

*Nursing Program Annual Report Process*

*Nancy G. Murphy  
Labor, Licensing and Regulation  
The State Board of Nursing for South Carolina  
December 18, 2006*

S. C. STATE LIBRARY

JUL 24 2007

STATE DOCUMENTS

## **Nursing Program Annual Report Process**

### **What is the problem you wish to investigate?**

I wish to investigate streamlining and increasing the effectiveness of the nursing program annual report process.

### **Why is this a problem?**

#### **Background**

The mission of the State Board of Nursing for South Carolina is the protection of public health, safety and welfare by assuring safe and competent practice of nursing. This mission is accomplished in the practice of nursing and by promoting nursing excellence in the areas of education and practice. The Board licenses qualified individuals as licensed practical nurses, registered nurses or advanced practice nurses. Complaints are investigated and disciplinary action is taken when necessary. Schools of nursing are surveyed and approved to ensure quality education for future nurses.

Since the State Board of Nursing for South Carolina has the mission to protect the public, it has the responsibility of making sure that new graduate nurses are prepared to practice safely. The Board's powers and duties include establishing and developing minimum standards for and approving pre-licensure nursing programs. The Board then uses the prescribed standards identified as the basis for evaluating preparation for safe and effective nursing practice. Only graduates of approved nursing programs are eligible to take the National Council Licensure Examination (NCLEX), which is required for licensure.

Article 6 Nursing Education Programs Regulations 91-23 through 91-30 define terms and establish the criteria and procedures for approval of nursing programs. A

school program begins the process with seeking initial approval (the official status granted to a newly established nursing program that shows evidence of meeting the Board's legal and education requirements) and then making application for full approval (the official status granted to a nursing program that demonstrates continued compliance with the Board's legal and educational requirements). If a program fails to meet the regulations, the Board has the authority to sanction after allowing for a reasonable opportunity to comply with the standards.

Nursing programs are to be surveyed for continuing approval every five years. The State Board of Nursing for South Carolina deems national accreditation with the National League for Nursing Accrediting Commission (NLNAC) or the Commission on Collegiate Nursing Education (CCNE) as meeting continuing approval requirements. The Nurse Consultant for Education continues to survey those schools that elect not to seek national accreditation.

All nursing programs, regardless of accreditation status, are required to complete an annual report. This report is utilized as a means of documenting continued compliance with the regulation standards and to collect data for the State Budget and Control Board Office of Research and Statistics (ORS) to compile as a part of the nursing workforce development information for South Carolina.

### **Customers**

The customers for our annual report are the Deans & Directors (schools) who complete the report, the Board (responsible for ensuring continued compliance with standards set) the ORS (responsible for compiling statistics from the data) and the nurse consultant (responsible for collecting and reviewing the reports).

## **Current Impact on Customers**

The annual report is mailed out to the nursing programs by March 31 of each year and is due back to the Board office by September 2. Data collected is for the school year of July 1 through June 30. Schools are extremely busy with advisement and enrollment processes during August.

The Board's report consists of five sections. The prescribed report sections are separate files and cannot be linked together to allow for electronic exchange. One of the sections is designed to gather statistics regarding student enrollment and graduation. Two of the sections gather data regarding the faculty. Information about the faculty census, academic preparation and experience is collected. The fourth section requests information about annual program evaluation findings and changes that have occurred over the last year regarding the regulation standards. The last section includes an area for sharing future plans and proposals for the program along with anticipated methods of implementation. It also requires information about the clinical facilities utilized. The last two sections are open for narrative discussion. There are not specific criteria or questions to be addressed. Materials are also required to be attached such as a college catalog, an organizational chart and admission policies.

When the statistics section of the report was developed, schools did not have multiple entrance and multiple exit options with Associate Degree in Nursing (ADN) and Practical Nursing (PN) programs. The report does not include a way for these programs to convey their student figures.

Presently, there are forty nursing programs approved by the State Board of Nursing for South Carolina. Annual reports are to be reviewed by the nurse consultant to

assure continued compliance with Regulations when they are received. In addition, copies of the report statistical sheets must be made and sent to ORS. Reports are to be filed and then purged every three years.

