Oklahoma Board of Nursing

Fiscal Year 2019 Annual Report



Including Nursing Education Program and Nurse Population Data July 1, 2018 to June 30, 2019

Oklahoma Board of Nursing

FY 2019



Annual Report and Statistical Data for the Fiscal Year Ended June 30, 2019

J. Kevin Stitt, Governor

Kim Glazier, Executive Director

This publication is issued by the Oklahoma Board of Nursing as authorized by the Oklahoma Nursing Practice Act [59 O.S. §567.1 et seq.] and is located at the following website: http://www.nursing.ok.gov/pubs.html

This publication has been submitted in compliance with Section 3-114 of Title 65 of the Oklahoma Statutes.

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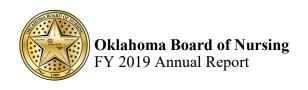
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Board Members

Name	Term Expires	Geographic District
Susan Jones, PhD, APRN-CNS Nursing Service Acute Care	5/31/2019	4
Carmen Nickel, MS, RN Nursing Education	5/31/2020	2
Patricia 'Liz' Massey, MSN, RN, NEA-BC, NE-BC Nursing Service Acute Care	5/31/2021	5
Mandy Nelson, MS, APRN-CNS, ACNS-BC Advanced Practice Nursing	5/31/2021	1
Jan Palovik, MSA, APRN-CRNA	5/31/2022	3
Shelly Hovis, MS, RN Nursing Education	5/31/2023	8
Kathy O'Dell, DNP, RN, CEN, NEA-BC Nursing Service Acute Care	5/31/2024	6
Marilyn Turvey, BS, LPN	5/31/2021	8
Cathy Abram, M.Ed., LPN	5/31/2022	7
Lindsay Potts, LPN	5/31/2023	2
Marla Ellis, CPA Public Member	co-term w/ Governor	2
Keith Oehlert Public Member	co-term w/ Governor	4

The Board is composed of eleven members appointed by the Governor: six Registered Nurses, three Licensed Practical Nurses, and two public members. Members serve for a period of five years, except for public members, who serve coterminously with the Governor.



Mission~Vision~Values

Mission

The mission of the Oklahoma Board of Nursing is to safeguard the public's health, safety, and welfare through the regulation of nursing practice and nursing education.

Vision

The Oklahoma Board of Nursing leads the nation in public protection through proactive leadership, efficient operations and customer service.

Values

- 1. **Public Protection:** We use legally sound and evidence-based decision-making processes to ensure protection of the public.
- 2. **Customer Service:** We provide quality customer service to all in a fair and professional manner.
- 3. **Efficient Operations:** We implement regulatory functions in a consistent, effective, and efficient manner.
- 4. **Proactive Leadership:** We collaborate with stakeholders in the development of policies impacting the health, safety and welfare of the public.



General Functions

- 1. Prescribe standards for educational programs preparing persons for licensure or certification as Advanced Practice Registered Nurses, Registered Nurses, Licensed Practical Nurses, or Advanced Unlicensed Assistants.
 - A. Provide for surveys of nursing education programs according to the *Rules*.
 - B. Approve nursing education programs and advanced unlicensed assistant training programs that meet the prescribed standards.
 - C. Deny or withdraw approval of educational programs for failure to meet or maintain prescribed standards.
- 2. Administer the National Council Licensure Examination (NCLEX) for Registered and Practical Nurses in accordance with the National Council of State Boards of Nursing, Inc., contract.
- 3. Administer the advanced unlicensed assistant certification examination in accordance with the contractual agreement with the test service.
- 4. Provide initial licensure and renewal of licensure of duly qualified applicants, including:
 - A. Licensure by examination for new graduates.
 - B. Licensure by endorsement for nurses licensed in other states or educated in foreign countries.
 - C. Reinstatement of lapsed license and return to active status applications.
- 5. Issue/renew license to Advanced Practice Registered Nurses meeting established requirements.
- 6. Issue/renew prescriptive authority recognition to Advanced Practice Registered Nurses meeting established requirements.
- 7. Maintain a Peer Assistance Program for nurses whose competencies may be compromised by drug abuse or dependency.
- 8. Investigate complaints of alleged violations of the *Oklahoma Nursing Practice A ct* and *Rules* of the Board.
- 9. Conduct hearings upon charges calling for disciplinary action.
- 10. Promulgate rules to implement the *Oklahoma Nursing Practice Act*.
- 11. Maintain records of all licensed nurses and advanced unlicensed assistants. Provide the records for public inspection under the provisions of the *Open Records Act*.

Organization

(as of June 30, 2019)

Peer Assistance Program

Executive

Kim Glazier, RN, MEd Executive Director

Dana Edminsten, BS, CPM, CPO

Business Manager

Sandra Ellis, CPM Executive Assistant

Regulatory Services Division

Jackye Ward, RN, MS

Deputy Director for Regulatory Services

Gina Stafford, RN, BSN

Associate Director, Nursing Practice

Terri Walker, RN, MS

Nursing Education Consultant

Darcy Hammond, RN, MS

Licensing Manager

Brad Moore, BA

Licensing Specialist

Vacant

Licensing Analyst

Janet Campbell

Legal Secretary

Robin Bryant, BA

Administrative Technician

Romelda Daniels

Administrative Technician

Dana Hall, AA

Administrative Technician

Lisa Kohout

Administrative Technician

Darma Miner

Administrative Technician/Receptionist

Karen Murdock

Administrative Technician

Jenny Barnhouse, RN, DNP

Program Coordinator

Marcia Cordry, RN, BSN

Case Manager

Erica McArthur, RN, BSN

Case Manager

Amy Tomlinson, BA

Legal Secretary

Investigative Division

Lisa Griffitts, RN, MS

Director

Opal Michele Reading, RN, BSN

Assistant Director

Starla Griffith, RN, MS

Chief Investigator

Sara Chambers, RN, MS

Nurse Investigator

Terrie Kiker, APRN-CNS, MS

Nurse Investigator

Mark Stroud, RN, BSN, MBA

Nurse Investigator

April Short, RN, BSN

Nurse Investigator

Andrea Denman, AA

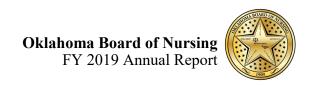
Legal Secretary

Teena Jackson

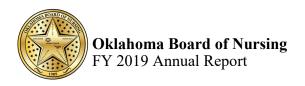
Legal Secretary

Shelley Tuscana

Legal Secretary



Executive



Executive Division Information

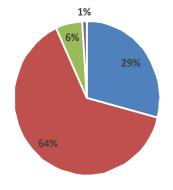
The Executive Division of the agency consists of the Executive Director, Kim Glazier, and supporting staff, Dana Edminsten, Business Manager, and Sandra Ellis, Executive Assistant. Ms. Glazier provides executive oversight to the agency as a whole, and serves as principal operations officer, managing the Board's resources and staff. She ensures standards are enforced, as defined in the Oklahoma Nursing Practice Act and its Rules, in accordance with the Administrative Procedures Act, the Open Records Act, and the Open Meetings Act, as the agency carries out the Board's mission. She functions as the administrative agent for the Board, interpreting and executing the intent of the Board's policies and guidelines to the public, nursing profession and other agencies, and acts as the Board's liaison to the public, executive and legislative branches of state government, nurses, organizations, and the media. Under her direction, many centralized functions of the agency essential to all other divisions are carried out, including rulemaking, business operations such as purchasing and procurement, budgeting, accounting, and human resources-related activities.

FY 2019 Budget

The Board does not receive any appropriations of tax money. The licensure fees paid constitute the agency's main financial support. The fiscal year 2019 gross revenue was \$3,728,397.86 and expenses totaled \$3,562,895.75. The graphs below depict the breakdown of revenue and expenses.

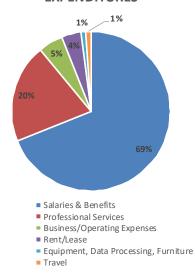
The Board is required to pay 10% of all fees collected to the Treasury of the State of Oklahoma and these funds are credited to the General Revenue Fund for appropriation by the legislature to various other agencies and services of state government. The Board paid \$356,058.71 out of the gross revenue above to the General Revenue Fund in Fiscal Year 2019.

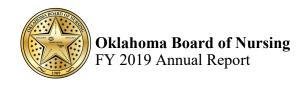
REVENUE



■ Initial Applications ■ Renewals ■ Miscellaneous ■ Public Access, Open Records

EXPENDITURES





FY 2019 Strategic Plan Accomplishments

Strategic Plan Goal #1: Operate efficiently and effectively in compliance with all applicable laws, regulations and policies governing operations.

- 1. Of the 44,970 licensure applications submitted during FY 2019, 99 percent were submitted online with an average processing time for all applications of 2.1 calendar days.
- 2. In August of 2018, converted a full-time position to support licensing by noticing applicants, upon application submission, of required documents that must be submitted by the applicant, or caused by the applicant to be submitted by other entities, thereby decreasing the length of time for applications to reach completed status. With an internal shift of customer focus to the day the online application is received, Board staff have reduced, by 28% (from 7.85 business days in FY 2018 to 5.62 business days in FY 2019), the span of time from receipt of the application until the application is complete.
- 3. In collaboration with the Education Informal Disposition Panel in October of 2018, revised the nursing education program annual reports to streamline data collected, removed data submissions that do not contribute to data measurements of nursing education program outcomes, and adapted the form to a fillable form. The number of programs not having data submitted 7 days prior to the deadline for submission decreased from 31.0% in 2018 to 13.5% in 2019. In addition, the Nurse Education Consultant decreased the preparation time of the Nursing Education Program Annual Report Summary by 40 hours.
- 4. The Peer Assistance Division explored utilization of the Peer Assistance Committees by reviewing 5 years of Program data and processes. Other state Peer Assistance Programs were contacted regarding their utilization of Committees. A new system for scheduling Program Participants to meet with Committees has been implemented as well as decreasing the number of Committee meetings scheduled for FY 19. Between January-June, 2019, 20 Peer Assistance Committee meetings were scheduled, compared to 24 meetings scheduled during the same period in FY 2018, representing a 17% reduction in number of committee meetings.
- 5. Through multiple efficiencies adopted in the Investigative Division, the number of cases open at the end of FY 2019 decreased 26% compared to FY 2018 and decreased 52% compared to FY 2015 (FY 2019 233 open cases; FY 2018 316 open cases; FY 2015 488 open cases).
- 6. The National Practitioner Data Bank (NPDB) reviewed adverse actions published on the Oklahoma Board of Nursing's website that were taken from January 1, 2016 to February 28, 2018 that were considered reportable by federal law to the NPDB to actual reports submitted to NPDB during the same time parameter. The result of the review was 100% compliance as all reportable actions taken by the Board matched with the reports submitted by the Board.
- 7. In preparation for the Information Technology Security Audit, a Noncriminal Justice Agency Pre-Audit Questionnaire was submitted to the Federal Bureau of Investigation on March 6, 2019. On Thursday, March 14, 2019, the Board of Nursing Information Technology Security Audit Noncriminal Justice Agency Policy Assessment was conducted on-site by the Federal Bureau of Investigation. All elements that applied to the Board of Nursing technology security audit were found to be in compliance.
- 8. The Oklahoma State Auditor and Inspector's Office conducted an operational audit in accordance to 74 O.S. Section 212 for the period July 1, 2015 through June 30, 2018. The audit conclusion was the Agency's internal controls provide reasonable assurance that revenues, expenditures (miscellaneous and payroll), and inventory were accurately reported in the accounting records.

- 9. During FY 2019, data was gathered regarding conversion to a new licensing database system. The plan for conversion will be finalized during FY 2020, with migration to the new system initiated during FY 2020.
- 10. The Executive Director worked with Office of Management and Enterprise Services on a Salary Compensation Study to align job positions to the state's Unclassified Pay Structure. The Unclassified Pay Structure was shared with Board staff in the fall of 2018.
- 11. During the April 2019 Board Meeting, in consideration of consumption of resources, Board members approved reprioritization of the agency FY 2019-FY 2014 Strategic Plan Projects, moving up the conversion to the approved licensing database system to begin implementation during FY 2020, and projecting out the plan for requiring national criminal background checks on current licensees with a goal of submitting proposed statutory changes to the legislative body during FY 2023.

Strategic Plan Goal #2: Ensure accountability to the Oklahoma Nursing Practice Act.

- 1. Monitor Oklahoma State Bureau of Investigations readiness for piloting the federal CBC Rap Back.
- 2. In November 2018, the Board formed a subcommittee to review felony convictions that substantially relate to the practice of nursing and pose a reasonable threat to public safety that would prevent licensure. The subcommittee reviewed 178 criminal offenses in the Oklahoma statutes. In meeting the requirements of HB1373, the subcommittee presented to the full Board at the July 2019 Board Meeting, a list of felony convictions that substantially relate to the practice of nursing and poses a reasonable threat to public safety that would prevent licensure. During the September 2019 Board Meeting, the Board will review and adopt emergency rules for submission to Governor to implement the provisions of HB1373 by November 1, 2019.
- 3. The Board of Nursing through its statutory authority specified in the Oklahoma Nursing Practice Act is responsible for reviewing and acting on violations of the nursing practice act and/or rules in protecting the public. During FY 2019, the Investigative Division managed 781 cases; closed 548 investigative cases with a 0.3% discipline rate of all nurses regulated by the Board.

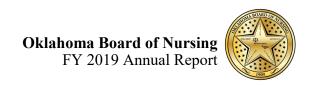
Strategic Plan Goal #3: Predict and respond to upcoming challenges and opportunities.

- 1. Participated in the NCSBN Delphi study on nursing education outcomes, in which the research considered metrics of nursing education programs from the viewpoint of boards of nursing, educators and those who work with new graduates. Data was also submitted for inclusion in a quantitative study analyzing, through predictive analysis, characteristics of a nursing education program that is granted full board approval status. The study findings, along with the recommendations of the National Council of State Boards of Nursing will be shared with the Board.
- 2. In preparation for meeting the legislative mandates included in Senate Bill 670, Board staff have worked with Oklahoma Interactive and Oklahoma Management and Enterprise Services in modifying endorsement applications to include needed language to support expedited licensure (within 30 days of the receipt of the application) of the active military and active military spouses who currently hold valid licensure or certification in another state or territory of the United States. Staff also consulted with the South Central Regional Liaison for the Department of Defense in identifying documents to be requested, validating active military status. The agency will be prepared to meet the November 1, 2019, effective date.

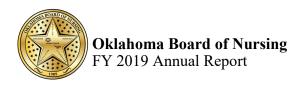
3. Participation in the Occupational Licensing Advisory Commission meetings [SB1475 created the Occupational Licensing Review Act]; convened, on November 6, 2018, a Board member Task for Occupational Licensing Reform. Presented, on November 27, 2018, a Blueprint for Advanced Unlicensed Assistants. In addition, and in response to a May 10, 2019 request from the Occupational Licensing Advisory Commission (OLAC), the Board of Nursing submitted on May 31, 2019, eight Occupational Regulation Blueprints (Blueprints) including all occupations regulated by the Board of Nursing. On August 5, 2019, Board of Nursing (Board) Administrative staff presented to the OLAC the eight Blueprints previously submitted, and provided up-to-date information regarding the Board's readiness for the implementation of HB 1373 (specific crimes that would prevent certification or licensure by the Board) and Senate Bill 670 (expedited licensure of active military and active military spouses).

Savings, Efficiencies and Shared Services:

- 1. Revisions in the Oklahoma Nursing Practice Act in 2015 granted authority to the Executive Director to accept identified agreed Orders on behalf of the Board. The continued use of Corrective Action Orders and Executive Director Orders decreases the resources for compensation of Board members' travel with the decreased days for Informal Disposition Panel hearings. In FY 2019, the Executive Director issued 54 Corrective Action Orders and 42 Executive Director Orders. Savings to the Board includes a 40% reduction in the number of days for administrative licensure settlement hearings (Informal Disposition Panel). The number of Informal Disposition Panel hearings decreased from 238 in FY 2018 to 156 in FY 2019 (a 34% decrease).
- 2. With an internal shift of customer focus to the day the online application is received, a significant efficiency is noted with Board staff reducing the span of time from receipt of an application until application completion by 28% from 7.85 business days in FY 2018 to 5.62 business days in FY 2019.
- 3. In collaboration with the Education Informal Disposition Panel in October of 2018, the nursing education program annual report template was revised in an attempt to streamline data entry, to remove data requests that do not contribute to data measurements needed in evaluating program success and to provide the template in a fillable format. The number of programs not having data submitted 7 days prior to the deadline for submission decreased from 31.0% in 2018 to 13.5% in 2019. In addition, the Nurse Education Consultant decreased the preparation time of the Nursing Education Program Annual Report Summary by 40 hours.
- 4. Through multiple efficiencies adopted in the Investigative Division, the number of cases open at the end of FY 2019 decreased 26% compared to FY 2018 and decreased 52% compared to FY 2015 (FY 2019 233 open cases; FY 2018 316 open cases; FY 2015 488 open cases).
- 5. Through AS400 database changes, the agency converted the printing of nursing license renewal letters from continuous feed paper printing on the AS400 printer to the Savin copier. The resultant cost savings per year total \$5,040.36 with a cost avoidance of \$10,000.00 for replacing the AS400 Infoprint 650 printer.
- 6. A cost avoidance of \$1,324.23 is noted with the email notification of all existing licensees granted a multistate license. In addition, a cost savings of \$1,513.25 is noted with the transition, effective March 1, 2019 to June 30, 2019, from postal mailed notification to email notification of licensure/recognition of Advanced Practice Registered Nurses licensed and those granted prescriptive authority recognition.



