are identified and addressed by the Board • Licensure/certification standards are reviewed and revised to protect against unnecessary barriers to credentialing and practice • Meet or exceed the national benchmarks for license-related processes as defined by CORE® research data	• Environmental scan informs BON of emerging trends, issues related to licensure • Licensure-related statute, rules, policies and processes are reviewed for currency, relevance and unnecessary regulatory barriers • Internal audit of licensure processes and decisions affirms accuracy and consistency ○ 95% of license applications processed online	• Quarterly • 2018 • Annually ○ Ongoing

Objectives	Performance Measures	Benchmarks	Time frame
		○ Research data, including CORE® constituent responses, inform Board on strategies for improvement	○ Update annually

PRACTICE GOAL: ESTABLISH AND COMMUNICATE STANDARDS OF CONDUCT AND SCOPE AND STANDARDS OF PRACTICE

Objectives	Performance Measures	Benchmarks	Time frame
P.1. Practice related Board authorities and beliefs guide the regulation of nursing practice	• The Board affirms decisions related to conduct and practice are consistent with the Board's *Philosophy of Nursing Practice.* • Practice is defined consistent with the nurse's pre-licensure education, specialized training, demonstrated competence, and recognized national standards & guidelines • Guidance to licensees is provided in interpretive statements, NCSBN guidelines, regulatory statements and other practice related position statements • Board appointed Advanced Practice Registered Nurse Advisory Committee (APRN-AC) provides guidance to the Board on matters relating to advanced practice nursing. • Board assigned APRN-AC responsibilities are supported as directed	• Practice and Safety to Practice statements are reviewed for currency and relevance and alignment with emerging trends and the changing regulatory environment • BON annually self-assesses congruence of practice decisions with adopted Board beliefs • NCSBN statement on Regulatory Implications of Pain Management provides guidance to licensees • Interpretive Statement on Midwifery provides guidance to licensees • Consideration of APRN-AC recommendations	• Review due 2022 • Self-assessment due Spring 2019 • Guidelines and interpretative statements review due 2020 • Quarterly
P.2. Practice related statutes and rules are responsive to evolving changes in state, national and international health care delivery processes	• Unnecessary barriers to evolving practice are identified and eliminated • Board identifies issues, trends and research defining nursing practice • Meet or exceed national benchmarks for practice processes as defined by CORE® research data	• Practice-related statute, rules, policies and processes are reviewed for unintended barriers • Board participation in state and national dialogue on current and emerging practice issues • CORE® national benchmarks align with BON benchmarks	• Review due 2019 • Ongoing • 2018 CORE data review 2019

Objectives	Performance Measures	Benchmarks	Time frame
P.3. Nurses, employers and others are informed of the scope and legal parameters and standards of practice in Idaho	• Provide practice information via multiple communication modalities to a variety of audiences • CORE® performance indicators serve as targets for improvement and innovation	• Website updates, newsletters and flyers enhance information related to nursing practice • Presentations, phone calls, emails and meeting participation provides information exchange to stakeholders • CORE® data is reviewed for consistency with Board rules and processes - Research data, including CORE® measures inform the Board on strategies for improvement	• 2019 and ongoing • 2019 and ongoing • 2019 and ongoing

DISCIPLINE/ALTERNATIVES TO DISCIPLINE GOAL: RECEIVE AND INVESTIGATE ALLEGED VIOLATIONS OF THE ACT/RULE AND INITIATE DISCIPLINARY ACTIONS AND ALTERNATIVES TO DISCIPLINE