Additionally, schools are requested to provide an update to program contact information every spring as not all the needed information is included in the annual report data collected.

### **Problem Statement**

The Deans and Directors have relayed that the annual report process is not user friendly and they have requested it be streamlined with computerized options available. Also, they would like for the due date to be changed to a different month.

The nurse consultant has observed that the report procedures do not identify key safety criteria to be assessed, key indicators for demonstration of continued compliance with Board standards or criteria requiring Board review. Information being captured is not consistent as each school individually completes the narrative section.

The ORS has relayed that they would like to be involved in any revisions of the statistics section to facilitate consistency of future data.

### **Data Collection**

Data was collected from a variety of sources to provide information and appropriate basis for the planning of the annual report changes. Also, it was used to help ensure that stakeholders/ customers had an opportunity to provide input and to incorporate buy-in to the final report format product.

Information, research and sample reports were requested and collected from the National Council of State Boards of Nursing (NCSBN), the National League for Nursing

Accrediting Commission (NLNAC), the Southern Regional Education Board (SREB) Council of Nursing Education Programs and other Boards of Nursing. The data was utilized to generate ideas and different perspectives for change considerations and to help identify criteria that should be included.

Suggestions and concerns regarding the annual report process were discussed and information was also collected from the following sources:

- meeting with the Advisory Committee on Nursing (ACON)
- meeting with the South Carolina (SC) Deans & Directors Council
- nurse consultant observations of data being collected on reports
- verbal comments relayed to the nurse consultant
- feedback received from the education program contacts at the ORS
- Board direction

In addition, a file with information from a survey conducted previously with the Deans and Directors of Registered Nurse and Practical Nurse Programs in South Carolina was available.

Please refer to Appendix A for Data Summary.

### **Data Analysis**

The nurse consultant will be responsible for facilitating the report improvement process and for implementing the changes identified and indicated by the analysis of data collected. Based on the analysis of the data collected, the consultant would like to pursue several important changes for this report process.

First, the schools need the annual report due date realigned to preclude conflicts with the hectic student enrollment and advisement schedules. The consultant plans to move the report timeframe from September 1 to October 1.

Next, the report format needs to be changed. The report needs to be streamlined and prepared for electronic data exchange. It needs to be customer friendly for the schools to prepare while also objectively identifying key safety criteria and serving as an effective monitoring tool for regulation compliance. The consultant plans to work first with the Advisory Committee on Nursing (ACON), to include representatives from both the education and practice areas, to determine key safety and regulation criteria to be monitored. The consultant will also collaborate with the Information Resources Coordinator regarding database requirements for report design. Then, a draft report will be devised by the consultant and staffed through the ACON for input and recommendations. The ACON committee will then forward input and recommendations regarding the report process and format to the Board of Nursing for final action. Based on the data analysis, the Board of Nursing will benefit from an electronic format that utilizes its existing database software which would present no additional cost for the agency and is already supported by trained LLR and Board of Nursing staff. Also, ORS staff may access fields for the information needed for statistics preparation hence eliminating the need for the Board staff to copy reports and for ORS staff to input the data.

Additionally, the data analysis further indicated that the consultant should include plans for working with ORS in the preparation of questions for gathering school statistical information. The consultant will schedule a meeting(s) with ORS personnel

involved with the Board of Nursing statistics processes. Questions may be developed collaboratively to allow for continuity of data collection and to provide for information needed by ORS.

Please refer to Appendix B for the Implementation Plan which provides more details regarding the analysis and evaluation of the data collected and the consultant plans for changes in the process. Information is also included in the next section regarding the Board of Nursing procedures for making changes in its processes.

### **Implementation Plan**

The Board of Nursing procedure for changing the nursing program annual report process will begin in the Advisory Committee on Nursing (ACON). The ACON will appoint a task force to work on the project with the nurse consultant. The task force and the nurse consultant will then bring the proposed new process back to the ACON. The ACON will consider the recommendations of the task force and nurse consultant in its consideration of the proposal for the report process and format changes. After ACON has recommended approval for the proposal, it will then be forwarded to the Board of Nursing. Next, the Board will consider the recommendations of the ACON in its deliberations of the proposal. Final action will be taken by the Board of Nursing.