Regulatory Services



Introduction

The purpose of the Regulatory Services Division is to provide nursing regulation in three areas: education, practice, and licensing. The Oklahoma Board of Nursing is responsible for the approval of nursing education programs in the State of Oklahoma that lead to initial licensure as an Advanced Practice Registered Nurse, Registered Nurse or Licensed Practical Nurse, as well as for the approval of programs preparing individuals for certification as Advanced Unlicensed Assistants. The Board regulates nursing practice by reviewing issues and questions related to the practice of nursing in accordance with statutes and rules. The Board issues declaratory rulings and develops guidelines that assist nurses, employers, and the public with interpreting and applying the Oklahoma Nursing Practice Act and Rules. Various committees and task forces of the Board ensure stakeholders have input into practice and education decisions. Education and practice activities are coordinated through the Regulatory Services Division. The Regulatory Services Division also processes licenses for Advanced Practice Registered Nurses, Registered Nurses, and Licensed Practical Nurses; as well as certificates for Advanced Unlicensed Assistants and prescriptive authority recognition for Advanced Practice Registered Nurses; in accordance with statutory requirements. In addition, the Regulatory Services Division provides support services for the agency in reception of incoming calls and visitors, mail processing, and open records. Twelve staff members are employed in the Regulatory Services Division.

Licensure, Certification, and Recognition Activities

New Licenses Issued By Examination

The Board administers the National Council Licensure Examination (NCLEX) for Registered Nurses (NCLEX-RN) and Licensed Practical Nurses (NCLEX-PN) under contract with the National Council of State Boards of Nursing, Chicago, Illinois. The NCLEX examination is developed and administered by Pearson VUE, Bloomington, Minnesota, under the auspices of the National Council of State Boards of Nursing.

Registered Nurse Licensure Examination Statistics (First Time Oklahoma-Educated Writers by Calendar Year)*

	CY 2014	CY 2015	CY 2016	CY 2017	CY 2018	1 & 5 Year Variances
Number of Candidates	2,146	2,048	2,127	2,083	2,035	↓ 2.3% & ↓ 5.2%
Oklahoma	83.55%	85.7%	83.78%	86.27%	88.75%	↑ 2.5% & ↑ 5.2%
National Pass Rate	81.79%	84.51%	84.56%	87.12%	88.30%	↑ 1.2% & ↑ 6.5%

^{*}Includes Oklahoma-educated candidates applying for licensure in other states

Licensed Practical Nurse (LPN) Licensure Examination Statistics (First Time Oklahoma-Educated Writers by Calendar Year)*

	CY 2014	CY 2015	CY 2016	CY 2017	CY 2018	1 & 5 Year Variances
Number of Candidates	1,087	1,067	1,181	1,228	1,207	↓ 1.7% & ↑ 11%
Oklahoma Pass Rate	86.94%	90.72%	87.72%	86.64%	86.83%	↑ 0.2% & ↓ 0.1%
National Pass Rate	82.16%	81.89%	83.70%	83.85%	85.93%	↑ 2.1% & ↑ 3.8%

^{*}Includes Oklahoma-educated candidates applying for licensure in other states

Students who are enrolled in RN education programs are eligible to apply to take the NCLEX-PN examination as equivalent candidates after completion of specified course work and are included in the numbers above. The numbers above include any tester educated in Oklahoma, applying for licensure in any state.

The number of first-time NCLEX-RN candidates who were educated in Oklahoma has slightly decreased in the past year. The NCLEX-RN pass rate for Oklahoma graduates peaked in CY 2018. The Oklahoma NCLEX-RN pass rate for Oklahoma has been above the national pass rate in three of the past five years.

The number of first-time NCLEX-PN candidates who were educated in Oklahoma decreased over the past year. The NCLEX-PN pass rate for Oklahoma graduates has remained steady and continues to exceed the national pass rate.

NCLEX testers and pass rates are reported by calendar year, which is consistent with the reporting of NCLEX pass rates. Throughout the remainder of the report, the numbers are reported by fiscal year.

NCLEX-PN Pass Rates of Candidates for PN Equivalency Number of First-Time Candidates by Calendar Year (With NCLEX Pass Rate in Parentheses)

	CY	CY	CY	CY	CY	1 & 5 Year
	2014	2015	2016	2017	2018	Variances
Partial RN Program	105	144	134	135	190	↑ 40.7% & ↑ 81%
Completion	(95.5%)	(95.14%)	(92.54%)	(90.37%)	(93.68%)	↑ 3.3% & ↓ 1.8%
RN Graduate	4 (100%)	6 (100%)	4 (100%)	4 (50%)	2 (50%)	↓ 50% & ↓ 50% ↔ 0% & ↓ 50%

The number of students enrolled in RN programs who choose to take the practical nurse examination through equivalency varies throughout the years, with no noticeable explanation. The NCLEX-PN pass rate for the LPN equivalency candidates this past year was significantly higher than the pass rate for graduates from LPN programs and higher than the national pass rate. It is unknown how many of those individuals seek employment as Licensed Practical Nurses.

Initial Applications for Oklahoma Licensure by Examination (Includes First Time and Rewrite Applicants)

	FY 2015	FY 2016	FY 2017	FY 2018	FY 2019	1 & 5 Year Variances
Registered Nurse	2,666	2,594	2,596	2,396	2,452	↑ 2.3% & ↓ 8%
Licensed Practical Nurse	1,321	1,379	1,485	1,513	1,483	↓ 2% & ↑ 12.3%
Total Applicants	3,987	3,973	4,081	3,909	3,935	↑ 0.7% & ↓ 1.3%
# Reporting Arrests	575	406	325	255	232	↓ 9% & ↓ 59.7%
% Applicants Reporting Arrests	14.4%	10.2%	10%	6.5%	5.9%	↓ 0.6% & ↓ 8.5%

Initial applications for licensure by examination includes both first-time and rewrite candidates. It is noted that rewrite candidates may submit more than one application during the year, as they may retake the examination as often as every 45 days. Registered Nurse examination applications remained relatively steady over the past 5 years with slight decreases and increases noted during that time. Licensed Practical Nurse applications showed a noticeable increase over the past five years. Total numbers of exam applicants has remained steady over the past 5 years with an overall slight decrease.

With the addition of a national criminal background check as opposed to a state-based criminal background check beginning January 1, 2013, there has been a noticeable sustained decrease in the number of applications reporting arrests; however, it is of note that of all the application types requiring a fingerprint criminal background check, 34.7% of applicants with a criminal history did not report any or all of their criminal history on their applications.

Processing Time for Initial Applications for Licensure by Examination

	FY	FY	FY	FY	FY	1 & 5 Year
	2015	2016	2017	2018	2019	Variances
# days from receipt of completed application to approval	3.1	4.0	4.9	4.2	4.4	† 4.8% & † 42%

Even though the processing time for applications has varied, the average processing time continues to remain well under the Board's established maximum time parameter. Staff continue to look for efficiencies in streamlining and organizing licensing processes.

New Licenses Issued By Examination

Level of Licensure	FY 2015	FY 2016	FY 2017	FY 2018	FY 2019	1 & 5 Year Variances
Registered Nurse	1,921	1,896	1,858	1,842	1,963	↑ 6.6 % & ↑ 2.2%
Licensed Practical Nurse	1,016	1,048	1,087	1,150	1,068	↓ 7.1% & ↑ 5.1 %
Total	2,937	2,944	2,945	2,992	3,031	↑ 1.3% & ↑ 3.2%

The number of Registered Nurse and Licensed Practical Nurse licenses issued fluctuates yearly in relation to the total number of applications received and the Pass Rate.

New Licenses Issued by Endorsement

The Board may issue a license to practice without examination to any applicant who has been duly licensed as a Registered Nurse or Licensed Practical Nurse, in another state, territory, the District of Columbia or another country, if such applicant meets the requirements for licensure in the State of Oklahoma.

Initial Applications for Licensure by Endorsement

Level of Licensure	FY 2015	FY 2016	FY 2017	FY 2018	FY 2019	1 & 5 Year Variances
Registered Nurse	2,788	3,357	3,433	2,169	1,091	↓ 49.7% & ↓ 60.9%
Licensed Practical Nurse	367	375	352	224	199	↓ 11.2% & ↓ 45.8%
Total	3,155	3,732	3,785	2,393	1,290	↓ 46.1% & ↓ 59.1%

Over the past five years, the number of applications for RN and LPN licensure by endorsement had varied widely. A significant decrease occurred beginning in the 3rd quarter of FY 2018 that was expected as this Board joined the enhanced Nurse Licensure Compact (eNLC) that was implemented nationwide on January 19, 2018. The eNLC allows those nurses who have a multistate license in another compact party state which is their primary state of residence, to practice in or provide care to Oklahoma-based patients without the need to obtain and maintain a single state Oklahoma license.



New Licenses Issued By Endorsement

Level of Licensure	FY 2015	FY 2016	FY 2017	FY 2018	FY 2019	1 & 5 Year Variances
Registered Nurse	2,055	2,456	2,472	1,814	1,216	↓ 33% & ↓ 40.8%
Licensed Practical Nurse	230	222	188	139	116	↓ 16.5% & ↓ 49.6%
Total	2,285	2,678	2,660	1,953	1,332	↓ 31.8% & ↓ 41.7%

In association with the dramatic decrease in the number of applications submitted, the number of new licenses issued by endorsement for RNs and LPNs has decreased this past year.

Number of Certified Verifications Provided to Other States

Level of Licensure	FY 2015	FY 2016	FY 2017	FY 2018	FY 2019	1 & 5 Year Variances
Registered Nurse	2,527	2,575	3,038	1,231	5,136	↑ 317.2% & ↑ 103.2%
Licensed Practical Nurse	422	464	492	209	285	↑ 36.4% & ↓ 32.5%
Total	2,949	3,039	3,530	1,440	5,421*	↑ 276.5% & ↑ 83.8%

^{*}In FY 2019, all certified verifications for Registered Nurses and Licensed Practical Nurses were provided through Nursys of the National Council of State Boards of Nursing.

Certified verification of licensure from the original state of licensure is generally requested by a licensing board in another state when the nurse applies for a license in that state. It is noted that certified verifications are provided for nurses with active licenses in Oklahoma, as well as those who were initially licensed in Oklahoma, but who no longer hold an active license. There is a significant increase in the number of certified verifications processed in FY 2019.

Processing Time for Endorsement Applications

Type of Function	FY 2015	FY 2016	FY 2017	FY 2018	FY 2019	1 & 5 Year Variances
Processing time to issue a license for a completed endorsement application	2.3 days	4.0 days	5.2 days	4.2 days	3.4 days	↓ 19.0% & ↑ 47.8%
Processing time for a completed certified verification	2.5 days	2.5 days	2.8 days	2.4 days	*N/A	N/A & N/A

^{*}Processing time for a completed certified verification does not apply, as the verification is processed by Nursys.

The average processing time for endorsement applications over the past year has decreased by almost one day. The processing time for the endorsement applications remains well under the Board's established maximum time parameter.

Multistate Licenses Issued

The enhanced Nurse Licensure Compact (eNLC), which was enacted by the state of Oklahoma in April 2016, was implemented nationwide on January 19, 2018, in accordance with the date set by the Interstate Commission of Nurse Licensure Compact Administrators, the governing body of the eNLC. The eNLC is an updated version of the original Nurse Licensure Compact, allowing registered nurses and licensed practical nurses to have one multistate license (MSL), with the ability to practice in person or via telehealth in both their home state (primary state of residence) and other eNLC party states. An MSL is not automatically granted to all nurses licensed in Oklahoma; individuals interested in an MSL must apply. All applicants for an MSL are required to meet the same licensing requirements, which include federal and state background checks.

Number of Multistate Applications for Existing Active Oklahoma Licensees Received

Level of Licensure	FY 2015	FY 2016	FY 2017	FY 2018	FY 2019	1 & 5 Year Variances
Existing Active Licensee Registered Nurse				2,010	1,899	↓ 5.5% & N/A
Existing Active Licensee				220	429	↑ 95% & N/A
Total				2,230	2,328	↑ 4.4% & N/A

Number of Multistate Applications for Existing Active Oklahoma Licensees Processed

Level of Licensure	FY 2015	FY 2016	FY 2017	FY 2018	FY 2019	1 & 5 Year Variances
Existing Active Licensee Registered Nurse				1,782	1,851	↑ 3.9% & N/A
Existing Active Licensee Licensed Practical Nurse				158	371	↑ 138.4% & N/A
Total				1,940	2,222	↑ 14.5% & N/A

Processing Time for Multistate Applications for Existing Active Oklahoma Licensees

Level of	FY	FY	FY	FY	FY	1 & 5 Year
Licensure	2015	2016	2017	2018	2019	Variances
Existing Active Registered Nurse and Licensed Practical Nurse Active Licensees				1.1 days	0.9 days	↓ 18.2% & N/A

Since the Board began accepting applications for multistate licensure for the Existing Active Oklahoma licensee, it was not possible to predict the number of applications to be received. It was expected that there would be a peak of application submission during the even renewal year of 2018 for RNs and then the odd renewal year of 2019 for LPNs, and that appears to have occurred. The processing times for these applications was expected to improve as processes were made more efficient, and the resulting processing time for FY 2019 shows this to be true.

License Renewal, Reinstatement and Return to Active Status

The Oklahoma Nursing Practice Act requires licenses and certificates to be renewed every two years according to a schedule published by the Oklahoma Board of Nursing. Renewal applications, accompanied by the renewal fee, must be submitted by the end of the birth month in even -numbered years for Registered Nurses and APRNs, in odd-numbered years for Licensed Practical Nurses and Advanced Unlicensed Assistants.

Number of Renewal Applications Processed

Type of Renewal	FY 2015	FY 2016	FY 2017	FY 2018	FY 2019	1 & 5 Year Variances
Registered Nurse and Licensed Practical Nurse	28,334	35,620	29,600	31,344	26,128	↓ 16.6% & ↓ 7.8%
Advanced Practice Registered Nurse and Prescriptive Authority Recognition	1,896	2,653	2,508	3,267	3,100	↓ 5.1% & ↑ 63.5%
Advanced Unlicensed Assistant	269	235	242	218	172	↓ 21.1% & ↓ 36.1%
% Nurses/AUAs Renewing Online	98.8%	99.1%	99.2%	99.2%	98.9%	↔ 0.3% & ↑ 0.1%

Overall, the number of renewals is reflective of the number of licensed nurses and certified AU-As. The large percentage of increase seen among Advanced Practice Registered Nurses with Prescriptive Authority Recognition is reflective of the associated increase in their overall numbers over the past five years.

Number of Applications for Reinstatement/Return to Active Status

Type of Reinstatement	FY 2015	FY 2016	FY 2017	FY 2018	FY 2019	1 & 5 Year Variances
Registered Nurse and Licensed Practical Nurse	1,309	1,196	1,284	1,244	1,545	↑ 24.2% & ↑ 18%
Advanced Practice Registered Nurse	40	19	25	40	68	↑ 70% & ↑ 70%
Prescriptive Authority	44	26	24	48	71	↑ 47.9% & ↑ 61.4%
Advanced Unlicensed Assistant	28	23	11	16	27	↑ 68.8% & ↓ 3.6%
Total	1,421	1,264	1,344	1,348	1,711	↑ 26.9% & ↑ 20.4%

Licensees / certificants reinstate their license / certificate for a variety of undocumented reasons such as returning to active status a license that has lapsed, returning to the work force after a period of inactivity or returning to Oklahoma to work. There are an equal number of undocumented reasons for not returning a license / certificate to an active status. Due to the variety of reasons prompting reinstatement, the overall number of reinstatement applications fluctuates.

Processing Time for Licensure Renewal and Reinstatement/Return to Active

Type of Function	FY 2015	FY 2016	FY 2017	FY 2018	FY 2019	1 & 5 Year Variances
# days from receipt of completed renewal application to processing	1.6 days	1 day	1.6 days	1.6 days	1.7 days	↑ 6.2% & ↑ 6.2%
# days from receipt of completed reinstatement application until processing	2 days	2 days	2.2 days	2.2 days	1.8 days	↓ 18.2% & ↓ 10%

The processing time for renewal applications remained relatively unchanged over the past year and has remained steady over the past 5 years. The processing time for reinstatement applications showed the best processing time for the past 5 years in FY 2019; and, continues to remain well under the Board's established maximum time parameter.