Objectives	Performance Measures	Benchmarks	Time frame
D.1. Discipline related Board authorities and beliefs guide the process of investigation and discipline	• The Board affirms discipline processes and decisions are consistent with the Board's Position Regarding Discipline and Position on Safety to Practice • Board and attorney processes, defined roles and responsibilities are consistent with Board beliefs	• The Board's belief statements Position Regarding Discipline and Position on Safety to Practice are periodically revised. • Discipline policies reviewed for currency, relevance, and best practice • BON staff & attorney case review processes optimize productivity and strive to achieve best practice	• Reviews due 2021 • Ongoing • Ongoing
D.2. Complaint and investigation results alleging violations of statute and rules are addressed promptly, fairly, and consistently	• All written complaints are reviewed • Complaint allegations are prioritized using recognized assessment instruments based on risk or potential harm to the public	• 100% of complaints received are reviewed. The BON exceeds Policy V-2, "Complaint Management": <30 day for new complaints triage • 90% of complaints are processed via electronic processes. Paper retained for ORBS 2.0 back up and back office functionality/stability • Complaints are evaluated using: the NCSBN Regulatory Discipline Pathway® (RDP), Complaint Evaluation Tool (CET) and are based on "Just Culture" principles • CORE® indicators: BON processes are perceived as: o deterrent from violating 90% o timely 65% o fair 85% o current 85% o informative to respondent and complainant 50% • Goals 90% of cases will be resolved within 8 months of receipt of the complaint	• Ongoing • Ongoing • Ongoing • Ongoing • Ongoing

Objectives	Performance Measures	Benchmarks	Time frame
D.3. Investigation findings, conclusions and actions are commensurate with the severity of the violation	• Licensees are provided due process: ○ Summary suspension, hearing, negotiated settlement, voluntary surrender ○ Formal hearing, default hearing, Board negotiated settlement	• BON staff & attorney case review processes consider licensee due process, the Administrative Procedure Act & delegated authority to the executive officer	• Ongoing; quarterly reporting
	• When there is minimal risk to public safety: ○ Dismiss, Close, Caution, Remediation, Probation ○ Refer to Alternatives to Discipline (ATD) Program for Recovering Nurses (PRN) ○ Refer to Alternatives to Discipline (ATD) Practice Remediation Program (PRP)	• Complaints are evaluated using nationally recognized instruments. Root causes of practice breakdown are identified and analyzed to direct Board actions	• Ongoing; quarterly reporting
	• When there is evidence of real or potential risk to public safety: ○ Denial of license ○ Practice restriction ○ Revoke, Suspend, Probation, Reprimand, Limit, Restrict, Condition, other action ○ Refer to ATD-PRN, refer to ATD-PRP	• 100% of investigations with Nursing Practice Act violations and grounds for discipline & who present a danger to the public, are presented to the BON for action	• Ongoing; quarterly reporting
	• Board Action is reported to authorized entities and is accessible to the public as required and permitted by law	• NCSBN.org, NPDB, FITS, other agencies electronically or paper as requested. ORBs electronic processes will continue with (and future generations) to merge NURSYS discipline reporting	• Ongoing

Objectives	Performance Measures	Benchmarks	Time frame
D.4. Investigation and discipline processes are responsive to changes in the healthcare and regulatory environments	• The Board considers research and evidence-based practices as appropriate • CORE® discipline-related performance indicators serve as targets for improvement	• The BON's foundational statement is aligned with emerging trends and the changing regulatory environment	• Ongoing

ALTERNATIVES TO DISCIPLINE

Objectives	Performance Measures	Benchmarks	Time frame
A.1. Alternative to Discipline (ATD) related Board authorities and beliefs guide the administration of alternative to discipline programs	• The Board affirms alternatives to discipline are consistent with the Board's Position Regarding Discipline, Program for Recovering Nurse's Belief Statement and Position on Safety to Practice • ATD Program mission statements are consistent with the Boards' Mission of public protection • Board appointed Program for Recovering Nurses Advisory Committee (PRNAC) provides guidance to the Board on matters relating to nurses whose practice is or may be impaired due to a substance use disorder or mental illness.	• Routinely review statutory requirements Board belief statement (related to substance use), policy and guidelines, in accordance with ATD program processes • Program assessments/self-administered audits assure the Board's ATD programs are effective in protecting the public • Appointment of a Board member to serve as PRNAC chairperson • Appointment of committee members to the Program for Recovering Nurses Advisory Committee (PRNAC) • Reports/recommendations related to PRN • Contract award and continual assessment of external contract/vendor	• Quarterly • Annually or as needed • Annually • As needed • Quarterly • 2 year contract expires 11/1/2018 SA eligible for first extension
A.2. Participation in an Alternative to Discipline Program is determined on a case by case basis, using the application of evidence based criteria. Board Approved Programs are: ○ The Program for Recovering Nurses (PRN) ○ Practice Remediation Program (PRP)	• PRN – Participation and program completion is determined through Board approved: pre-admission screening, professional evaluation, contract compliance, • PRP – Participation for nurses whose practice does not meet standards will be determined based on: • Evidence validating a knowledge or skill deficit, accepted intake, and exit methods. • Continued practice while enrolled in Alternatives to Discipline (ATD) is contingent on compliance with terms and conditions of participation	• Terms and conditions of participation are consistent with statutory requirements, Board policy and guidelines • Participation expectations are clearly specified in individualized contracts or agreements • Compliance is continuously monitored and reported • Failure to comply with terms and conditions of ATD programs, is promptly identified and addressed • Nurses referred to the Board for action when monitoring contract violations occur	• Ongoing • Ongoing • Ongoing • Ongoing • Quarterly • Quarterly or as necessitated