The implementation plan will incorporate changes indicated by the analysis of available data. Customers have requested that consideration be given to deleting the operational definitions that have previously been utilized in the report such as attrition rates, part-time FTE, full scope and limited scope as there is not agreement or consistency in how these terms are defined by the individual institutions. The ACON task force will plan for ways to elicit data that is generic to all programs such as using the terminology



of graduates and students entering clinical courses that will lead to the same outcome information. Regulations will be reviewed for process authority.

### **Considerations**

#### Developing electronic process

- Electronic options (e-mail, on-line, software database options available)
- Cost
- Technical support required
- Training

#### Format change

- Customer consensus and support for the new process (Deans & Directors, ORS, Board)
- Identifying and achieving consensus on key criteria for monitoring
- Utilizing key safety criteria versus overall narrative format

#### Continuity of statistical data collection

- Considerations for data collection methods
- Impact on ORS internal processes

### **Resources**

- Stakeholders/ Customers (SC Deans & Directors, ORS, Board of Nursing)
- Information Resource Coordinator
- National organizations such as the National Council of State Boards of Nursing (NCSBN), the National League for Nursing Accrediting Commission (NLNAC), the Southern Regional Education Board (SREB) Council of Nursing Education Programs and other Boards of Nursing

Please refer to Appendix B for the PDCA Implementation Plan.

## **Evaluation Method**

### **Evaluation Prior to Implementation of the New Report**

After the Board of Nursing has approved the proposed report, the nurse consultant will work with the agency's Information Resource Coordinator to implement the report into an online format associated with the nursing data base and to identify required fields for completion. The report will also be available in an electronic format option that may be e-mailed between the school, the Board and ORS as the on-line process is developed. The four schools that are members of the task force have volunteered to participate in a mini pilot to test the online report before it is to be integrated and made available for the 2006 process. After the mini pilot, the task force will meet and evaluate the online process. A meeting will be scheduled with the Information Resource Coordinator to address any technical concerns. In addition, the Information Resource Coordinator will coordinate with the ORS to ensure that they can access the fields necessary for the data they collect.

### **Evaluation After the First Implementation (Full Pilot) of the New Report**

A short evaluation will be included at the end of the report for schools to complete as they finish and submit their information to the Board of Nursing. The feedback will be collected and reviewed by the ACON and the Board of Nursing with updates staffed and implemented as indicated. The nurse consultant will request to be on the April 2007 Deans and Directors Council meeting agenda to discuss the first time utilization of the new process. The information gathered from the key safety criteria

identified will be assessed and researched by the nurse consultant. Findings will be forwarded for Board review as indicated.

### **Ongoing Monitoring and Update Methods**

Future plans for monitoring and measuring include continuing to provide an evaluation with the report as it is completed each year and to continue to collect feedback from the SC Deans and Director's Council. The nurse consultant will evaluate information being received regarding continued compliance with the standards. Results will also be staffed and shared with the ACON and Board of Nursing as appropriate for any changes or issues requiring its action.

## References

Institute of Medicine of the National Academies (IOM) Report (Released April 2003).

Health Professions Education: A Bridge to Quality. Retrieved April 2003 from:

<http://www.iom.edu/>

National Council of State Boards of Nursing (NCSBN) White Paper (Adopted August 2004). On the State of the Art of Approval/ Accreditation Processes in Boards of Nursing. Retrieved August 2004 from:

[http://www.ncsbn.org/regulation/nursingeducation\\_nursing\\_education\\_papers.asp](http://www.ncsbn.org/regulation/nursingeducation_nursing_education_papers.asp)

National Council of State Boards of Nursing (NCSBN) (Adopted August 2005).