Other Licensee and Public Requests and Activities

The Regulatory Services Division is also responsible for modifications to licensure records, providing closed school transcripts, processing open records and written verification of licensure requests, providing address lists and labels when requested, and receiving visitors into the office. The following table reflects these activities:

Other Licensee and Public Requests and Activities

Type of Function	FY 2015	FY 2016	FY 2017	FY 2018	FY 2019	1 & 5 Year Variances
Change of Address*	390	437	391	870	618	↓ 29% & ↑ 58.5%
Duplicates or Modifications**	1,518	1,889	1,482	1,771**	1,496	↑ 454.1% & ↓ 1.4%
Open Records Requests	195	194	162	108	68	↓ 37% & ↓ 65.1%
Address Lists and Labels	94	91	93	66	86	↑ 30.3% & ↓ 8.5%
Visits to Board Office	4,919	5,267	5,136	5,161	4,825	↓ 6.5% & ↓ 1.9%
Written Verifications	1,400	1,074	750	558	508	↓ 9% & ↓ 63.7%
Closed School Transcripts	23	23	27	11	23	↑ 109.1% & ↔0%

^{*}In FY 2008, nurses gained the ability to enter address changes online. Although these address changes are reviewed by the Administrative Technician prior to download, they are not counted in the number of address changes processed. In FY 2018, a significant increase in the number of written change of address requests is noted, primarily due to transitioning process of online forms to include the declaration of primary state of residence.

Advanced Practice Registered Nurse Licensure

Four roles of Advanced Practice Registered Nurses (APRNs) are licensed in Oklahoma:
1) Certified Nurse Practitioner (APRN-CNP); 2) Certified Nurse Midwife (APRN-CNM); 3)
Clinical Nurse Specialist (APRN-CNS); and 4) Certified Registered Nurse Anesthetist (APRN-CRNA).

Number of APRNs Licensed in Oklahoma

Type of License	FY 2015	FY 2016	FY 2017	FY 2018	FY 2019	1 & 5 Year Variances
APRN-CNP	1,845	2,182	2,517	2,952	3,418	↑ 15.8% & ↑ 85.3%
APRN-CNM	70	75	65	70	64	↓ 8.6% & ↓ 8.6%
APRN-CNS	269	275	277	283	287	↑ 1.4% & ↑ 6.7%
APRN-CRNA	707	707	713	729	725	↓ 0.5% & ↑ 2.5%
Total	2,891	3,239	3,572	4,034	4,494	↑ 11.4% & ↑ 55.4%

The number of Advanced Practice Registered Nurses has risen dramatically over the past five years. The APRN-CNP role has shown the most sustained increase over the past 5 years.

^{**}FY 2018 Duplications or Modifications data revised.

Number of New APRN Licenses Issued

Type of License	FY 2015	FY 2016*	FY 2017	FY 2018*	FY 2019	1 & 5 Year Variances
APRN-CNP	350	392	405	512	727	↑ 100.8% & ↑ 107.7%
APRN-CNM	3	10	4	9	3	↓ 50% & ↔ 0%
APRN-CNS	18	11	13	15	16	↓ 6.7% & ↓ 11.1%
APRN-CRNA	62	46	45	68	99	↑ 73.7% & ↑ 59.7%
Total	433	459	467	612	845	↑ 92% & ↑ 95.2%

^{*}FY 2016 and FY 2018 data revised.

The number of new APRN licenses issued has increased significantly over the past five years, with Advanced Practice Registered Nurse-Certified Nurse Practitioners showing the most significant increase.

Processing Time for APRN Licensure Applications

Type of Function	FY 2015		FY 2017	FY 2018	FY 2019	1 & 5 Year Variances
# days from receipt of completed APRN application to processing	2.3 days	2 days	2 days		2.7 days	↔ 0% & ↑ 17.4%

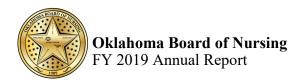
Processing times for advanced practice licensure applications over these past 5 years remains steady and well under the Board's established maximum time parameter.

Number of Advanced Practice Registered Nurses with Prescriptive Authority

Type of License	FY 2015	FY 2016	FY 2017	FY 2018	FY 2019	1 & 5 Year Variances
APRN-CNP	1,617	1,889	2,169	2,480	2,886	↑ 16.4% & ↑ 78.5%
APRN-CNM	54	57	50	54	51	↓ 5.6% & ↓ 5.6%
APRN-CNS	165	174	182	191	202	↑ 5.8% & ↑ 22.4%
APRN-CRNA*	356	400	443	479	507	↑ 5.8% & ↑ 42.4%
Total	2,192	2,520	2,844	3,204	3,646	↑ 13.8% & ↑ 66.3%

^{*}The APRN-CRNA applies for authority to select, order, obtain, and administer drugs, rather than the authority to prescribe.

The number of Advanced Practice Registered Nurses with prescriptive authority continues to rise, reflective of the increased numbers of Advanced Practice Registered Nurses. Currently, 81.1% of Advanced Practice Registered Nurses hold prescriptive authority recognition.



Number of Prescriptive Authority Recognitions Issued

Type of License	FY 2015	FY 2016	FY 2017	FY 2018	FY 2019	1 & 5 Year Variances
APRN-CNP	281	314	326	362	535	↑ 47.8% & ↑ 90.4%
APRN-CNM	2	6	3	6	3	↓ 50% & ↑ 50%
APRN-CNS	18	12	13	15	13	↓ 13.3% & ↓ 27.8%
APRN-CRNA	34	60	58	57	61	↑ 7% & ↑ 79.4%
Total	332	392	400	440	612	↑ 39.1% & ↑ 84.3%

The number of prescriptive authority recognitions issued has varied widely over the past five years among the different APRN roles, with recognitions issued to APRN-CNPs showing the most consistent and steady increase.

Number of Changes in Supervising Physicians

Number of Changes	FY	FY	FY	FY	FY	1 & 5 Year
	2015	2016	2017	2018	2019	Variances
Total	969	1,118	1,103	1,370	1,460	↑ 6.6% & ↑ 50.7%

The number of changes over the past five years has risen significantly, consistent with the increased number of Advanced Practice Registered Nurses with prescriptive authority recognition.

Certification of Advanced Unlicensed Assistants

Advanced Unlicensed Assistants (AUAs) complete a 200-hour training program, which is designed to build upon basic skills traditionally performed by nursing assistants working in health care settings. A list of Board-approved AUA training programs is available on the Board's website: www.nursing.ok.gov. Specific core skills, legal and ethical aspects of health care and appropriate personal behaviors are presented in a format that combines classroom lecture/discussion, demonstration/practice lab and clinical application. Upon satisfactory completion of the course work, graduates of these training programs are eligible to take the AUA certification examination. This examination is developed by Oklahoma Department of Career and Technology Education and is approved by the Oklahoma Board of Nursing. Upon successful completion of the certification examination, the Board-certified AUA may perform the skills that are identified on the *Approved Skills List for Performance by Board-Certified Advanced Unlicensed Assistants*, under the supervision of Registered Nurses and Licensed Practical Nurses in acute care settings.

Advanced Unlicensed Assistants

Certifications	FY 2015	FY 2016	FY 2017	FY 2018	FY 2019	1 & 5 Year Variances
# New Certifications	111	104	63	52	68	↑ 30.7% & ↓ 38.7%
Total # AUAs Certified	646	629	573	539	527	↓ 2.2% & ↓ 18.4%

Both the number of new AUA certifications and the total number of certified AUAs has remained relatively consistent until FY 2017, but has remained steady since.

Nursing Practice/Advanced Nursing Practice Activities

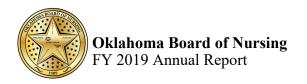
Summary of Practice Activities

Category	FY 2015	FY 2016	FY 2017	FY 2018	FY 2019	1 & 5 Year Variances
# Practice Calls	1,696	1,630	1,650	2,456*	1,788	↓ 27.2% & ↑ 5.42%
# Practice Letters	41	41	65	60	70	↑ 16.7% & ↑ 70.7%
# Requests for Declaratory Rulings	0	0	0	0	0	↔ 0% & ↔ 0%
# Declaratory Rulings, Policies & Guidelines Reviewed by Board	18	11	13	12	15	↑ 25% & \leftrightarrow 0%
# Meetings Attended as Board Representative	16	18	12	10	21	↔ 0% & ↓ 37.5%
# Presentations	15	14	12	7	14	↑ 100% & ↓ 6.7%

^{*}From FY 2017 to FY 2018, there is a notable increase in the number of practice calls primarily related to the implementation of the enhanced Nurse Licensure Compact on January 19, 2018

Written Responses to Practice Questions

For FY 2019, there were 70 written responses to practice related issues, as compared to 60 responses in FY 2018. The highest number of practice letters were to health care facilities, followed by clinics. The written response variances of the FY 2018 report and FY 2019 report note an increase of 16.7 percent. The **types of issues** and **settings** addressed in the practice letters are summarized on the following pages.



Types of Issues Addressed in Practice Letters

Type of Issue	FY 2015	FY 2016	FY 2017	FY 2018	FY 2019	1 & 5 Year Variances
Scope of Practice	8	13	19	22	25	↑ 13.6% & ↑ 212.5%
Delegating & Training Unlicensed Persons	1	3	0	2	6	↑ 200% & ↑ 500%
Compact States Related/ License Requirement	4	2	4	11	10	↓ 9.1% & ↑ 150%
Telephone Triage & Case Management	0	0	0	0	0	↔ 0% & ↔ 0%
Esthetics & Medical Questions	0	1	1	0	1	↑ 100% & ↑ 100%
Emergency Screening [EMTALA]	0	0	0	0	0	↔ 0% & ↔ 0%
Pronouncement of Death By Nurses	0	1	2	1	0	↓ 100% & ↔ 0%
Medication-Related	1	1	1	3	1	↓ 66.7% & ↔ 0%
CEU & Continuing Qualification-Related	0	0	0	0	0	↔ 0% & ↔ 0%
Primary Source Verification	0	0	0	0	0	↔ 0% & ↔ 0%
Patient Care-Related	4	1	3	1	2	↑ 100% & ↓ 50%
Survey/Publication	0	0	0	0	0	↔ 0% & ↔ 0%
OBN Regulation of Nurses	7	7	6	2	4	↑ 100% & ↓ 42.9%
Licensure Requirements	3	0	2	2	3	↑ 50% & ↔ 0%
APRN Prescriptive Authority	5	7	17	13	15	↑ 15.4% & ↑ 200%
Resource Information	3	2	1	0	0	↔ 0% & ↓ 100%
Certification	1	0	1	1	2	↑ 100% & ↑ 100%
School Nurse/Staff or Nursing Education-Related	4	3	7	1	0	↓ 100% & ↓ 100%
Billing Information-Related	0	0	1	0	0	$\leftrightarrow 0\% \& \leftrightarrow 0\%$
Total	41	41	65	60	70	↑ 16.7% & ↑ 70.7%

Settings of Practice Letters

Settings	FY 2015	FY 2016	FY 2017	FY 2018	FY 2019	1 & 5 Year Variances
Medical Center	11	13	19	21	29	↑ 38.1% & ↑ 163.7%
RN, LPN, or APRN	13	9	15	18	11	↓ 38.9% & ↓ 15.4%
Specialty Organization/ Health Care Provider	1	3	9	4	7	↑ 75% & ↑ 600%
OK State Dept. of Health	0	0	1	1	1	↔ 0% & ↑ 100%
Other State or Federal Agency	1	3	4	4	1	↓ 75% & ↔ 0%
School Nurse/Staff or Nursing Education	4	3	7	0	3	↑ 100% & ↓ 25%
Medical Office/Clinic/ Ambulatory Center	5	5	3	7	14	↑ 100% & ↑ 180%
Long Term Care Facility/Agency	2	1	2	2	0	↓ 100% & ↓ 100%
NCSBN/Boards of Nursing	0	0	0	0	0	$\leftrightarrow 0\% \& \leftrightarrow 0\%$
Publication/Survey	0	0	0	0	0	$\leftrightarrow 0\% \& \leftrightarrow 0\%$
Other	4	2	1	1	4	↑ 300% & ↔ 0%
Credentialing Agency/ Proprietary Corporation	0	2	4	3	0	↓ 100% & ↔ 0%
Total	41	41	65	60	70	↑ 16.7% & ↑ 70.7%

Practice Calls and Visits

During FY 2019, 1,788 practice calls and visits were documented compared to 2,456 in FY 2018. This notes a decrease of 27.2 percent in practice calls and visits.



Classification of Callers or Visitors

Type of Caller/Visitor	FY 2015	FY 2016	FY 2017	FY 2018	FY 2019	1 & 5 Year Variances
Registered Nurse	555	484	487	578	492	↓ 14.9% & ↓ 11.4%
Licensed Practical Nurse	235	211	216	373	333	↓ 10.7% & ↑ 41.7%
Advanced Practice Registered Nurse	497	415	473	524	423	↓ 19.3% & ↓ 14.9%
Advanced Unlicensed Assistant	10	12	12	4	10	↑ 150% & ↔ 0%
CMA or CNA	19	23	25	21	22	↑ 4.8% & ↑ 15.8%
School Nurse or School Staff	22	23	20	16	30	↑ 87.5% & ↑ 36.4%
Nursing Education	28	36	34	7	16	↑ 128.6% & ↓ 42.9%
Employer or Supervisor	200	266	203	194	249	↑ 28.4% & ↑ 24.5%
Physician or Office Staff	35	39	53	104	93	↓ 10.6% & ↑ 165.7%
Public	39	61	44	26	45	↑ 73.1% & ↑ 15.4%
Staffing Agency	14	10	16	33	13	↓ 60.6% & ↓ 7.1%
OK State Dept. of Health	8	10	14	6	6	↔ 0% & ↓ 25%
Other State/Federal Agency	5	10	6	5	9	↑ 80% & ↑ 80%
Credentialing Company or Payor	0	1	6	1	8	↑ 700% & ↑ 800%
Pharmacy	8	6	25	22	23	↑ 4.5% & ↑ 187.5%
Attorney or Staff	16	20	15	12	16	↑ 33.3% & ↔ 0%
Other /MSL-Related Calls	5	3	1	530	0	↓ 100% & ↓ 100%
Total	1,696	1,630	1,650	2,456	1,788	↓ 27.2% & ↑ 5.42%

Practice Visits and Calls

Issue	FY 2015	FY 2016	FY 2017	FY 2018	FY 2019	1 & 5 Year Variances
General Scope of Practice	321	407	413	376	396	↑ 5.3% & ↑23.4%
Delegation	117	95	81	83	101	↑ 21.7% & ↓ 13.7%
Aesthetics & Skin Care	32	38	40	88	101	↑ 14.8% & ↑ 215.6%
Employment-Related	187	165	117	159	172	↑ 8.2% & ↓ 8.0%
Staffing or Abandonment	89	81	77	79	102	↑ 29.11% & ↑ 14.6%
CEUs	27	20	23	49	37	↓ 24.5% & ↑ 37.0%
Licensing	322	292	315	1,094*	270	↓ 75.3% & ↓ 16.1%
APRN Prescriptive Authority	229	202	279	275	259	↓ 5.8% & ↑ 13.1%
APRN Scope of Practice	207	196	210	219	228	↑ 4.1% & ↑ 10.1%
Other	165	134	95	34	122	↑ 258.8% & ↓ 26.1%
Total	1,696	1,630	1,650	2,456	1,788	↓ 27.2 % & ↑ 5.4%

^{*}From FY 2017 to FY 2018, the significant increase in Licensing is related to the implementation of the enhanced Nurse Licensure Compact (eNLC) on January 19, 2018. As is reflected in the Classification of Callers or Visitors table, 530 calls were related to multistate licensure (MSL) through the eNLC.

Declaratory Rulings, Position Statements, Policies, and Guidelines Developed, Reviewed, Revised, or Rescinded

The following Board documents related to nursing practice were developed, revised or reviewed without revision, or rescinded this fiscal year:

- 1. Registered Nurse Monitoring **Obstetrical** Patients Receiving Analgesia/Anesthesia by Catheter Techniques (Epidural, PCEA and Intrathecal Catheters) Guidelines, #P-04, July 2018 [Revised]
- 2. Registered Nurse Administering, Managing and Monitoring Non-Obstetrical Patients Receiving Analgesia/Anesthesia by Catheter Techniques (Epidural, PCEA and Intrathecal Catheters) Guidelines, #P-03, July 2018 [Revised]
- 3. Rapid Sequence Intubation Guidelines-Medication Administration by Registered Nurses, #P-19, July 2018 [Revised]
- 4. Exclusionary Formulary for Advanced Practice Registered Nurses with Prescriptive Authority, #P-50B, September 2018 [Reviewed]; May 2019 [Revised]
- 5. Formulary Advisory Council Procedure for Amending the Formulary, #P-50, September 2018 [Reviewed]; May 2019 [Reviewed]
- 6. Advanced Practiced Registered Nurse (APRN) Certification Examinations Approved by the Oklahoma Board of Nursing, #P-52A, September 2018 [Revised]
- 7. Advanced Practiced Registered Nurse Certification Examinations No Longer Approved by the Oklahoma Board of Nursing, #P-52B, September 2018 [Revised]
- 8. *Abandonment Statement*, #P-11, November 2018 [Reviewed]

- 9. *IV Medication Administration by Licensed Practical Nurses Guidelines*, #P-12, November 2018 [Revised]
- 10. Delegation of Nursing Functions to Unlicensed Persons, #P-02, April 2019 [Revised]
- 11. Wound Debridement by Licensed Nurses Guidelines, #P-05, April 2019 [Revised]
- 12. Discussion Guidelines for Advanced Practice Registered Nurses When Prescribing Opioids, #P-55, April 2019 [New]
- 13. CRNA Inclusionary Formulary, #P-50A, May 2018 [Revised]; May 2019 [Revised]

Articles Published Related to Nursing Practice Issues

All articles listed were published in the newsletter of the Oklahoma Board of Nursing, unless otherwise noted.