Objectives	Performance Measures	Benchmarks	Time frame
	• Threats to public safety are referred to discipline	• Evidence of risk to public is acted upon promptly i.e. threats to public safety are referred to discipline	
A.3. Alternative to Discipline (ATD) programs are responsive to changes in the healthcare and regulatory environments	• Board Rules, ATD policies and guidelines are aligned with emerging trends and the changing regulatory environment • The Board modifies program requirements based on research and evidence-based practices as appropriate	• National guidelines and best practices are consistently reviewed for application to alternative to discipline programs	• As needed, dependent on NOAP or NCSBN national revisions, or directed by policy.
A.4. Communicate the purpose and public safety benefits of the ATD programs to potential participants and other stakeholders	• Provide ATD Programs information to a variety of audiences • CORE® performance indicators serve as targets for improvement	• Board staff will provide ATD Programs information to a variety of audiences	• Ongoing

EDUCATION GOAL: ESTABLISH, COMMUNICATE AND ENFORCE STANDARDS FOR EDUCATIONAL PROGRAMS PREPARING INDIVIDUALS FOR PRACTICE AT ALL LEVELS

Objectives	Performance Measures	Benchmarks	Time frame
E.1. Education related Board authorities and beliefs guide nursing education regulation	• Board affirms decisions related to standards for nursing education are consistent with Board's *Philosophy of Education Regulation*, regulatory and academic environments • Board affirms administrative rules enable the evolution of nursing education	• Education belief statement reviewed and endorsed • IBN annually self-assesses congruence of education decisions with adopted Board beliefs • Review current policy to provide clarity to Board's role in regulation of distance education programs • Review current policy to provide clarity of national accreditation and Board approval of programs	• 2019 • Self-Assessment due Spring 2019 • 2019 • 2019
E.2. Education programs meet or exceed Board-defined standards and criteria	• Approved education programs are regularly assessed for compliance • Board sanctions are imposed in cases of non-compliance with established criteria • Requests to initiate a new program comply with the Board's defined initial approval process • The Board collaborates with other stakeholders in the collection, review, analysis and reporting of education related data	• Evaluate and report compliance of programs with established approval criteria • Evaluate and report the progress of programs engaged in Board-directed remediation • Collect program information through the Board's electronic Annual Nursing Education Report to the Board	• Annually • Ongoing • Annually

Objectives	Performance Measures	Benchmarks	Time frame
E.3. Education program standards and criteria support innovation and emerging trends in nursing education	• Unnecessary barriers to education innovation are identified and eliminated • Meet or exceed national benchmarks for education processes as defined by CORE® research data • The Board considers research and evidence-based innovations as appropriate • Trends in nursing education are routinely considered by the Board	• Education-related statute, rules, policies and processes are reviewed for unintended barriers • Board participation in state and national dialogue on current and emerging nursing education issues • Environmental scan informs Board of emerging trends, issues • Education-related statute, rules, policies and processes are current and relevant • Research data, including CORE® measures inform the Board on strategies for improvement	• 2019 • Ongoing • Quarterly • Ongoing • 2019

GOVERNANCE GOAL: CULTIVATE GOVERNANCE FRAMEWORK AND CULTURE THAT SUSTAINS BOARD RELEVANCE AND SUPPORTS ACCOMPLISHMENT OF VISION, MISSION AND GOALS