Systematic Review of Studies of Nursing Education Outcomes: An Evolving Review. Retrieved August 2005 from:

[http://www.ncsbn.org/regulation/nursingeducation\\_nursing\\_education\\_papers.asp](http://www.ncsbn.org/regulation/nursingeducation_nursing_education_papers.asp)

National Council of State Boards of Nursing (NCSBN) Position Paper (Adopted August 2005). Clinical Instruction in Prelicensure Nursing Programs. Retrieved August 2005 from:

[http://www.ncsbn.org/regulation/nursingeducation\\_nursing\\_education\\_papers.asp](http://www.ncsbn.org/regulation/nursingeducation_nursing_education_papers.asp)

National Council of State Boards of Nursing (NCSBN) Position Paper (Adopted August 2006). Evidence-based Nursing Education for Regulation. Retrieved August 2006 from:

[http://www.ncsbn.org/regulation/nursingeducation\\_nursing\\_education\\_papers.asp](http://www.ncsbn.org/regulation/nursingeducation_nursing_education_papers.asp)

South Carolina Code of Laws, Title 40 – Professions and Occupations, Chapter 33,

Nurses, Article I, Nurse Practice Act. Retrieved May 2004 from:

<http://www.scstatehouse.net>.

South Carolina Code of Regulations Chapter 91. Department of Labor, Licensing and

Regulation – State Board of Nursing. Article 6, Nursing Education Programs.

Retrieved May 2004 from: <http://www.scstatehouse.net>.

# Appendix A

## Data Summary

## **Review of Annual Report Requirements**

### **Suggestions and Concerns**

### **Summary of Data Collected**

#### **I. Data Collected**

**Explored information and research available. Contacted other State Boards of Nursing (interviews by telephone, e-mail contacts) to discuss their particular report processes and to request they share a sample report. Benchmarked with the following organizations:**

- National Council of State Boards of Nursing (NCSBN)
- National League for Nursing Accrediting Commission (NLNAC)
- Southern Regional Education Board (SREB) Council of Nursing Education Programs
- Other State Boards of Nursing

#### **II. Data Collected Regarding Annual Report Process Suggestions and Concerns**

Information collected from the following sources:

- meeting with the Advisory Committee on Nursing (ACON)
- meeting with the SC Deans & Directors Council
- nurse consultant observations of data being collected on reports
- verbal comments relayed to the nurse consultant
- feedback received from the education program contacts at the ORS
- Board direction

**Suggestions and concerns included the following comments:**

Develop more specific guidelines

Streamline process

Include relevant data and avoid repetition

Consider computerized options

Explore consistency as possible with other data reports requested

Needs to be more user friendly

Need to look at attrition – defined differently by each school, no regulatory authority

Explore ways to make the process less burdensome

Examine need to and relevance of sending in supplemental materials e.g. faculty data sheet, catalog, organizational chart, etc.

Change date due to October 1

Need to look at operational definitions utilized, not standard for all schools, explore eliminating, elicit information in another manner

Identify key safety criteria to be assessed, indicators and specific guidelines for demonstration of continued compliance with the standards or criteria requiring Board review

More specific objective and less open-ended (subjective interpretation) type questions and responses

Need to maintain consistency with statistics being collected, however, also need to find a way to be more uniform among the schools, present information collected is not always clear or provided in the same manner

Electronic format utilizing current database would allow data to be accessed by the ORS, would eliminate the need to input for processes



The ORS relayed that they would like to be involved and able to provide input regarding revisions of the statistics section to facilitate consistency with future data

Design process with criteria regarding the Board's mission – public safety

Recommend a streamlined process with consideration given to safety factors and current regulations

### **III. Previous Data Collected**

#### **Information collected from a survey conducted previously with Deans and Directors of Registered Nurse and Practical Nurse Programs in South Carolina**

##### **A. What are the positive and negative aspects of the annual report?**

###### **Positive comments received:**

Data collection at the state level

Updates the Board of changes with program

Board advised of changes and future plans

Helps put the year in perspective

Provides needed data for the Board

Fairly easy at present

###### **Negative comments received:**

Too lengthy – needs to be streamlined

Too time consuming

Directions not clear

Would like RN and PN to be the same

May be redundant in areas especially the part on submitting data on faculty credentials and teaching assignments

A lot of unnecessary information required

Cumbersome and time consuming

Repetitive, especially if there have been few changes and a recent site survey

Particularly time consuming if required to prepare an annual report and self-study for approval or for accreditation

Not user friendly

Same content is repeated each year

Too long

Too long – is the attrition chart needed

How is information used

Explore if criteria may be like what required on other reports e.g. SREB, NLNAC, etc.