- September 2018:
 - ♦ New Laws Regarding Opioid Prescriptions
- March 2019:
 - ♦ Employment Information Regarding New Graduates
 - ♦ Requirements for Prescriptions Written by APRNs

Meetings and Presentations

The Deputy Director and the Associate Director for Nursing Practice combined in attending and providing input/directions in 21 meetings this fiscal year. In addition, the Deputy Director or Associate Director for Nursing Practice combined in making fourteen (14) presentations to groups of licensees and other stakeholders.

Education Activities

The Oklahoma Board of Nursing holds the responsibility for setting standards for nursing education and conducting survey visits to programs to ensure standards are met. The Board reviews and approves requests for new programs and program changes. The Board further maintains records verifying faculty qualifications and collects data on program, faculty and student characteristics. The following paragraphs summarize nursing education activities in FY 2019.

Number of Nursing Education Programs

Types and Numbers of Programs	FY 2015	FY 2016	FY 2017	FY 2018	FY 2019
# Baccalaureate Programs/Campuses*	14/23	14/23	15/25	14/24	14/24
# Associate Degree Programs/Campuses	21/35	21/35	17/29	15/27	15/28
# Practical Nursing Programs/Campuses	33/50	33/50	29/49	29/49	30/47
Total	68/108	68/108	61/103	58/100	59/99

^{*}RN-BSN not included

The total number of nursing education programs increased, with the total number of campuses decreasing. Specific to registered nursing education programs, one baccalaureate campus of an existing nursing education program closed, and one baccalaureate and two associate degree campuses of existing nursing education programs opened. A new practical nursing education program opened and three campuses of an existing nursing education program closed. The Oklahoma Board of Nursing has continued to work actively with other entities, including the Oklahoma State Regents for Higher Education, the Oklahoma Department of Career and Technology Education, the Oklahoma Hospital Association, the Oklahoma Nurses Association, and the Institute for Nursing Education, to address issues related to shortages in clinical space and qualified faculty.

Percentage of Full-Time Faculty Holding a Masters Degree in Nursing or Higher

Type of Program	FY 2015	FY 2016	FY 2017	FY 2018	FY 2019
Baccalaureate Degree*	2,325	2,363	2,618	100%	99.5%
Associate Degree	3,696	3,701	3,413	92.9%	90.4%
Practical Nursing	3,823	4,595	3,180	46.4%	48.9%

^{*}RN-BSN not included

RN nursing education programs are required to employ full-time faculty with a master's or higher degree in nursing, or a baccalaureate degree in nursing plus evidence of continued progress toward a master's or higher degree in nursing with a completion of a minimum of six (6) semester hours per calendar year. The percentage of full-time faculty employed in baccalaureate nursing education programs holding a master's degree or higher in nursing remained steady from FY 2015 through FY 2017, increasing slightly in FY 2018 and declining slightly in 2019. The associate degree programs have experienced decreases in the percentage of master's prepared or higher degree faculty from FY 2016. PN nursing education programs require nursing faculty to hold a minimum of an associate degree or diploma in nursing, with evidence of continued progress toward a baccalaureate degree in nursing with a completion of a minimum of six (6) semester hours per calendar year. The percentage of practical nursing faculty with a master's degree in nursing or higher increased from FY 2017 to FY 2019.

Applications to Nursing Education Programs

Type of Program	FY 2015	FY 2016	FY 2017	FY 2018	FY 2019	1 & 5 Year Variances
Baccalaureate Degree*	2,325	2,363	2,618	2,766	2,484	↓ 10.2% & ↑ 6.8%
Associate Degree	3,696	3,701	3,413	3,453	3,750	↑ 8.6% & ↑ 1.5%
Practical Nursing	3,823	4,595	3,180	2,742	2,829	↑ 3.2% & ↓ 26%
Total	9,844	10,659	9,211	8,961	9,063	↑ 1.1% & ↓ 7.9%

^{*}RN-BSN not included

The number of people applying to baccalaureate degree programs, which steadily increased from FY 2015 to FY 2018, decreased this past year. The number of applications to associate degree programs increased steadily from FY 2017 to FY 2019, and has increased compared to five years ago. The number of applications to practical nursing education programs increased this past year, and remains low compared to 2015 to 2017. There has been a 1.1% increase in total applications in all nursing education programs over the past year.

Admissions to Nursing Education Programs

Type of Program	FY 2015	FY 2016	FY 2017	FY 2018	FY 2019	1 & 5 Year Variances
Baccalaureate Degree*	1,105	1,377	1,759	1,488	1,213	↓ 18.5% & ↑ 9.8%
Associate Degree	2,111	2,156	1,932	1,874	2,077	↑ 10.8% & ↓ 1.6%
Practical Nursing	1,566	1,511	1,579	1,294	1,147	↓ 11.4% & ↓ 26.8%
Total	4,782	5,044	5,270	4,656	4,437	↓ 4.7% & ↓ 7.2%

^{*}RN-BSN not included

Note: Caution should be used in attempting to compare applications to nursing education programs to admissions to nursing education programs as individuals may apply to more than one nursing education program, and thus be counted as an applicant more than one time.

Admissions to baccalaureate degree nursing programs decreased significantly from FY 2017 to FY 2019, while admissions to the associate degree nursing programs has shown an increase from FY 2018 to FY 2019. Admissions to practical nursing programs has decreased significantly from FY 2017. Total admissions to Oklahoma nursing education programs decreased by 4.7% over the past fiscal year.

Student Enrollment in Nursing Education Programs

Type of Program	FY 2015	FY 2016	FY 2017	FY 2018	FY 2019	1 & 5 Year Variances
Baccalaureate Degree*	2,152	1,840	2,682	2,702	2,284	↓ 15.5% & ↑ 6.1%
Associate Degree	3,664	3,909	3,141	2,948	3,217	↑ 9.1% & ↓ 12.2%
Practical Nursing	2,071	2,087	2,194	1,933	1,546	↓ 20% & ↓ 25.4%
Total	7,887	7,836	8,017	7,583	7,047	↓ 7.1% & ↓ 10.7%

^{*}RN-BSN not included

From FY 2018 to FY 2019, overall enrollment in baccalaureate degree nursing education programs decreased. Enrollment in associate degree nursing education programs increased from FY 2018 to FY 2019. Enrollment in practical nursing education programs significantly decreased over the past fiscal year, with the highest enrollment over the past five years occurring in 2017. Associate degree programs have the highest enrollment of the three types of nursing education programs, achieving a record high enrollment in FY 2016. Total overall enrollments in nursing education programs decreased this past fiscal year.

Graduates from Nursing Education Programs

Type of Program	FY 2015	FY 2016	FY 2017	FY 2018	FY 2019	1 & 5 Year Variances
Baccalaureate Degree*	870	841	1,197	870	834	↓ 4.1% & ↓ 4.1%
Associate Degree	1,247	1,280	1,178	1,140	1,217	↑ 6.8% & ↓ 2.4%
Practical Nursing	917	1,063	1,121	1,062	954	↓ 10.2% & ↑ 4%
Total	3,034	3,184	3,496	3,072	3,005	↓ 2.2% & ↓ 1%

^{*}RN-BSN not included

The number of nursing graduates from Oklahoma nursing education programs decreased this past fiscal year, with FY 2017 having the largest number of graduates over the past five years. Baccalaureate degree nursing programs report a decrease in graduates of 4.1% over the past year. The number of graduates from associate degree nursing education programs increased this past fiscal year with the number of graduates from practical nursing education programs decreasing. Overall, the total number of graduates for all programs decreased for FY 2019.

Admissions of Licensed Nurses in Nursing Education

Category	FY 2015	FY 2016	FY 2017	FY 2018	FY 2019	1 & 5 Year Variances
LPN-ADN	417	356	396	351	428	↑ 21.9% & ↑ 2.6%
LPN-BSN	35	33	36	16	22	↑ 37.5% & ↓ 37.1%
RN-BSN* Traditional Program	76	138	350	256	19	↓ 92.6% & ↓ 75%

^{*}Students enrolled in RN-BSN degree completion programs not regulated by the Board are not included in these figures.

Over the past fiscal year, the number of Licensed Practical Nurses (LPNs) admitted to associate degree nursing education programs increased, as did the number of LPNs admitted to baccalaureate nursing education programs. The majority of LPNs chose associate degree education as their entry point into registered nursing. There is no information regarding the number of RNs enrolled in programs that offer only RN-BSN.

Percentage of Enrolled Students Representing an Ethnic Minority

Type of Program	FY 2015	FY 2016	FY 2017	FY 2018	FY 2019
Baccalaureate Degree*	33.7%	31.5%	30.7%	29.6%	29.6%
Associate Degree	32.9%	32.7%	36%	34.1%	35.4%
Practical Nursing	36.8%	39.6%	26.3%	40.9%	41.3%

^{*}RN-BSN not included

Percentages of minority students enrolled in Oklahoma nursing education programs increased over the past year in both associate degree nursing education programs and practical nursing education programs. The percentage of students representing an ethnic minority enrolled in baccalaureate degree nursing remained steady from FY 2018.

Percentage of Male Students Enrolled in Nursing Education Programs

Type of Program	FY 2015	FY 2016	FY 2017	FY 2018	FY 2019
Baccalaureate Degree*	13%	15.4%	13.7%	15.6%	12%
Associate Degree	15.9%	12.9%	13.1%	14.2%	12.6%
Practical Nursing	9.4%	9.1%	9.2%	9.3%	9%

^{*}RN-BSN not included

While the percent of male students enrolling in nursing education programs has remained relatively small, a decrease in the percent of male students enrolled in all levels of nursing education programs over the past year, is noted.

Average Age (In Years) of Students Enrolled in Nursing Education Programs

Type of Program	FY 2015	FY 2016	FY 2017	FY 2018	FY 2019
Baccalaureate Degree*	26.6	24	27.5	25.6	26.3
Associate Degree	30	29.8	28.8	29.6	28.2
Practical Nursing	28	28	27.5	27.7	28

^{*}RN-BSN not included

The average age of students enrolled in baccalaureate nursing education programs increased over the past year. Over the past year, the average age of students in associate degree nursing education programs has decreased, while the average age of students enrolled in practical nursing education programs remained steady.

Mean Completion Rates of Nursing Education Programs

Type of Program	FY 2015	FY 2016	FY 2017	FY 2018	FY 2019
Baccalaureate Degree*	82.7%	84.9%	87.8%	87.1%	86.7%
Associate Degree	65.2%	75.8%	77.9%	79.8%	80.6%
Practical Nursing	76%	72.3%	79.6%	80.2%	81.5%

^{*}RN-BSN not included

The data continues to support that the majority of students admitted to nursing education programs are successful in completing their programs. The completion rate for baccalaureate degree nursing education programs decreased slightly over the past fiscal year. The associate degree nursing education programs have seen a steady increase in completion rates over the past five years, as have practical nursing education programs since FY 2016.

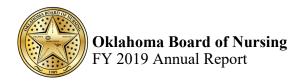
Requests for Program Changes (Number of Programs Impacted With Percent of Total Programs Noted in Parentheses)

Type of Change	FY	FY	FY	FY	FY
	2015	2016	2017	2018	2019
Change in Curriculum	9	23	11	5	5
	(13.2%)	(33.8%)	(18%)	(8.6%)	(8.5%)
Program Format Change	1 (1.5%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)
Extended/	0	0	1	0	0
Additional Classes	(0%)	(0%)	(1.6%)	(0%)	(0%)
New Nursing	2/2	0/1	1/2	0/2	1/2
Program/Campus	(2.9%)/(1.9%)	(0%)/(0.9%)	(1.6%)/(1.9%)	(0%)/(2%)	(1.7%)(2%)

Board Actions Related to Program Approval Status (Number of Programs Impacted With Percent of Total Programs Noted in Parentheses)

Type of Action	FY	FY	FY	FY	FY
	2015	2016	2017	2018	2019
Routine Survey Visits	15	14	8	7	4
	(22.1%)	(20.6%)	(13.1%)	(12.1%)	(6.8%)
Board-Directed Survey Visits	0	0	1	0	1
	(0%)	(0%)	(1.6%)	(0%)	(1.7%)
Consultative Survey Visits	1	0	1	1	3
	(1.5%)	(0%)	(1.6%)	(1.7%)	(5.1%)
Warnings Issued	5	2	0	0	1
	(7.4%)	(2.9%)	(0%)	(0%)	(1.7%)
Programs on Conditional Approval	2	5	1	1	0
	(2.9%)	(7.4%)	(1.6%)	(1.7%)	(0%)
Programs/Campuses Closed	0	1*	5*	5*	4*
	(0%)	(1.5%)	(8.2%)	(8.6%)	(6.8%)
Pass Rate Reports Required	12	11	0	15	6
	(17.6%)	(16.2%)	(0.00%)	(25.9%)	(10.2%)
Follow-Up Reports Required	6	5	6	0	1
	(88.2%)	(7.4%)	(9.8%)	(0%)	(1.7%)

^{*}Programs/campuses closed voluntarily.



Revisions to Education Policies

The following Board documents related to nursing education were developed, revised or reviewed without revision, or rescinded this fiscal year:

- Preceptor Policy for Registered Nurses and Licensed Practical Nurses, #E-02, September 2018 [Reviewed]
- Nursing Education Program with Extended and Multiple Campuses Policy, #E-03, September 2018 [Reviewed]
- Nursing Education Programs Offering Non-Traditional Learning Options Guidelines, #E-08, September 2018 [Revised]
- Medic Veteran to Licensed Practical Nurse Bridge Course Guideline, #E-45, September 2018 [Revised]
- Reports Submitted from Nursing Education Programs on NCLEX Pass Rate and Program Completion Rate Report Guidelines, #E-07, November 2018 [Revised]
- Board Decisions Regarding Nursing Education Programs, #E-10, November 2018 [Revised]
- Approved Skills List for Performance by Board-Certified Advanced Unlicensed Assistants, #E-43, November 2018 [Reviewed]
- Special Reports from Nursing Education Programs to the Board Guidelines, #E-06, April 2019 [Revised]

In FY 2019, the Board reviewed reports of survey visits conducted in the following nursing education programs and recommended continuing full approval:

- Indian Capital Technology Center, Practical Nursing Program, Muskogee, Sallisaw, Stilwell, and Tahlequah, 10/29-11/1/18
- Caddo-Kiowa Technology Center, Practical Nursing Program, Fort Cobb, 11/13-15/18
- Langston University, Baccalaureate Degree Nursing Program, Langston, 4/9-10/19
- Northeast Technology Center. Practical Nursing Program, Pryor, Claremore, Afton, and Kansas, 4/23-26/19

At the closure of FY 2019, there was one (1) survey visit pending Board approval:

• Chisholm Trail Technology Center, Practical Nursing Program, Omega, 6/3-5/2019

NCLEX Pass Rate Reports

Pass rate reports are required when the first-time writer National Council Licensure Examination (NCLEX) pass rate for a nursing education program falls ten percentage points or more below the national average and at least ten candidates wrote the examination [OAC 485:10-3-5 (4)]. NCLEX pass rate reports were submitted in FY 2019 by the following nursing education programs with a Calendar Year 2018 NCLEX pass rate ten percentage points or more below the national average:

- Platt College, Practical Nursing Program, Oklahoma City-Central
- Platt College, Practical Nursing Program, Moore
- Northern Oklahoma College, Associate Degree Nursing Program, Tonkawa
- Northwestern Oklahoma State University, Baccalaureate Degree Nursing Program, Alva
- Northwestern Oklahoma State University, Baccalaureate Degree Nursing Program, Enid
- Oklahoma Wesleyan University, Baccalaureate Degree Nursing Program, Bartlesville

A Board subcommittee reviewed the reports in October 2018, and made recommendations for each program. These recommendations were reviewed and accepted by the Board during the November 2018 meeting.

Request for New Programs, Additional Program Offerings, and Program Changes

In FY 2019, the Board approved a Step I application for a new program:

• Oklahoma State University, Baccalaureate Degree Nursing Program, Stillwater, February 2019

In FY 2019, the Board granted Provisional Approval for a new program:

Central Oklahoma College, Practical Nursing Program, Oklahoma City, May 2019

In FY 2019, the Board approved additional program offerings on extended campuses for:

- Langston University. Baccalaureate Degree Nursing Program, Ardmore, September 2018
- Connors State College, Associate Degree Nursing Program, Tahlequah, May 2019

In FY 2019, the Board approved curriculum change requests from the following programs:

- Redlands Community College, Associate Degree Nursing Program, El Reno, February 2019
- Tulsa Technology Center, Practical Nursing Program, Tulsa, February 2019
- Southern Nazarene University, Baccalaureate Degree Nursing Program. Bethany, April 2019
- Oklahoma Baptist University, Baccalaureate Degree Nursing Program, Shawnee, May 2019
- Langston University, Baccalaureate Degree Nursing Program, Langston, Tulsa, and Ardmore, May 2019

Follow-Up Reports

There was one (1) nursing education program follow-up report for FY 2019. The report was not presented to the Board prior to the end of FY 2019.