Objectives	Performance Measures	Benchmarks	Time frame

G.1. Governance related Board authorities and beliefs guide Board framework and culture	• Board governance and structure are consistent with the Board's *Philosophy of Governance*
	• Board-adheres to Mission and values and demonstrates progress toward Vision and accomplishment of strategic goals
	• Board provides oversight of compliance with statutory, rule and other obligations through internal and external audit, direct observation, and application of internal policies, processes and procedures
		• Governance belief statement reviewed for currency and relevance
		• Governance policies reviewed for currency, relevance
		• Governance actions and behaviors are congruent with adopted beliefs as determined by
		  ○ BON self-assessment
		  ○ Performance Measurement Report to DFM
		  ○ SCO fiscal controls audit
		• Board Mission, Vision, Values, Strategic Goals reviewed for currency and relevance
			• 2020
			• 2021
			• Ongoing
			  ○ Annual
			  ○ Annual
			  ○ Triennial – 2021
			• 2020

G.2. Board engages in continuous development activities	• Structured orientation acquaints members, committees and staff with responsibilities and expectations • Board development activities strengthen Board capacity and expertise and support leadership development and succession planning	• Board orientation informs new Board and committee members of roles and responsibilities • Board members engage in internal and external development activities • Board education relative to key issues is provided • Educational retreat for Board members with a focus on Board development conducted	• At time of each appointment • Ongoing • Ongoing • Annually
G.3. Board proactively addresses emerging trends and changes in healthcare policy	• Board considers healthcare policy and trends in planning and decision-making • Research directs workforce initiatives • Thorough deliberation, constructive debate and collaboration with stakeholders inform decisions on healthcare policy issues	• Environmental scan informs the Board of emerging trends, issues • Key issues identified/generative discussions scheduled • Members and staff participate in state, national healthcare policy meetings, dialogue, debate	• Quarterly • Quarterly • Ongoing • Annual

Objectives	Performance Measures	Benchmarks	Time frame
		• Workforce initiative dollars awarded consistent with BON research agenda, goals, related policies • Board-sponsored legislation and rulemaking guided by changes in healthcare policy	• 2019

COMMUNICATION GOAL: FOSTER COMMUNICATION BETWEEN THE BOARD AND ITS COLLEAGUES, INTERNAL AND EXTERNAL STAKEHOLDERS AND THE PUBLIC

Objective	Performance Measures		
C.1. Communication-related Board authorities and beliefs guide Board interactions	• The Board affirms communication processes and decisions are consistent with the Board's *Statements on Communication* and *Position Statement on Information Collection and Sharing*	• The Board's foundational statements on communication are reviewed for currency and relevance • Communication-related policies, processes reviewed for currency and relevance • BON self-assesses congruence of communication-related activities with adopted Board beliefs	• Reviews due 2018 and 2021 • 2019 • Annually
C.2. Communication between the Board and the public is open and transparent	• Opportunities are available for public engagement in open dialogue with and feedback to the Board • Public is kept informed via multiple venues of resources, activities, issues, timelines, news, opportunities, etc. • Responses to inquiries, requests for information are timely • Board complies with the Idaho Administrative Procedures Act, Open Meetings Law, and Public Records Act	• CORE® communication indicators serve as targets for improvement • Board engages in negotiated rulemaking consistent with statutory provisions • Public forum is incorporated into each Board meeting • Board information is timely posted to the Board's Website • Board information delivered through other venues • Expand nurse enrollment in Nursys eNotify® to >50% of licensees • Expand employer enrollment in Nursys eNotify® by 50%	• Ongoing • (Not required in 2019) • Quarterly • Ongoing • Ongoing • 2021 • 2020
C.3. The Board shares data to support research and analyze trends	• Policy directives guide information sharing and protect confidentiality • State and federal requirements inform the Board's communication processes	• Collaborative agreements allow for data/information sharing consistent with statute, rule ○ DHW for Emergency Response Volunteers ○ NCSBN for reporting agent for NPDB ○ NCSBN for nursing workforce data collection/reporting	• Ongoing ○ Ongoing ○ Ongoing ○ Ongoing