Duplicative

Need more specific guidelines

**B. What would make this annual report process easier for you?**

**Comments received:**

Streamline the process! If the Board's responsibility is to protect public safety then the reporting process should be designed to provide only the information needed to do this, computerize it

If data on faculty and teaching assignments is the same from the previous year – this information should not have to be submitted again

Should be brief, clear form to be completed

Determine what information is critical that should be submitted yearly and delete areas that are not likely to change

# Appendix B

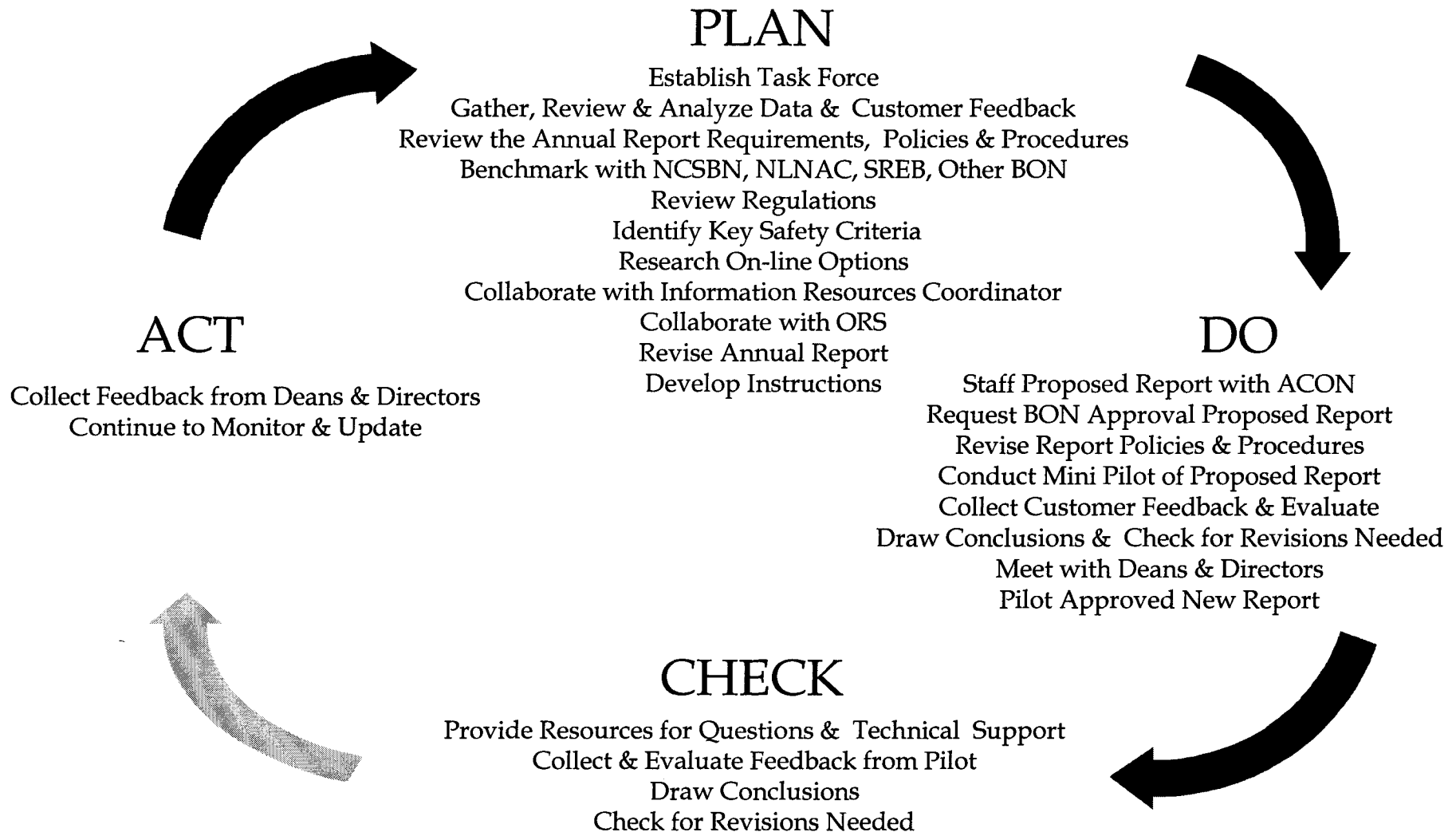
## PDCA Implementation Plan

Figure 1

# Nursing Program Annual Report

Streamlining and Improving the Effectiveness of the Annual Report Process

---



## Implementation Plan

Action Needed	Potential Resources/ Potential Barriers	Target Timeframe	Cost	Responsible Party
<b>Plan</b>				
Place revision of nursing program annual report on ACON meeting agenda	Help ensure that stakeholders and customers have an opportunity to provide input, to incorporate buy-in to the end product, to include both practice and education perspective regarding Board's mission and safety, to follow Board protocols	4/18/06	Staff time	Nurse consultant
Establish ACON task force	Include education customers and also practice representation for input regarding safety criteria and relevant information to be collected	4/18/06	ACON & task force members serve as volunteers	Nurse consultant
Collect data/ input from customers and ACON regarding annual report suggestions and concerns	Provide information for planning and diverse input related to Board mission and safety for criteria to be developed	4/18/06	As above	Nurse consultant & ACON task force
Collect data/ input from customers and SC Deans & Directors Council regarding annual report suggestions and concerns	Provide information for planning and input from customers, include council representatives on the task force, discuss plan for targeting specific criteria, plan e-mail and on-line format for ease of entering information and streamlined report	4/18/06	Staff time	Nurse consultant