Northwestern Oklahoma State University, Baccalaureate Degree Nursing Program, Alva

Meetings:

The Nursing Education Consultant attended and provided input/directions in 10 meetings which were primarily related to nursing education this fiscal year, as compared to 14 meetings attended in FY 2018.

Other Division Activities

Nursing Education and Nursing Practice Advisory Committee

The purpose of the Advisory Committee on Nursing Education and Nursing Practice is to:

- 1. Review annually the minimum standards for approved schools of nursing and make recommendations which would assure the standards are realistic and reflect the trends and present practices in nursing education;
- 2. Examine and make recommendations concerning nursing practice issues;
- 3. Provide input on the role and scope of safe and competent nursing practice; and
- 4. Review annually the Rules of the Oklahoma Board of Nursing.

Persons who have served on this committee during the fiscal year are:

Liz Massey, MSN, RN, NEA-BC, Board Representative Carmen Nickel, MSN, RN, Board Representative

Cindy Rauh, DNP, RN, Oklahoma Organization of Nurse Executives Kim Stout, RN, Oklahoma Organization of Nurse Executives Liz Michael, MS, RN, Oklahoma Organization of Nurse Executives Chris Weigel, MS, RN, Oklahoma Organization of Nurse Executives Karen Vahlberg, BSN, RN, Oklahoma Association for Home Care Shy Rhonda Roy, MSN, RN, Oklahoma Nurses Association Shelly Wells, PhD, MBA, MS, APRN-CNS, Oklahoma Nurses Association Linda Cook, PhD, RN, APRN-CNS, Baccalaureate & Higher Degree Deans Council Anna Nguyen, PhD, RN, Associate Degree Directors Council Marietta Lynch, BSN, RN, Oklahoma Association of Health Care Providers J.R. Polzien, MSN, RN, OK Department of Career & Technology Education Stephanie Beauchamp, EdD, Oklahoma State Regents for Higher Education Ann Benson, MSN, APRN-CNP, Oklahoma State Department of Health LaDonna Selvidge, MS, Med, RN, Practical Schools of Nursing Sarah McDaniel, LPN, Board-appointed LPN Amber Pagel, BSN, RN, Board-appointed Representative of AUA Programs

Board staff representatives were Gina Stafford, BSN, RN; Terri Walker, MSN, RN, and Jackye Ward, MSN, RN.

Nursing Education and Nursing Practice Advisory Committee meetings were held on October 22, 2018, February 25, 2019 and June 24, 2019.

Advanced Practice Advisory Committee

The purpose of the Advanced Practice Advisory Committee is to:

- 1. Make recommendation to the Board concerning advanced practice educational programs, national certifying bodies, definitions of scope of practice statements, standards of practice, and other practice-related issues;
- 2. Advise the Board in the development and enforcement of Rules and Regulations regarding advanced practice;
- 3. Advise the Board with regard to complaints filed against advanced practitioners, and assists the Board in interpretation of the Scope of Practice and Standards of Care for the Advanced Practitioner; and,
- 4. Perform other duties as defined by the Board.

Persons who have served on this committee during this fiscal year are:

Tricia Butner, DNP, APRN-CNP, Oklahoma Association of Nurse Practitioners

Jana Butcher, MSN, APRN-CNP, Oklahoma Chapter of the National Association of Pediatric Nurse Practitioners

Leanna Harkess, MSN, APRN-CNM, CNP, American College of Nurse Midwives, OK Chapter Affiliate

Lynne Burson, MSN, APRN-CNM, American College of Nurse Midwives, OK Chapter Affiliate

Jill Nobles-Botkin, MSN, APRN-CNM, American College of Nurse Midwives, OK Chapter Affiliate

Dorothy Pointer, MSN, APRN-CNM, American College of Nurse Midwives, OK Chapter Affiliate

Steve McKitrick, BSN, APRN-CRNA, Oklahoma Association of Nurse Anesthetists

Dennis Dodd, BS, APRN-CRNA, Oklahoma Association of Nurse Anesthetists Randy Hailey, Jr, MSN, APRN-CRNA, Oklahoma Association of Nurse Anesthetists Carol Stewart, MSN, APRN-CNS, Oklahoma Association of Clinical Nurse Specialists Elaine Haxton, MSN, APRN-CNS, Oklahoma Association of Clinical Nurse Specialists Tracey Walker, MSN, APRN-CNS, Oklahoma Association of Clinical Nurse Specialists Melissa Craft, PhD, APRN-CNS, Board-appointed Faculty from an Oklahoma Advanced Practice Registered Nursing Education Program for Clinical Nurse Specialist Educator

Gina Crawford, DNP, APRN-CNP, Board-appointed Faculty from an Oklahoma Advanced Practice Registered Nursing Education Program for Certified Nurse Practitioner Educator

Margaret Rosales, MSN, APRN-CNP, Oklahoma Nurse Practitioner Association Mandy Nelson, DNP, APRN-CNS, Board Representative

Board staff representatives were Gina Stafford, BSN, RN, and Jackye Ward, MSN, RN.

The Advanced Practice Advisory Committee met on August 21, 2018 and February 28, 2019.

CRNA Formulary Advisory Council

The purpose of the CRNA Formulary Advisory Council is to:

- 1. Develop and submit to the Board recommendations for an inclusionary formulary that lists drugs or categories of drugs that may be ordered, selected, obtained or administered by Certified Registered Nurse Anesthetists authorized by the Board to order, select, obtain and administer drugs.
- 2. Develop and submit to the Board recommendations for practice-specific standards for ordering, selecting, obtaining and administering drugs for a Certified Registered Nurse Anesthetist authorized by the Board to order, select, obtain and administer drugs pursuant to the provisions of the *Oklahoma Nursing Practice Act*.

The CRNA Formulary Advisory Council is composed of five (5) members:

Appointed by the Oklahoma Association of Nurse Anesthetists

Victor Long, APRN-CRNA Bruce Kennedy, APRN-CRNA

Appointed by the Oklahoma Society of Anesthesiologists

Thomas Tinker, MD Lad Yates, MD

Appointed by the Oklahoma Pharmaceutical Association Mark St. Cyr, DPh

The Oklahoma Board of Nursing representative for CY 2019 was Jan Palovik, M.S., APRN-CNS. Board staff representatives were Gina Stafford, BSN, RN, and Jackye Ward, MSN, RN.

The annual meeting of the CRNA Formulary Advisory Council was held on April 22, 2019. The CRNA Council reviewed and made recommendations for revision to the *CRNA Inclusionary Formulary*, #P-50, which was subsequently approved by the Board.



Formulary Advisory Council

The purpose of the Formulary Advisory Council is to:

- 1. Develop and submit to the Board recommendations for an exclusionary formulary that shall list drugs or categories of drugs that shall not be prescribed by advanced practice nurses recognized to prescribe by the Oklahoma Board of Nursing.
- 2. Develop and submit to the Board recommendations for practice-specific prescriptive standards for each category of advanced practice nurse recognized to prescribe by the Oklahoma Board of Nursing pursuant to the provisions of the *Oklahoma Nursing Practice Act*.

The Formulary Advisory Council is composed of twelve (12) members:

Appointed by the Oklahoma Board of Nursing:

Susan Jones, PhD, APRN-CNS Leanna Harkess, MSN, APRN-CNM, APRN-CNP Deborah Booton-Hiser, PhD, APRN-CNP Robin Potter-Kimball, MSN, APRN-CNS

Appointed by the Oklahoma Pharmaceutical Association:

Jay Kinnard, DPh Tim Anderson, DPh Mary Jane Fry, Pharm.D Meri Hix, Pharm.D

Appointed by the Oklahoma State Medical Association:

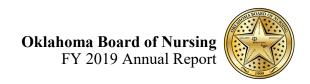
Harold Ginzburg, MD Edward Legako, MD Dana Stone, MD

Appointed by the Oklahoma Osteopathic Association:

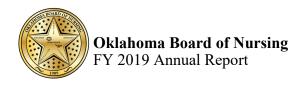
Appointment pending

Gina Stafford, BSN, RN, and Jackye Ward, MSN, RN, served as Board staff representatives.

The Formulary Advisory Council met on March 14, 2019 to review the *Exclusionary Formulary* for Advanced Practice Registered Nurses with Prescriptive Authority, #P-50B. Recommendations were made to the Board for revisions.



Peer Assistance Program



Introduction

The Peer Assistance Program was established in statutes November 1994 to rehabilitate nurses whose competency may be compromised because of the abuse of drugs or alcohol, so that such nurses can be treated and can return to or continue the practice of nursing in a manner which will benefit the public. The program shall be under the supervision and control of the Oklahoma Board of Nursing (59 O.S. § 567.17A). This approach allows the Board to retain control of nursing practice for the protection of the public, which is the mission of the Board.

The Program is administered by the Program Coordinator, a doctorate prepared Registered Nurse, who reports directly to the Executive Director of the Board. The Program employs two other Registered Nurses, one who is certified in Addictions nursing and one who is certified in Psychiatric nursing. These Registered Nurses serve as Case Managers. The Program also employs one Legal Secretary.

Program Policies and Guidelines

As a part of the Board's oversight, it approves the program guidelines and periodically reviews and revises those guidelines (OAC 485: 10-19-3(a)). In FY 2019, the Board reviewed or revised the following policies of the Program:

Peer Assistance Program Body Fluid Testing Guidelines, #PA-03

Peer Assistance Program Laboratory Approval Criteria for Body Fluid Testing, #PA-04

Medical Care/Medications Guidelines, #PA-12

Successful Completion of the Peer Assistance Program Guidelines, #PA-13

Peer Assistance Program Peer Assistance Committee Member Appointment Criteria, #PA-15

Return to Professional Nursing Practice Criteria, #PA-16

On November 1, 2011 (FY 2012) statutory changes were implemented regarding the licensure status of nurses entering the Program (59 O.S. § 567.17 K). Participation in the Program is no longer non-public. The license status of all nurses in the Program is now marked with Conditions-Peer Assistance during the term of participation. For those participating voluntarily, the conditions are non-disciplinary.

Peer Assistance Committees (PAC)

Peer Assistance Committees function under the authority of the Board in accordance to the Rules of the Board (59 O.S. § 567.17B). The committee members are appointed by the Board of Nursing for three-year terms (OAC 485:10-19-4(d)). They serve voluntarily without pay. The Board appointed or reappointed 5 committee members this year.

Julie Aldridge, RN Robin Brothers, PhD, RN Deborah Campbell, RN

Suzanne Cannon, MHR, LPC, LADC

Tim Castoe RN, CARN Terri Chapman, BSN, RN* Laura Clarkson, RN, CARN

L. Louise Drake, MHR, RN Cindy Lyons, MS, RN, CNE Patti Mason, MA, LADC

Dianna McGuire, MS, LADC, LPC, NCGCII

Charles McNear, MS, RN, PHN, CARN

Bill Mosher, LPC, LADC

Patty Gail Patten MS, LPC, LADC, LMFT

James Patterson, CADC, ICADC Pam Price-Hoskins, PhD, RN Doug Richardson, LADC

Becky Smith, MHR, RN, LADC* Sheila St. Cyr, MS, RN-BC

Heather Stranger, MSN, RN

Leah Trim, RN Frank Thompson, RN

*Denotes committee members who have served since the first year of the program.

During FY 2019, there were 22 individuals who served on committees. Each member averaged 32 hours in committee meetings (not including preparation time for the meeting). This is the equivalent of 4 days each of service work to the program.

There are currently 19 individuals still serving on seven Committees. Twelve of the current PAC members are licensed nurses, 8 are certified or licensed in addictions and 12 are recovering individuals. Board rules require that each PAC have at least one recovering individual, one individual with a certification in addictions and the majority to be licensed nurses (OAC 485:10 -19-4 (b).

PAC Activity

The Rules of the Oklahoma Board of Nursing define the PAC responsibilities as determining licensee's acceptance into the program, developing the contract for participation, determining progress, successful completion or termination for failure to comply and reporting all terminations to the Board. They meet with the participants on a regular basis to evaluate progress. (OAC 485: 10-19-4(c))

On a **monthly basis** this past fiscal year the PAC has averaged 3.6 meetings, volunteered an average of 59 hours, accepted 4.5 new applicants into the Program and met with an average of 46 nurses to review progress. The PAC reviewed progress with approximately 44% of the participants each month. Of those nurses reviewed each month, approximately 28% are being seen for noncompliance with their contract.

Activity	FY 2015	FY 2016	FY 2017	FY 2018	FY 2019	Variances 1 Year & 5 Year
PAC Meetings	49	52	42	45	44	↓ .02% & ↓ 10%
Scheduled Reviews	701	694	715	569	401	↓ 30% & ↓ 43%
Noncompliance Reviews	149	111	136	142	156	↑ 1 % & ↑ 5%
Total Reviews	850	805	851	711	557	↓ 22% & ↓ 34%
Volunteer Hours	1,157	1,047	790	818	704	↓ 14 % & ↓ 39%

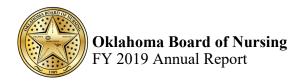
PAC Activity in Past Five Years

New Cases

Applicants to the program are screened by the program staff to ensure they meet eligibility requirements as set forth in the *Rules of the Oklahoma Board of Nursing* (OAC 485:10-19-5). Those who meet the requirements are scheduled for an entry appointment with the PAC at which time the PAC determines whether they meet the criteria for acceptance into the program.

New Cases in the Past Five (5) Years

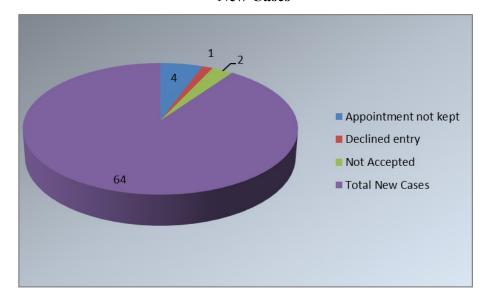
Of the 59 nurses initiating contact with the Program for participation and completing the application process, 91% (54 nurses) entered the Program, 5% (3 nurses) failed to keep their appointment with the PAC or withdrew the application, 3% (2 nurses) were not accepted into the Program by the PAC. An additional 15 nurses contacted the Program and were interviewed by staff but chose not to make application.



New Cases in the Past Five Years

Activity	FY 2015	FY 2016	FY 2017	FY 2018	FY 2019	Variances 1 Year & 5 Year
Entry Appointments Scheduled	100	89	95	59	64	↑ 8% & ↓ 36%
Entry Appointments Not Kept	5	7	3	3	4	↑ .3% & ↓ .2%
Entry Appointments Conducted	95	82	92	56	60	↓ 7% & ↓ 36%
Applicants Not Accepted	4	6	6	2	2	& ↓ 50%
Applicants Accepted	91	76	86	54	54	& ↓ 41%
Applicants Declining Contract	0	0	0	0	1	&
Total Entering Program	91	76	86	54	54	& ↓ 41%
Total New Cases	100	89	95	59	64	↑8% & ↓36%

New Cases



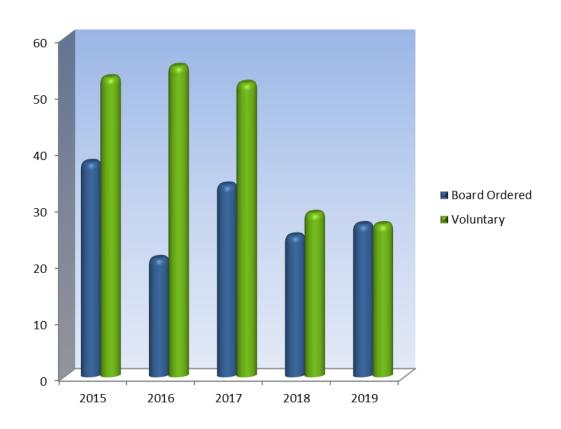
Participants

Nurses enter the program voluntarily either through direct application or referral from the Board of Nursing. The minimum length of participation in the program for successful completion is 24 months. The average length of participation for individuals successfully completing the program during FY 2019 was 33 months, which was 1 month shorter than FY 2018.

Termination from the program can occur any time after acceptance into the program. The average length of participation for individuals terminating from the program in FY 2019 was 11 months, the same average as in FY 2018. Ten (33%) of the 30 individuals terminated from the program were in the program 3 months or less. The majority (67%) of individuals terminated from the program had less than one year's participation and 47% were in for 6 months or less.

Nurses who leave the Program for any reason other than successful completion are reported to the Oklahoma Board of Nursing. By law, the Executive Director of the Board must suspend the license of the nurse who voluntarily entered the program with the case scheduled for a Board Hearing. Nurses who entered the program by an order of the Board and leave the program are disciplined as set forth in the order of the Board (59 O.S. § 567.17 I).