Objective	Performance Measures		
		• Participation in NCSBN national workforce survey and reporting via NCSBN Nursing Workforce Repository • ORBS reports • Website redesign, maintenance, updates	• 2018 then ongoing • Ongoing • 2018 then ongoing

ORGANIZATION GOAL: SUPPORT ORGANIZATIONAL INFRASTRUCTURE NECESSARY TO ACCOMPLISH MISSION, VISION AND GOALS

Objectives	Performance Measures	Benchmarks	Time frame
O.1. Physical environments support day-to-day operations, functions and scheduled activities	• Office location, space, furnishings and equipment support day-to-day operations • Long-range agency growth projections and budget requests anticipate future physical space needs • Current emergency response/business recovery plan addresses temporary and replacement space and equipment needs to sustain/restore essential functions	• Board office is publicly convenient, accessible, cost-effective, professional, safe/secure • Agency lease negotiated and maintained • Meeting rooms are appropriate for the business conducted, including: public access, convenience, equipment use, security, etc. • Emergency Response/Disaster Recovery Plan reviewed/revised as needed • Recycling initiatives maintained	• Ongoing • Renewal due 2021 • Ongoing • 2018 then annually • Ongoing

O.2. Human resources individually and collectively contribute to accomplishment of Mission and strategic goals	• Appropriated full time staff positions (FTP) and external contractor~~s~~ are sufficient to accomplish essential functions and short-term initiatives of the Board
	• Staff are prepared through education and training for performance of primary job responsibilities and requisite agency functions
	• Long-range agency growth projections and budget requests anticipate future human resource needs
		• Staff adequate in # and qualified for assigned responsibilities
		• Staff compensation determined consistent with policy and appropriation
		• External contracts maintained for
		  ○ Legal services
		  ○ PRN monitoring
		  ○ Other select operations
		• Staff development enhances knowledge and performance and complies with state/national requirements for training
		  ○ FBI CJIS training
		  ○ DHR and ITS administered cybersecurity training
			• Ongoing
			• Annually
			• Ongoing
			  ○ Ongoing
			  ○ 2019
			  ○ TBD
			• Ongoing
			  ○ 2019
			  ○ 2018 then ongoing

O.3. Sound fiscal resources management sustains current and projected needs of the Board	• Annual budget and FTP appropriations are sufficient for accomplishment of Mission and strategic goals	• Develop, implement, adhere to annual budget • BON fund balance >12 mos. operating costs	• Annual • Ongoing • Ongoing

Objectives	Performance Measures	Benchmarks	Time frame
	• Agency risk is managed through accepted internal controls and fiscal management policies as evidenced through internal and external audits • Long-range planning considers trends and projections that may impact fiscal resources • Fund balance supports ongoing operations in the event of unexpected revenue reduction or increased expenses	• Maintain and regularly assess internal and external fiscal controls • 10-year agency growth plan implemented/adjusted • Apply Zero-Base Budgeting elements to inform budget planning/development ○ Strategic Plan update - annually ○ Gap analysis – every 4 years ○ Cost center prioritization – every 4 years ○ Staff allocation time study – every 4 years • SCO fiscal management audit – every 3 years	• Annual • Ongoing ○ Annual ○ 2020 ○ 2019 ○ 2018 • 2021
O.4. Operations systems and resources facilitate agency transactions and manage and reduce risks and vulnerabilities in agency networks	• Long-range planning considers trends and projections that may impact operations systems and resources • Annual budget requests include equipment and software maintenance and purchases necessary Board operations • External contracts support operations systems and equipment • A comprehensive electronic data management system, administered by the Board, facilitates internal and reporting processes related to licensure, discipline and fee management • Full implementation of requirements related to Executive Order 2017-02 using cybersecurity systems and technical expertise available through the Office of the Information Technology Services (ITS)	• Increase percent of electronic license applications ○ by exam - 95% ○ by endorsement - 95% and ○ by renewal - 95% • Continue processes to facilitate paperless Board meetings • Implement/update/refine ORBS to enhance Board operations and key processes • As a technology customer of ITS in the Dept. of Administration, use the cybersecurity systems and technical expertise of ITS to fulfill requirements related to Executive Order 2017-02, including: ○ Adoption of the NIST Cybersecurity Framework and CIS Controls 1-5 ○ 100% staff participation in DHR and ITS administered cybersecurity training	• 2017 then ongoing ○ 2019 ○ 2019 ○ 2019 • Ongoing • Ongoing • Ongoing via coordination, collaboration with ITS