Review annual report requirements, policies and procedures	Establish baseline data and review of present requirements, regulations and process	6/1/06	ACON & task force members serve as volunteers	ACON task force

Action Needed	Potential Resources/ Potential Barriers	Target Timeframe	Cost	Responsible Party
Benchmark and research with NCSBN, NLNAC, SREB, other BON	Explore information and research available from NCSBN, NLNAC, SREB and other BON to generate ideas, explore possibilities and help identify criteria	4/18/06 -- 6/1/06	Staff time	Nurse consultant
Review regulations, analyze data collected from ACON and SC Deans & Directors Council along with nurse consultant, Board and previous feedback received	Establish regulatory requirements that must be met in the process, review present policies and procedures to consider in planning possible changes (e.g. date reports due, etc.), analyze and evaluate data collected and plan for report changes identified and indicated	6/1/06, 6/29/06, 7/13/06	ACON & task force members serve as volunteers	ACON task force
Identify key safety criteria	Establish criteria identifying and monitoring safety to be included in the report	6/1/06, 6/29/06	As above	ACON task force
Research on-line options	<p>Explore software options and technical expertise, training, cost required to include options NCSBN and other BON are using and may recommend, contact other BON with annual reports presently on-line</p> <p>Options identified included one program that is customized, expensive and Board specific, one that is approximately \$100/ month and Boards using their own licensing database or e-mail format</p>	4/18/06 – 6/1/06	Staff time	Nurse consultant
Collaborate with Information Resource Coordinator regarding on-line options	<p>Collaborate with Information Resource Coordinator in the initial planning as well as throughout the process</p> <p>Discuss options identified, discuss utilization of BON database would be most cost effective – no additional cost to the agency for software, OIS and nursing staff presently using system and would not incur software training costs, ORS can already access designated fields, also e-mail could be utilized as another option as database process is developed, would incur staff time for the online programming of the report</p>	5/24/06, 6/27/06, 8/23/06, October 06	Staff time	Nurse consultant

Continued next page...