Participation by Type of Entry



Nurses Entering the Program with Board Action

Activity	FY 2015	FY 2016	FY 2017	FY 2018	FY 2019	5 Year Total	Variances 1 Year & 5 Year
Entering	38	21	34	28	27	148	↓ 4% & ↓ 29%
Participants on 6/30	73	55	59	54	51		↓ 5% & ↓ 30%
Participants Discharged	15	22	20	18	15	90	17% &
Participants Terminated	15	17	10	16	16	74	& ↑ .07%
Total Participation	103	94	88	88	82	215*	& ↓ 20%

^{(*5} year total participation equal number of participants on 6/30/2019 + discharges and terminations between 7/1/2015 - 6/30/2019)

Thirty-five percent of the 215 nurses participating in the program through Board action in the past 5 years have been terminated for noncompliance or withdrawn from the program without completing. Forty-two percent have been discharged for successful completion and twenty-three percent are still in the program.

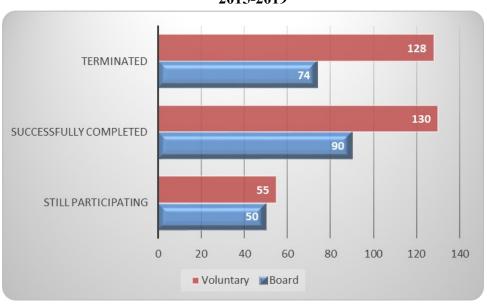
Nurses Entering the Program without Board Action

Activity	FY 2015	FY 2016	FY 2017	FY 2018	FY 2019	5 Year Total	Variances 1 Year & 5 Year
Entering	53	55	52	26	27	213	↑ 4% & ↓ 50%
Participants on 6/30	88	91	88	68	54		↓ 21% & ↓ 39%
Participants Discharged	32	22	27	23	26	130	↓ 13% & ↓ 19%
Participants Terminated	33	30	29	22	14	128	↓ 36% & ↓ 58%
Total Participation	153	143	144	113	94	312*	↓ 17% & ↓ 39%

(*5 year total participation equal number of participants on 6/30/2019 + discharges and terminations between 7/1/2015 - 6/30/2019)

Fifty- two percent of the nurses in the program this year entered without Board Action. In the last five years, nurses entering the program without Board Action have been in the majority. Forty-one percent of the 312 nurses participating in the program without Board Action in the last five years have been terminated for noncompliance or withdrawn from the program without completing. Forty-two percent of the 312 nurses participating without Board Action in the past five years have been discharged for successful completion. Eighteen percent are still in the program.

Outcomes by Type of Entry 2015-2019



All Nurses Entering the Program

Activity	FY 2015	FY 2016	FY 2017	FY 2018	FY 2019	5 Year Total	Variances 1 Year & 5 Year
Participants on 6/30	161	146	147	122	105	681	↓ 14% & ↓ 35%
Participants Discharged	47	44	47	41	41	220	& ↓ 13%
Participants Terminated	48	47	39	38	30	202	↓ 21% & ↓ 38%
Total Participants	256	237	233	201	176	527*	↓ 12% & ↓ 31%
Applicants not Entering	9	13	9	4	7	42	↑ 75% & ↓ 22%
**Total Cases	264	250	241	205	183	†569	↓ 11% & ↓ 31%

^{(*5} year total participation equal number of participants on 6/30/2019 + discharges and terminations between 7/1/2015 - 6/30/2019.

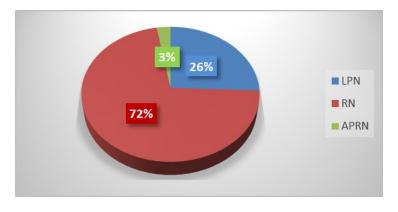
Nurses referred to the program through Board Action account for forty-one percent of the nurses participating the program in the last five (5) years, thirty-seven percent of those terminated from the program, and forty-one percent of those successfully completing.

Nurses referred to the program without Board Action account for fifty-nine percent of the nurses participating in the program in the past five (5) years, sixty-three percent of those terminated from the program, and fifty-nine percent of the nurses successfully completing the program in the last five years.

Participation by Licensure

Licensed nurses, including LPN, RN, and APRN, may be considered for participation in the program, provided they meet the eligibility requirements as set forth in the *Rules of the Oklahoma Board of Nursing* (OAC 485:10-19-5). Average participation by license level for the past five years is illustrated in the following chart.

Average Participation by Licensure



^{**}Total cases are the number of total participants in the program during the year plus the number who went through the application process and then did not sign a contract with the program.

† 5 year totals equal the 5 year total participants + 5 year total applicants not entering)

Participation by Gender

Summary of Male Participation FY 2015-FY 2019

Activity	FY 2015	FY 2016	FY 2017	FY 2018	FY 2019	5 Year Total	Variances 1 Year & 5 Year
Participants on 6/30	23	18	19	21	17	98	↓ 19% & ↓ 26%
Participants Discharged	11	7	8	4	7	37	↑ 75% & ↓ 36 %
Participants Terminated	9	7	4	4	7	31	↑ 75% & ↓ 22%
Total Participation	43	32	31	29	31	*85	↑ 7% & ↓ 28%

^{(*5} year total participation equal number of participants on 6/30/2019 + discharges and terminations between 7/1/2015 - 6/30/2019)

Males comprised sixteen percent of participants in the program during the past five years. They account for seventeen percent of the nurses discharged for successful completion and fifteen percent of those terminated from the program.

Summary of Female Participation FY 2015–FY 2019

Activity	FY 2015	FY 2016	FY 2017	FY 2018	FY 2019	5 Year Total	Variances 1 Year & 5 Year
Participants on 6/30	138	128	129	101	88	584	↓ 13% & ↓ 36%
Participants Discharged	36	37	39	37	34	183	↓ 8% & ↓ 6%
Participants Terminated	39	40	35	34	23	171	↓ 32% & ↓ 41%
Total Participation	213	205	203	172	145	*442	↓ 16% & ↓ 32%

^{(*5} year total participation equal number of participants on 6/30/2019 + discharges and terminations between 7/1/2015 - 6/30/2019)

Females comprised eighty-four percent of the nurses participating in the program during the past five years. Eighty-three percent of nurses successfully completing the program were female. Eighty-five percent of the nurses terminated from the program were female.

Relapse Rates

Relapse is defined as unauthorized use of mind-altering, intoxicating, potentially addictive drugs after a period of sustained abstinence. During FY 2019, the total relapse rate was 6%, compared to 4% in FY 2018.

Office Activity

Office Activity by Type

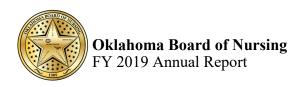
Activity	FY 2015	FY 2016	FY 2017	FY 2018	FY 2019	Variances 1 Year & 5 Year
Reports Monitored	5,870	5,635	5,270	5,265	4,172	↓ 21% & ↓ 29%
Educational Presentations	5	3	5	7	9	↑ 29% & ↑ 80%
Applicant Interviews	147	144	136	73	74	↑ 1% & ↓ 50%
Average Time From Application to Entry	6	5.4	6.2	7 days	6 days	↓ 14% &
Average Time to Address	5	4.4	2.5	.21	< 1 day	& ↓ 80%
Average Time to Remove from Nursing Practice when Relapse is Identified	1 day	1 day	1 day	<1 day	< 1 day	&

Thirty-seven percent of the participants in the program at the end of the fiscal year had been in for less than one year. Participants in the first year of participation require more intensive monitoring as this is when there is the greatest of risk of relapse. The Program actively monitored an average of 117 nurses each month of FY 2019.

The time from application to the program and the time the PAC approves a contract with actively licensed nurses has consistently been less than 9 days for the past five (5) years. This is a key performance measure identified in the Strategic Plan of the Board of Nursing. In FY 2016, this performance measure was lowered to 8 days and the Program continues to exceed the performance measure. When nurses sign contracts with the PAC, they agree to cease nursing practice. Quick entry into the program supports the Board's mission to safeguard the public as the program is able to remove nurses from practice who may be impaired due to substance use and place Peer conditions on their nursing license.

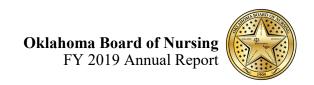
Addressing noncompliance quickly is an additional safeguard. Noncompliance with the contract may indicate a safety issue with the nursing practice of the individual and be a signal of relapse. For FY 2019, it took an average of <1 day for the program to address noncompliance issues, exceeding the performance measure. The trending decrease in time to address noncompliance with the contract is attributable to the advances in the Program's electronic monitoring software, specifically, push technology and e-communication. The program directs nurses with identified safety issues, relapse behaviors and/or identified relapse to cease nursing practice within one day of identification.

Nurses who voluntarily enter the program do not require a Board hearing, thus utilizing fewer resources within the Agency. This year 95 (54%) of the 176 nurses who participated in the program entered voluntarily. This supports the Board's goal to operate efficiently and effectively.

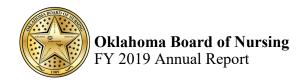


Office Activity Per Participant

Average Activity Per Participant Per Year	FY 2015	FY 2016	FY 2017	FY 2018	FY 2019	5-Year Average
Reports	23	24	27	26	24	26
PAC Reviews	3	3	3	3	2.7	3



Investigative Division



Introduction

The Investigative Division conducts investigations for allegations of violations of the Nursing Practice Act. The work is accomplished through a priority system and performed by objective fact finding during the investigative process. Evidence is presented during Board hearings by investigative staff. The Division is responsible for monitoring compliance to Board Orders and reporting Board actions to Federal databanks. The Investigative Division is comprised of six Nurse Investigators and three legal secretaries.

The Oklahoma Nursing Practice Act (ONPA) gives the Oklahoma Board of Nursing (Board) the power to: 1) deny, suspend, or revoke any licensure to practice as an Advanced Practice Registered Nurse, Registered Nurse single-state or multistate, or Licensed Practical Nurse, single-state or multistate, or certification as an Advanced Unlicensed Assistant or authorization for prescriptive authority or authority to order, select, obtain and administer drugs; 2) assess administrative penalties; and 3) otherwise discipline applicants, licensees or Advanced Unlicensed Assistants. The Act further states the Board shall impose a disciplinary action pursuant to the above upon proof that the person:

- 1. Is guilty of deceit or material misrepresentation in procuring or attempting to procure:
 - a. a license to practice registered nursing, licensed practical nursing, and/or a license to practice advanced practice registered nursing with or without either prescriptive authority recognition or authorization to order, select, obtain and administer drugs, or
 - b. certification as an Advanced Unlicensed Assistant;
- 2. Is guilty of a felony, or any offense reasonably related to the qualifications, functions or duties of any licensee or Advanced Unlicensed Assistant, or any offense an essential element of which is fraud, dishonesty, or an act of violence, or for any offense involving moral turpitude, whether or not sentence is imposed, or any conduct resulting in the revocation of a deferred or suspended sentence or probation imposed pursuant to such conviction;
- 3. Fails to adequately care for patients or to conform to the minimum standards of acceptable nursing or Advanced Unlicensed Assistant practice that, in the opinion of the Board, unnecessarily exposes a patient or other person to risk of harm;
- 4. Is intemperate in the use of alcohol or drugs, which use the Board determines endangers or could endanger patients;
- 5. Exhibits through a pattern of practice or other behavior actual or potential inability to practice nursing with sufficient knowledge or reasonable skills and safety due to impairment caused by illness, use of alcohol, drugs, chemicals or any other substance, or as a result of any mental or physical condition, including deterioration through the aging process or loss of motor skills, mental illness, or disability that results in inability to practice with reasonable judgment, skill or safety; provided, however, the provisions of this paragraph shall not be utilized in a manner that conflicts with the provisions of the Americans with Disabilities Act;
- 6. Has been adjudicated as mentally incompetent, mentally ill, chemically dependent or dangerous to the public or has been committed by a court of competent jurisdiction, within or without this state;
- 7. Is guilty of unprofessional conduct as defined in the rules of the Board;
- 8. Is guilty of any act that jeopardizes a patient's life, health or safety as defined in the rules of the Board;
- 9. Violated a rule promulgated by the Board, an order of the Board, or a state or federal law relating to the practice of registered, practical or advanced practice registered nursing or advanced unlicensed assisting, or a state or federal narcotics or controlled dangerous substance law including, but not limited to prescribing, dispensing or administering opioid drugs in excess of the maximum limits authorized in Section 2-309I of Title 63 of the Oklahoma Statutes:

- 10. Has had disciplinary actions taken against the individual's registered or practical nursing license, advanced unlicensed assistive certification, or any professional or occupational license, registration or certification in this or any state, territory or country;
- 11. Has defaulted and/or been terminated from the Peer Assistance Program for any reason;
- 12. Fails to maintain professional boundaries with patients, as defined in the Board rules; and/or
- 13. Engages in sexual misconduct, as defined in Board rules, with a current or former patient or key party, inside or outside the health care setting

Investigation and Disciplinary Process

The number of ONPA alleged violations reported to the Board during FY 2019 that resulted in opened cases for investigation decreased seventeen percent (17%) compared to FY 2018. The number of alleged violations received against licensees/applicants represents 0.58% of the total licensee/applicant population regulated by the Board. Board staff, legal counsel, and/or other governmental agencies complete investigations of alleged violations reported to the Board. During any investigation, the staff emphasizes the Board's commitment to the due process afforded each individual under the provisions of the ONPA and the Administrative Procedures Act as well as the Board's legislative mandate to safeguard the public's health, safety, and welfare.

Investigative Cases Opened

Categories of data compiled about opened investigative cases include the Classification of Licensure/Certification/Applicant, Type of Case, and Location of Case.

Number/Percent of Licensees/Applicants with Cases That Were Opened During FY 2019 Compared to Total Regulated Population

Classification	*Number of Licensees/Applicants with Cases Opened	Number of Licensees Regulated or Applications Received	Percentage of Licensees Regulated or Applications Received with Cases Opened
RN	199	49,641	0.40
LPN	139	16,901	0.82
APRN	30	4,494	0.67
AUA	2	527	0.38
NCLEX-RN	30	2,459	1.22
RN Endorsement	19	1,524	1.25
NCLEX-LPN	39	1,653	2.36
LPN Endorsement	7	199	3.52
Other			
Total	450	77,398	0.58

^{*}Number reflects the number of individuals with cases opened, not the number of cases opened in subsequent tables as 1 individual could have more than one alleged violation reported to the Board during the course of the fiscal year.

Type of Cases Opened

FY 2019	Drug	Nursing Practice	Abuse/ Neglect	Felony	of Order	*Other	ment Return to Active	PAP Related	Lapsed License	Deceit	Total
Number	92	96	7	32	0	137	36	12	4	49	465
Percentage	19%	21%	1%	7%	0%	29%	8%	3%	1%	11%	100%

^{*}Other types of administrative procedure cases were: hearing on temporary suspensions, request to amend, request to terminate probation, request for inactive status, voluntary surrender or court order surrender of license, misdemeanor, reappear before the Board as ordered, peer assistance related, request for reconsideration of Board decision, lawsuit, renewal application, etc.

Location of Cases Opened

FY 2019	Hospital	Nursing Home	Home Health	*Other Nursing	**Other Non-Nursing	Total
Number	90	100	21	55	199	465
Percentage	19%	21%	5%	12%	43%	100%

^{*}Other nursing settings are physician's office, clinic, hospice, state correction facility, etc.

Types of Cases Opened in Clinical Settings in FY 2019

Type	Hospital	Nursing Home	Home Health	Other Nursing
Drug	50	22	4	16
Nursing Practice	26	43	4	23
Abuse/Neglect	2	2	1	2
Worked Lapsed License	0	2	0	2
Other	12	31	12	211
Total	90	100	21	254

Resolution and Closure of Investigative Cases

Investigative cases are resolved when the Board takes action on the case through Formal Hearings or Informal Disposition Panel Conferences. Investigative cases are closed when Board staff closes a case for no violation of the ONPA, for insufficient evidence, etc. During FY 2019, 45% of the cases were resolved/closed within six months.

^{**} Other non-nursing settings are felonies, reinstatements, probation violations, etc.

FY 2019 Resolution/Closure Based on Length of Time Opened

Board Resolved	Total	Board Staff Closed	Total	Grand Total
Within 6 months	103	Within 6 months	141	244
After 6 months	145	After 6 months	159	304
Totals	248	Totals	300	548

Reasons for Closure by Board Staff

FY 2019	Insufficient Evidence	No Violation	*Other	Total
Total	80	8	212	300
Percentage	27%	3%	70%	100%

^{*}Other reasons for closure of open cases are: no jurisdiction, lapsed license, on advice of legal counsel, resolution of court case, appropriate action by employer, self-referrals to the Peer Assistance Program, etc.

Formal Hearings and Informal Disposition Panel (IDP) Conferences are conducted bi-monthly to resolve open investigative cases. The Board experienced a 25% decrease in the total number of hearings in Fiscal Year 2019 compared to Fiscal Year 2018.

Total Number of Informal Disposition Conferences and Formal Hearings

Fiscal Year	Total Number of Informal Disposition Cases	Total Number of Formal Hearings (Full Board)	Total Hearings	
2018	238	92	330	
2019	156	92	248	
Variance	↓ 34%	0%	↓ 25%	

During the 2015 legislative session, Corrective Actions for violations of the Nursing Practice Act and/or Rules was added to the Nursing Practice Act. Emergency rules for implementation of Corrective Actions were approved by the Governor on October 26, 2015 allowing the Board to implement Corrective Actions on the November 1, 2015 effective date. During FY 2019, fifty-five (55) Corrective Action Orders were issued.