Objectives	Performance Measures	Benchmarks	Time frame
	○ Adoption of the National Institute of Standards and Technology Cybersecurity Framework ○ Full staff participation in Department of Human Resources (DHR) and ITS administered cybersecurity training	○ Coordination/collaboration with ITS and DHR to fulfill all CIS critical security controls 1-5 requirements ○ Refinement of the cybersecurity incident response plan in support of agency needs	

GLOSSARY OF ACRONYMS AND ABBREVIATIONS

APRN COMPACT: Advanced Practice Registered Nurse Licensure Compact

APRN: Advanced Practice Registered Nurse

APRN CONSENSUS MODEL: A plan for the future regulation of APRNs establishing standard regulatory requirements for: licensure, accreditation, certification and education for APRNs

ATD: Alternative to Discipline Program (e.g. PRN, PRP)

BON: Board of Nursing

CJIS: FBI Criminal Justice Information Services

CNA: Certified Nursing Assistant

CORE®: Commitment to On-going Regulatory Excellence: A Project of the National Council of State Boards of Nursing

DHW: Department of Health and Welfare

E-Notify®: On-line service that delivers electronic real-time notification of change in nurse licensure status

ICON: Idaho Coalition on Nursing: a forum of the Board of Nursing, , Idaho Nurses Association (INA), Idaho Alliance of Leaders in Nursing (IALN) and Council of Nurse Education Leaders (CNEL)

IDOL: Idaho Department of Labor

INAC: Idaho Nursing Action Coalition: Idaho's RWJ/AARP regional action coalition committed to implementation of IOM recommendations

IOM: Institutes of Medicine: Independent, non-profit organization working outside government to provide unbiased, authoritative advice to policy-makers and the public

ITS: Information/Technology Services (formerly OCIO)

LPN: Licensed Practical Nurse

MA-C: Certified Medication Assistant

MHD: Mental Health Disorder

NCLEX®: National Council Licensure Examination for RNs/LPNs: the examination, used to measure initial competence for LPN and RN licensure in the U.S. and Canada territories as well as associate members with similar responsibilities outside the US

NCSBN: National Council of State Boards of Nursing: the organization whose membership includes the nurse licensing entities in the U.S. and its.

NLC: Nurse Licensure Compact: an interstate agreement adopted by individual states that provides mutual recognition of nurse licensure between the member states

NLCIC: NLC Interstate Commission: the entity composed of each NLC state administrators charged to administer the Compact

NPDB: National Practitioner Data Bank: a databank created by Congress in 1986 (NPDB)

NURSYS®: Nurse Licensure Information System: centralized nurse licensure database developed and maintained by NCSBN

ORBS: Optimal Regulatory Board System, the NCSBN software program used by the Idaho BON.

PRP: Practice Remediation Program: an alternative to discipline program administered by the Board of Nursing for nurses whose practice errors have been reported to the Board and who can benefit from enhanced knowledge/training/ monitoring

PRN/PRNAC: Program for Recovering Nurses (Advisory Committee): an alternative to discipline program administered by the Board of Nursing for nurses when practice is/may be impaired as a result of substance use and/or mental health disorders

RDP: Regulatory Decision Pathway, a decision process that assists boards in their determination of whether the action of a nurse constitutes a violation of standard of care

RN: Licensed Professional/Registered Nurse

SCO: Idaho State Controller's Office

SUD: Substance Use Disorder

TERCAP®: Taxonomy of Error, Root Cause Analysis and Practice-Responsibility: An adverse event reporting system of NCSBN

UAP: Unlicensed Assistive Personnel

ULR: Uniform Licensure Requirements: standard requirements adopted by the NCSBN Delegate Assembly and endorsed by the Board in 2015