Action Needed	Potential Resources/ Potential Barriers	Target Timeframe	Cost	Responsible Party
Collaborate with Information Resource Coordinator regarding on-line options	<p>Continued...Program contact information collected in the annual report would update the database and eliminate the need for spring update process</p> <p>Coordinator states will support and be available for project, agency supporting technology for processes</p>			
Collaborate with ORS	<p>Meet with and include ORS regarding the revision of the statistics portion of the report, ensure collaborative planning and that ORS has an opportunity to have input, identify information that is being requested of ORS and needs collected</p> <p>Discuss considerations regarding continuity of data collection and impact on ORS internal processes</p> <p>Identify statistical data to be collected and included on the report, design questions collaboratively</p> <p>ORS presently pulls other designated data from the nursing database, eliminate need for making copies, mailing and entering data prior to preparing statistical reports</p>	7/13/06	ACON & task force members serve as volunteers, ORS staff time	ACON task force
Revise and draft new annual report format	Develop streamlined format with objective criteria/ indicators based on analysis of available data, include software system capabilities in design, establish new report due date (feedback requesting October 1)	6/1/06 – 8/23/06 Ongoing e-mail	ACON & task force members serve as volunteers	ACON task force
Develop report instructions	Develop instructions regarding the electronic reporting, elicit feedback when staffing report to clarify areas that may not be clear	7/13/06 – 8/23/06 Ongoing e-mail	ACON & task force members serve as volunteers	ACON task force

Action Needed	Potential Resources/ Potential Barriers	Target Timeframe	Cost	Responsible Party
<b>Do</b>				
Staff proposed report with ACON (place draft annual report revision on ACON meeting agenda)	Staff (task force will present recommendations) for ACON input and recommendation, then forward to the Board of Nursing	8/29/06	ACON & task force members serve as volunteers	ACON task force
Place on BON meeting agenda, request BON approval for proposed new report and process	Provide ACON input and recommendations for the Board's consideration in its deliberations, final action and approval will come from the Board	9/28- 29/06	Staff time	Nurse consultant
Revise report policies and procedures	Revise report policies and procedures to reflect new procedures	October 2006	Staff time	Nurse consultant
Coordinate with Information Resource Coordinator for establishing the programming for the on-line report and the report database	Establish the report in an electronic format (for e-mail or database entry), establish user ID and passwords, plan for required completion fields	Initiate efforts after 9/06 Board meeting	Staff time	Nurse consultant & Information Resource Coordinator (IRC)
Conduct small mini pilot with volunteer schools	Troubleshoot technical difficulties that may arise	February 2007	ACON & task force members serve as volunteers	Nurse consultant, ACON task force, IRC
Collect feedback, evaluate, draw conclusions and check for minor revisions needed	Discuss the process operations, barriers encountered and incorporate minor adjustments as determined by group consensus, evaluate directions	February – March 2007	ACON & task force members serve as volunteers	Nurse consultant & ACON task force, IRC
Meet with SC Deans & Directors Council	Provide information and education for stakeholders and report users, allow for questions, prepare for change from open-ended (subjective interpretation) to objective responses	April 2007	Staff time	Nurse consultant
Pilot approved new report process	Incorporate the new report and electronic process for the 2006 period (October 2007)	May – October 2007	Staff time	Nurse consultant



Action Needed	Potential Resources/ Potential Barriers	Target Timeframe	Cost	Responsible Party
<b>Check</b>				
Provide resources for questions and technical support	Provide resources (nurse consultant & Information Resource Coordinator) for questions and technical assistance during report time frame	May – October 2007	Staff time	Nurse consultant, Information Resource Coordinator
Collect and evaluate feedback from pilot questionnaire and SC Deans & Directors Council	Collect and summarize feedback	May – November 2007	Staff time	Nurse consultant
Draw conclusions	Share feedback with task force members, ACON and evaluate	December 2007	Staff time	Nurse consultant
Check for revisions needed	Share feedback and ACON input with Board	March 2008	Staff time	Nurse consultant
<b>ACT</b>				
Continue collecting feedback from Deans & Directors in an ongoing manner	Continue to collect feedback from Deans & Directors from meetings (nurse consultant attends Council bimonthly meetings), from the report questionnaire tool, when conducting site visits, etc.	Ongoing	Staff time	Nurse consultant
Continue to monitor and update	Continue to accept feedback, evaluate and make revisions as indicated in an ongoing manner, nurse consultant assess information received for monitoring value  Coordinate with Information Resources Coordinator regarding future reports, explore system defaulting to previous year's data to be available and eliminate repetition	Ongoing	Staff time	Nurse consultant