Also during the 2015 legislative session, the Nursing Practice Act was amended granting authority to the Executive Director to accept identified Agreed Disciplinary Orders on behalf of the Board. The law became effective November 1, 2015. The following table indicates the type and number of Agreed Disciplinary Orders issued by the Executive Director during FY 2019.



Agreed Disciplinary Orders Accepted by Executive Director on Behalf of Board

Type of Executive Director Order	Number of Executive Director Orders
Agreed entry into the Peer Assistance Program disciplinary orders	30
Agreed reinstatement/endorsement disciplinary orders when the applicant has practiced without an active Oklahoma license/certificate/recognition	1
Agreed disciplinary orders for the voluntary surrender of a license/certification/recognition	11

The Board takes actions on open cases involving licensees or applicants in order to protect the health, safety, and welfare of the public. Those actions include denying licensure/certification (for example upon renewal, application for endorsement, application for licensure/certification by examination), revoking, suspending or otherwise disciplining a licensee or an advanced unlicensed assistive person. The number and rate of nurses disciplined in FY 2019 by type of licensure is shown below.

Rate and Number of Individuals Disciplined in FY 2019 by Type of License

Туре	Total Number Disciplined	Total Number of Licensees	Rate of Nurses Disciplined
All Nurses	245	71,036	0.3%
RNs	127	49,641	0.3%
LPNs	108	16,901	0.6%
APRNs (licensure & prescriptive authority recognition)	10	4,494	0.2%

Nurse Population Data

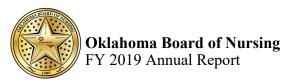
The nurse population report (APRN, RN and LPN) in Oklahoma for FY 2019 is compiled from information provided by licensees at the time of licensure or renewal of licensure through June 30, 2019, for Advanced Practice Registered Nurses, Registered Nurses and Licensed Practical Nurses.

The summary shows the current fiscal year (2019) and the data for the preceding four years.

Questions or comments regarding this information should be directed to the Executive Director of the Oklahoma Board of Nursing.

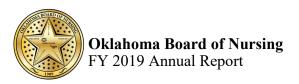
Licensure Count by Type for FY 2019						
RNs	49,641					
LPNs	16,901					
APRNs	4,494					
Prescriptive Authority	3,646					
AUAs	527					
Nursing Education Programs	59					
AUA Education Programs	8					
Total Records	186,660					

Summary Report										
	2019 1	Report	2018 Report		2017 Report		2016 Report		2015 Report	
	RN	LPN	RN	LPN	RN	LPN	RN	LPN	RN	LPN
Residing in Oklahoma										
Employed	38,306	13,693	37,335	13,377	36,427	13,367	35,614	13,269	34,523	13,200
Not Employed in Nursing	3,176	1,377	3,780	1,350	3,642	1,407	3,709	1,534	3,573	1,963
Employment Status Unknown	3,181	1,047	4,024	2,784	4,294	2,208	3,783	2,860	4,867	2,297
Total	44,663	16,117	45,139	17,511	44,363	16,982	43,106	17,663	42,963	17,460
Residing out of State										
Employed	3,566	551	5,815	702	7,079	717	6,551	737	5,716	702
Not Employed in Nursing	317	114	508	164	582	168	554	170	544	204
Employment Status Unknown	1,095	119	4,926	494	4,466	514	3,482	601	3,739	500
Total	4,978	784	11,249	1,360	12,127	1,399	10,587	1,508	9,999	1,406
Grand Total	49,641	16,901	56,388	18,871	56,490	18,381	53,693	19,171	52,962	18,866



Advanced Practice Registered Nurses by County–FY 2019						
County	CNP	CNM	CRNA	CNS	Total	
Adair	6	0	0	0	6	
Alfalfa	2	0	0	0	2	
Atoka	5	0	0	0	5	
Beaver	4	0	0	0	4	
Beckham	17	1	3	0	21	
Blaine	4	0	0	0	4	
Bryan	39	0	2	0	41	
Caddo	9	0	0	1	10	
Canadian	175	0	11	18	204	
Carter	32	0	11	1	44	
Cherokee	48	9	9	1	67	
Choctaw	3	0	0	0	3	
Cimarron	1	0	0	0	1	
Cleveland	196	2	34	27	259	
Coal	1	0	0	0	1	
Comanche	54	0	14	4	72	
Craig	11	0	0	1	12	
Creek	31	0	5	4	40	
Custer	19	1	3	1	24	
Delaware	22	0	5	0	27	
Dewey	2	0	0	1	3	
Ellis	1	0	0	0	1	
Garfield	21	0	9	4	34	
Garvin	20	0	0	0	20	
Grady	32	0	3	2	37	
Grant	2	0	0	0	2	
Greer	2	0	0	0	2	
Harmon	1	0	0	0	1	
Harper	1	0	0	0	1	
Haskell	14	1	1	0	16	
Hughes	13	0	1	0	14	
Jackson	18	0	6	1	25	
Jefferson	3	0	0	0	3	
Johnston	4	0	0	1	5	
Kay	12	1	5	1	19	
Kingfisher	17	0	1	3	21	
Kiowa	4	0	0	0	4	
Latimer	5	1	0	0	6	
Leflore	37	0	4	1	42	

Advanced Practice Registered Nurses by County–FY 2019							
County	CNP	CNM	CRNA	CNS	Total		
Lincoln	23	0	1	3	27		
Logan	12	0	2	3	17		
Love	7	1	0	0	8		
Major	5	0	1	0	6		
Marshall	5	0	1	0	6		
Mayes	15	0	3	1	19		
McClain	54	0	8	8	70		
McCurtain	21	0	1	1	23		
McIntosh	16	0	1	0	17		
Murray	5	0	0	0	5		
Muskogee	47	0	5	5	57		
Noble	6	0	0	1	7		
Nowata	6	0	0	0	6		
Okfuskee	6	0	0	0	6		
Oklahoma	756	11	141	73	981		
Okmulgee	19	0	4	2	25		
Osage	12	0	1	0	13		
Ottawa	19	0	2	0	21		
Out of State	525	5	221	12	763		
Pawnee	5	0	1	0	6		
Payne	47	1	3	2	53		
Pittsburg	33	0	5	2	40		
Pontotoc	44	9	3	2	58		
Pottawatomie	41	0	7	5	53		
Pushmataha	6	0	0	0	6		
Roger Mills	3	0	0	0	3		
Rogers	56	5	8	2	71		
Seminole	12	0	0	2	14		
Sequoyah	18	0	0	2	20		
Stephens	25	2	6	1	34		
Texas	4	2	0	0	6		
Tillman	3	0	0	0	3		
Tulsa	603	11	164	82	860		
Wagoner	20	0	3	1	24		
Washington	32	1	3	4	40		
Washita	3	0	0	0	3		
Woods	5	0	0	0	5		
Woodward	11	0	3	1	15		
Total	3,418	64	725	287	4,494		



Advanced Practice Registered Nurses with Prescriptive Authority by County–FY 2019						
County	CNP Rx	CNM Rx	CRNA Rx	CNS Rx	Total Rx	
Adair	5	0	0	0	5	
Alfalfa	2	0	0	0	2	
Atoka	5	0	0	0	5	
Beaver	4	0	0	0	4	
Beckham	14	1	3	0	18	
Blaine	4	0	0	0	4	
Bryan	38	0	2	0	40	
Caddo	9	0	0	1	10	
Canadian	159	0	10	11	180	
Carter	27	0	11	1	39	
Cherokee	43	8	8	1	60	
Choctaw	3	0	0	0	3	
Cimarron	1	0	0	0	1	
Cleveland	171	2	33	21	227	
Coal	1	0	0	0	1	
Comanche	49	0	10	0	59	
Craig	10	0	0	1	11	
Creek	28	0	4	3	35	
Custer	18	1	3	0	22	
Delaware	21	0	5	0	26	
Dewey	1	0	0	0	1	
Ellis	1	0	0	0	1	
Garfield	19	0	4	3	26	
Garvin	17	0	0	0	17	
Grady	28	0	3	2	33	
Grant	2	0	0	0	2	
Greer	2	0	0	0	2	
Harmon	1	0	0	0	1	
Harper	1	0	0	0	1	
Haskell	13	1	0	0	14	
Hughes	13	0	1	0	14	
Jackson	17	0	6	1	24	
Jefferson	3	0	0	0	3	
Johnston	4	0	0	1	5	
Kay	11	1	5	0	17	
Kingfisher	16	0	0	3	19	
Kiowa	4	0	0	0	4	
Latimer	5	1	0	0	6	
Leflore	33	0	2	1	36	
Lincoln	22	0	1	2	25	

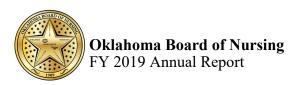
Advanced Practice Registered Nurses with Prescriptive Authority						
			–FY 2019	1		
County	CNP Rx	CNM Rx	CRNA Rx	CNS Rx	Total Rx	
Logan	11	0	2	3	16	
Love	7	0	0	0	7	
Major	5	0	0	0	5	
Marshall	5	0	1	0	6	
Mayes	14	0	1	1	16	
McClain	49	0	7	5	61	
McCurtain	17	0	1	0	18	
McIntosh	13	0	1	0	14	
Murray	5	0	0	0	5	
Muskogee	44	0	3	4	51	
Noble	5	0	0	1	6	
Nowata	5	0	0	0	5	
Okfuskee	6	0	0	0	6	
Oklahoma	681	9	123	53	866	
Okmulgee	19	0	3	2	24	
Osage	10	0	0	0	10	
Ottawa	18	0	2	0	20	
Out of State	258	3	103	2	366	
Pawnee	5	0	1	0	6	
Payne	40	1	3	1	45	
Pittsburg	33	0	5	2	40	
Pontotoc	41	9	3	1	54	
Pottawatomie	38	0	7	3	48	
Pushmataha	6	0	0	0	6	
Roger Mills	3	0	0	0	3	
Rogers	47	2	7	2	58	
Seminole	12	0	0	2	14	
Sequoyah	17	0	0	1	18	
Stephens	23	1	6	0	30	
Texas	3	1	0	0	4	
Tillman	3	0	0	0	3	
Tulsa	548	9	110	62	729	
Wagoner	20	0	2	1	23	
Washington	31	1	2	4	38	
Washita	3	0	0	0	3	
Woods	5	0	0	0	5	
Woodward	11	0	3	0	14	
Total	2,886	51	507	202	3,646	

	Total	96	33	103	33	170	58	375	149	2,241	499	434	104	7	2,345	42	781	28	200	564	223	259	27	24	563	217	459	54
	Corr. Facility	0	1	2	0	4	1	0	3	14	0	0	0	0	11	2	9	0	2	1	5	2	0	0	0	1	1	0
	Public Health	5	0	3	1	8	2	6	7	38	9	∞	4	0	34	1	12	0	10	13	9	5	0	0	11	4	~	3
	Ins./ Utiliz. Review	1	0	0	0	0	0	ю	1	27	1	1	1	0	21	0	1	0	0	13	0	2	0	0	0	8	2	0
	Policy/ Reg. Agency	0	0	1	0	0	0	0	0	7	1	0	1	0	∞	0	2	0	0	1	1	1	0	0	1	0	1	0
	Other	13	2	9	-	21	9	37	18	174	20	36	∞	_	204	_	63	S	27	36	25	30	4	_	28	25	30	5
lahoma	Case Mgmt.	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Registered Nurses Residing and Licensed in Oklahoma by County and Field of Employment-FY 2019	Private Practice	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0
and Lice	Amb. Care	12	0	9	2	5	2	21	6	132	45	37	3	0	186	\mathfrak{C}	72	-	17	30	10	29	2	-	46	12	76	-
Residing eld of En	Occup. Health	2	0	0	0	0	0	2	1	∞	2	0	0	0	14	1	4	0	1	2	1	3	0	0	1	2	2	0
Nurses I ty and Fi	School Health	2	1	1	1	3	7	7	1	20	4	4	2	0	15	0	4	0	1	11	3	5	0	0	7	0	4	2
egistered by Coun	Comm./ Health	33	2	1	5	4	33	16	∞	45	14	16	9	0	48	n	13	1	7	17	7	11	0	-	10	10	8	3
2	Home Health	∞	0	20	2	19	7	54	19	102	89	32	31	1	133	5	48	0	21	26	20	24	0	3	37	24	44	1
	Academic Setting	3	2	2	2	4	2	13	2	54	8	9	5	0	62	2	21	33	7	9	12	4	\mathfrak{S}	0	15	5	10	0
	Long- Term/ Extended	1	9	3	7	15	5	19	4	77	48	20	4	0	85	4	22	1	11	25	18	16	4	4	32	17	22	9
	Hospital	46	19	28	12	92	28	193	92	1,543	252	274	39	5	1,524	20	513	17	96	382	115	127	14	14	345	114	301	33
	County	Adair	Alfalfa	Atoka	Beaver	Beckham	Blaine	Bryan	Caddo	Canadian	Carter	Cherokee	Choctaw	Cimarron	Cleveland	Coal	Comanche	Cotton	Craig	Creek	Custer	Delaware	Dewey	Ellis	Garfield	Garvin	Grady	Grant

	Total	28	11	28	121	78	217	31	109	328	176	89	62	366	252	310	57	73	66	351	663	226	188	133	759	104	73	84
	Corr. Facility	0	0	2	0	5	2	0	0	0	1	0	0	4	1	2	0	1	0	0	5	0	0	0	α	0	0	2
	Public Health	-	0	2	3	33	5	-	1	∞	4	2	1	11	8	6	2	33	5	6	13	7	∞	2	14	2	0	3
	Ins./ Utiliz. Review	0	0	0	0	0	1	0	0	1	1	0	0	4	0	9	0	1	0	1	9	0	0	0	9	1	0	0
	Policy/ Reg. Agency	0	0	0	0	0	0	-	0	0	1	0	0	0	1	0	0	33	0	0	1	0	0	0	1	0	0	0
	Other	-	7	7	16	7	70	7	6	43	16	7	6	48	35	32	7	9	9	33	71	24	70	10	55	7	9	9
slahoma 019	Case Mgmt.	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Registered Nurses Residing and Licensed in Oklahoma by County and Field of Employment-FY 2019	Private Practice	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
and Lice Employ	Amb. Care	1	2	0	∞	∞	14	0	9	10	13	7	3	16	19	21	∞	33	∞	53	31	11	10	9	55	12	7	3
Residing Field of	Occup. Health	0	0	0	1	1	1	0	1	2	2	0	0	2	2	1	0	0	1	1	2	1	0	1	0	0	0	0
1 Nurses unty and	School Health	0	0	0	0	-	2	0	0	33	2	-	1	6	2	2	2	2	0	∞	4	4	-	-	9	1	2	_
Registered by Co	Comm./ Health	2	0	1	4	5	6	0	2	∞	2	2	1	13	6	11	2	33	κ	11	∞	16	∞	1	24	2	0	1
H	Home Health	10	2	n	31	7	20	4	24	30	10	10	21	54	26	10	4	0	21	32	50	64	30	23	58	∞	9	7
	Academic Setting	0	0	0	2	4	6	0	3	6	9	2	2	13	4	5	1	1	ю	11	17	5	4	8	12	2	1	4
	Long- Term/ Extended	-	1	4	2	α	10	2	11	33	6	7	4	26	10	18	з	14	14	21	27	10	14	13	55	10	4	13
	Hospital	12	4	14	54	34	124	21	52	181	109	35	37	166	135	193	28	36	38	195	428	84	93	73	470	59	47	44
	County	Greer	Harmon	Harper	Haskell	Hughes	Jackson	Jefferson	Johnston	Kay	Kingfisher	Kiowa	Latimer	Leflore	Lincoln	Logan	Love	Major	Marshall	Mayes	McClain	McCurtain	McIntosh	Murray	Muskogee	Noble	Nowata	Okfuskee

	Total	9,204	286	98	359	117	505	370	397	638	100	15	877	184	222	309	65	38	7,760	336	420	73	65	84	969	38,306
	Corr. Facility	34	4	2	4	0	3	6	2	5	1	0	1	4	0	1	0	4	10	1	2	2	2	0		175
	Public Health	100	5	8	7	0	6	14	9	14		0	13	5	6	2	1	2	89	4	6	4	0	2		601
	Ins./ Utiliz. Review	108	2	0	0	1	0	1	_	2	0	0	14	0	3	0	0	0	108	8	9	0		0		358
	Policy/ Reg. Agency	25	1	0	0	0	1	-	ю	4	0	0	1	0	0	0	0	0	7	0	0	1	0	0		77
	Other	825	22	10	38	9	57	38	29	63	11	4	09	18	27	28	10	4	989	38	45	7	2	∞		3,368
Oklahoma 2019	Case Mgmt.	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0
Registered Nurses Residing and Licensed in Oklahoma by County and Field of Employment-FY 2019	Private Practice	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		2
ng and Li	Amb. Care	629	22	6	31	7	43	19	34	40	5	0	48	14	22	20	3	1	290	36	32	2	2	2		2,662
s Residin nd Field o	Occup. Health	50	0	1	2	0	5	3	0	-	0	0	4	3	0	0	0	0	40	0	6	0	0	0		183
red Nurse County ar	School Health	78	5	1	3	1	5	4	3	12	1	0	13	2	7	9	2	0	117	1	4	1	1	0		422
Register by (Comm./ Health	164	13	9	18	2	20	21	11	24	7	0	13	5	~	7	5	3	191	9	15	1	5	5		096
	Home	391	27	∞	23	7	38	49	29	55	17	0	45	33	43	37	5	4	331	25	25	6	4	2		2,521
	Academic Setting	219	5	-	6	2	13	6	12	29	1	0	16	4	~	6	0	-	163	4	12	3	4	3		903
	Long- Term/ Extended	251	21	5	32	12	19	25	8	36	11	1	38	12	12	25	7	9	210	16	15	11	15	5		1,608
	Hospital	6,300	159	40	192	79	292	177	259	350	45	10	611	84	83	171	32	13	5,289	202	246	32	29	57		23,770
	County	Oklahoma	Okmulgee	Osage	Ottawa	Pawnee	Payne	Pittsburg	Pontotoc	Pottawatomie	Pushmataha	Roger Mills	Rogers	Seminole	Sequoyah	Stephens	Texas	Tillman	Tulsa	Wagoner	Washington	Washita	Woods	Woodward	Unknown	Total

							1909
		by (ed Nurses Age–FY 20	019		
County	20-29	30-39	40-49	50-59	60 Plus	Unknown	Total
Adair	11	23	34	19	22	0	109
Alfalfa	3	14	7	13	10	0	47
Atoka	16	30	46	17	21	0	130
Beaver	2	5	13	5	15	0	40
Beckham	17	74	41	37	36	0	205
Blaine	3	13	15	19	14	0	64
Bryan	41	118	133	64	81	0	437
Caddo	11	30	51	50	32	0	174
Canadian	297	786	632	416	392	0	2,523
Carter	54	140	133	121	119	0	567
Cherokee	42	110	138	98	110	0	498
Choctaw	7	19	39	21	35	0	121
Cimarron	0	1	4	1	2	0	8
Cleveland	281	748	596	541	535	0	2,701
Coal	5	8	18	15	5	0	51
Comanche	103	251	216	176	169	0	915
Cotton	4	7	12	10	5	0	38
Craig	17	56	55	45	52	0	225
Creek	73	147	150	131	135	0	636
Custer	30	82	56	44	57	0	269
Delaware	30	70	64	76	67	0	307
Dewey	8	7	4	10	9	0	38
Ellis	2	5	6	3	11	0	27
Garfield	65	160	138	138	158	0	659
Garvin	17	46	69	56	62	0	250
Grady	30	129	149	118	88	0	514
Grant	8	15	14	9	15	0	61
Greer	2	8	9	8	8	0	35
Harmon	0	1	2	5	3	0	11
Harper	2	7	11	7	6	0	33
Haskell	12	25	41	26	31	0	135
Hughes	6	20	24	16	28	0	94
Jackson	35	71	62	49	45	0	262
Jefferson	1	9	14	7	5	0	36
Johnston	14	30	29	29	24	0	126
Kay	40	84	91	79	103	0	397
Kingfisher	21	57	44	39	42	0	203
Kiowa	9	17	16	22	14	0	78
Latimer	11	17	34	17	22	0	101
Leflore	31	86	138	92	99	0	446



		by C	Registered		19		
County	20-29	30-39	40-49	50-59	60 Plus	Unknown	Total
Lincoln	29	67	68	75	60	0	299
Logan	30	87	79	61	82	0	339
Love	5	15	11	14	17	0	62
McClain	72	197	228	136	111	0	744
McCurtain	35	63	64	70	44	0	276
McIntosh	15	32	56	49	61	0	213
Major	2	20	19	20	22	0	83
Marshall	6	21	32	31	33	0	123
Mayes	25	93	105	90	79	0	392
Murray	12	38	46	26	36	0	158
Muskogee	71	178	222	202	199	0	872
Noble	10	28	29	29	17	0	113
Nowata	11	18	20	27	13	0	89
Okfuskee	7	16	26	23	19	0	91
Oklahoma	1,385	2,940	2,374	1,977	2,213	0	10,889
Okmulgee	36	85	72	67	69	0	329
Osage	9	27	16	24	31	0	107
Ottawa	38	87	100	108	92	0	425
Pawnee	15	30	17	36	32	0	130
Payne	56	142	156	120	108	0	582
Pittsburg	41	98	101	98	104	0	442
Pontotoc	57	112	90	92	103	0	454
Pottawatomie	68	149	176	177	166	0	736
Pushmataha	14	21	26	23	30	0	114
Roger Mills	2	4	3	5	7	0	21
Rogers	121	236	233	220	201	0	1,011
Seminole	19	39	56	42	56	0	212
Sequoyah	24	53	87	62	65	0	291
Stephens	33	100	83	69	71	0	356
Texas	14	21	21	13	10	0	79
Tillman	5	9	15	11	9	0	49
Tulsa	1,086	2,481	2,002	1,598	1,894	0	9,061
Wagoner	38	98	105	81	74	0	396
Washington	58	127	97	102	103	0	487
Washita	9	18	17	19	24	0	87
Woods	12	20	17	17	16	0	82
Woodward	11	38	24	11	20	0	104
Unknown	357	159	79	52	23	0	794
Total	5,199	11,493	10,320	8,526	9,001	0	44,663

		esiding and ployment a		Oklahoma 2019		
Employment	20-29	30-39	40-49	50-59	60 Plus	Total
Hospital	3,031	7,191	5,708	4,540	3,452	23,922
Long Term/Extended Care	49	263	369	389	551	1,621
Academic Setting	8	149	190	235	344	926
Home Health	100	546	742	549	604	2,541
Community Health	23	195	278	228	259	983
School Health	10	62	126	106	128	432
Occupational Health	2	24	40	41	79	186
Ambulatory Care Setting	75	615	717	664	602	2,673
Other	114	780	983	813	991	3,681
Private Practice	0	0	2	0	0	2
Case Management	1	0	0	0	0	1
Policy or Regulatory Agency	0	6	15	23	36	80
Insurance/Utilization Review	1	38	95	109	120	363
Public Health	23	126	173	149	142	613
Correctional Facility	5	27	44	55	47	178
Unknown	0	2	0	0	0	104
Total	3,442	10,024	9,482	7,901	7,355	38,306

Registered Nurses Residing and Licensed in Oklahoma by Field of Employment and Hours–FY 2019

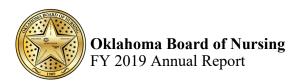
Employment	Full-Time 35+ Hours	Part-Time 1-19 Hours	Part-Time 20-34 Hours	Total
Hospital	20,733	793	2,256	23,922
Long Term/Extended Care	1,322	117	168	1,621
Academic Setting	716	96	92	926
Home Health	2,130	157	237	2,541
Community Health	784	91	87	983
School Health	341	43	39	432
Occupational Health	134	26	23	186
Ambulatory Care Setting	2,202	158	303	2,673
Other	2,762	250	354	3,681
Private Practice	1	0	1	2
Case Management	0	0	0	1
Policy or Regulatory Agency	74	1	2	80
Insurance/Utilization Review	326	16	17	363
Public Health	550	17	33	613
Correctional Facility	166	1	9	178
Unknown	0	0	0	104
Total	32,241	1,766	3,621	38,306

		Registered by Field o	d Nurses Re f Employme	ssiding and ent and Typ	Registered Nurses Residing and Licensed in Oklahoma by Field of Employment and Type of Position–FY 2019	oklahoma -FY 2019				
	Nurse Executive	Consultant	Nurse Manager	Nurse Faculty	Staff Nurse	Other	Nurse Researcher	APRN	Unknown	Total
Hospital	362	83	1,406	261	19,080	1,609	24	1,081	16	23,922
Long Term/Extended Care	102	63	484	25	724	183	0	39	1	1,621
Academic Setting	32	7	8	699	32	133	17	24	4	926
Home Health	150	33	797	33	1,217	291	1	17	2	2,541
Community Health	37	34	161	11	450	86	0	186	9	983
School Health	4	8	31	33	280	73	0	3	0	432
Occupational Health	13	18	37	4	73	26	1	14	0	186
Ambulatory Care Setting	53	11	265	11	1,326	163	11	832	1	2,673
Other	86	196	463	48	1,394	830	24	278	50	3,681
Private Practice	0	0	0	0	0	0	0	1	1	2
Case Management	0	0	0	0	0	0	0	0	1	1
Policy or Regulatory Agency	9	9	11	0	16	41	0	0	0	80
Insurance/Utilization Review	13	35	74	2	66	133	4	3	0	363
Public Health	14	19	102	10	337	88	4	39	0	613
Correctional Facility	13	1	25	1	107	8	0	24	0	179
Unknown										103
Total	268	514	3,864	1,108	25,135	3,676	98	2,841	82	38,306

	Total	122	27	75	13	115	50	184	172	438	188	237	89	3	712	43	549	31	80	281	150	117	35	18	196	161	235	16
	Corr. Facility	1	2	1	0	8	3	2	9	9	0	n	0	0	22	2	6	1	0	7	4	1	0	0	1	4	5	0
	Public Health	2	-	7	1	8	3	4	6	11	2	ю	3	0	22	1	~	0	7	7	9	9	1	0	5	5	14	0
	Ins./ Utiliz. Review	0	0	0	0	0	0	0	-	m	1	0	0	0	4	0	0	1	1	0	0	0	0	0	1	0	1	0
	Policy/ Reg. Agency	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0
ıa	Other	22	7	11	1	24	∞	38	17	94	31	21	6	0	131	4	93	3	19	53	25	17	3	7	36	20	35	2
Oklahon 9	Case Mgmt.	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Licensed Practical Nurses Residing and Licensed in Oklahoma by County and Field of Employment–FY 2019	Private Practice	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
g and Lic	Amb. Care	11	2	5	0	1	2	7	16	34	11	20	1	0	42	9	30	3	2	25	4	12	0	0	13	4	9	2
Residing	Occup. Health	0	0	0	0	0	0	2	0	9	3	0	0	0	5	0	7	0	0	2	0	4	0	0	3	2	2	1
Nurses and Fie	School Health	3	0	0	0	0	1	5	1	2	9	5	0	0	15	0	9	0	0	2	0		2	0	3	0	0	0
Practica] y County	Comm. /Health	10	-	10	1	9	1	15	5	26	6	9	5	0	34	3	30	3	4	14	11	∞	1	0	3	16	∞	1
icensed	Home Health	19	2	111	0	18	0	28	24	72	25	31	16	0	109	5	48	7	17	43	24	18	0	0	19	29	47	1
7	Academic Setting	0	0	0	0	0	0	0	3	6	1	α	2	0	9	0	3	0	1	2	0	0	0	0	0	0	4	0
	Long- Term/ Extended	31	16	14	9	36	19	47	51	101	63	63	15	0	216	13	118	∞	22	75	62	41	17	∞	94	47	29	∞
	Hospital	23	1	21	4	24	13	36	39	74	32	82	17	3	106	6	196	5	6	51	14	6	11	∞	18	34	46	1
	County	Adair	Alfalfa	Atoka	Beaver	Beckham	Blaine	Bryan	Caddo	Canadian	Carter	Cherokee	Choctaw	Cimarron	Cleveland	Coal	Comanche	Cotton	Craig	Creek	Custer	Delaware	Dewey	Ellis	Garfield	Garvin	Grady	Grant

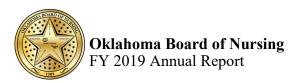
	Total	32	20	26	91	62	137	30	36	185	72	89	38	254	150	68	32	40	49	186	221	194	85	89	304	44	50	49
	Corr. Facility	33	0	33	1	3	4	0	0	2	4	2	1	33	4	2	1	1	0	4	9	0	1	0	9	0	0	
	Public Health	0	0	-	∞	2	2	0	1	9	-	0	0	∞	4	1	2	0	3	2	10	7	2	3	6	2	3	2
	Ins./ Utiliz. Review	0	0	0	0	0	0	0	0	1	0	0	0	1	0	0	0	0	0	0	2	0	0	0	1	0	0	0
	Policy/ Reg. Agency	0	0	0	0	0	0	0	1	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0
ma	Other	9	0	4	∞	11	30	7	9	26	10	∞	3	46	23	16	5	9	7	31	42	34	6	2	47	2	7	∞
Oklaho 19	Case Mgmt.	0	0	0	0	0	0	0	0	0	0	0	0	0	0	-	0	0	0	0	0	0	0	0	0	0	0	0
Licensed Practical Nurses Residing and Licensed in Oklahoma by County and Field of Employment–FY 2019	Private Practice	0	0	0	0	0	0	0	0	0	0	0	0		П	0	0	0	0	0	1	0	0	0	0	0	0	0
ng and L mploym	Amb. Care	2	0	0	3	3	10	2	2	8	5	4	1	14	12	11	2	-	4	16	20	5	3	5	16	4	4	0
s Residi ield of E	Occup. Health	0	0	0	0	1	2	1	0	3	0	1	1	33	0	0	0	-	0	33	2	33	1	0	П	0	0	1
al Nurse ity and F	School Health	_	0	0	1	0	0	0	0	0	1	2	1	n	1	3	0	0	2	0	7	2	0	1	5	0	1	
d Practic by Cour	Comm./ Health	-	1	2	9	5	6	4	10	20	4	-	4	13	9	5	2	2	9	111	11	12	8	2	18	-	3	3
License	Home Health	3	2	_	29	6	14	n	5	32	5	9	9	36	23	11	4	33	6	29	44	53	14	12	52	7	8	3
	Academic Setting	0	0	0	0		0	0	0	0	2	0	1	-	П		0	0	0	2	1	1	0	0	-	1	0	_
	Long- Term/ Extended	11	9	∞	24	28	39	∞	∞	65	32	25	11	64	45	27	12	14	10	64	46	48	32	23	94	17	20	17
	Hospital	5	11	7	11	16	27	5	3	22	~	19	6	61	29	11	4	12	∞	24	29	29	15	17	54	7	4	12
	County	Greer	Harmon	Harper	Haskell	Hughes	Jackson	Jefferson	Johnston	Kay	Kingfisher	Kiowa	Latimer	Leflore	Lincoln	Logan	Love	Major	Marshall	Mayes	McClain	McCurtain	McIntosh	Murray	Muskogee	Noble	Nowata	Okfuskee

	Total	2,014	211	83	137	09	232	217	236	301	89	14	300	142	199	225	19	42	1,568	135	235	92	40	174	20	13,693
	Corr. Facility	40	5	9	5	4	5	6	0	9	1	0	9	3	2	2	0	2	13	8	5	7	1	4	0	259
	Public Health	46	5	0	5	8	9	9	6	9	3	0	9	4	10	∞	0	1	32	7	9	4	0	7	0	372
	Ins./ Utiliz. Review	11	С	0	1	0	0	1	0	2	0	0	2	1	0	0	0	0	13	2	1	0	0	0	1	99
	Policy/ Reg. Agency	3	0	0	0	0	0	0	1	0	0	0	1	0	0	0	0	0	1	0	0	0	0	0	0	6
homa	Other	364	35	15	27	4	58	40	4	53	6	1	50	26	26	4	2	4	285	21	50	10	9	21	4	2,330
l in Oklal 2019	Case Mgmt.	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1
icensed Practical Nurses Residing and Licensed in Oklahoma by County and Field of Employment–FY 2019	Private Practice	3	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	8
iding and f Employ	Amb. Care	160	9	8	14	2	12	6	34	32	3	0	18	6	19	11	0	0	101	7	27	3	2	7	1	904
rses Res	Occup. Health	13	1	2	0	1	2	4	0	0	0	0	3	1	0	5	0	0	12	0	8	0	0	1	0	109
ctical Nu ounty an	School Health	33	2	2	1	0	9	3	2	3	1	1	1	0	4	2	0	1	10	0	2	1	1	0	0	160
nsed Pra by Co	Comm./ Health	106	11	5	∞	4	19	16	7	13	4	-	16	11	11	11	2	2	107	9	15	2	0	7	0	785
Lice	Home	252	38	13	15	n	20	37	29	46	11	0	40	19	40	22	2	6	218	21	21	8	33	10	3	1,911
	Academic Setting	9	0	1	1	0	2	0	0	1	0	0	1	0	1	1	0	0	16	2	2	0	1	0	0	83
	Long- Term/ Extended	859	74	15	50	22	99	09	38	100	20	1	106	59	99	89	9	19	509	41	71	31	17	31	4	4,178
	Hospital	319	31	16	10	17	36	32	72	39	16	10	50	6	30	51	7	4	251	30	32	20	6	37	9	2,479
	County	Oklahoma	Okmulgee	Osage	Ottawa	Pawnee	Payne	Pittsburg	Pontotoc	Pottawatomie	Pushmataha	Roger Mills	Rogers	Seminole	Sequoyah	Stephens	Texas	Tillman	Tulsa	Wagoner	Washington	Washita	Woods	Woodward	Unknown	Total



			ctical Nurses Age–FY 20			
County	20-29	30-39	40-49	50-59	60 Plus	Total
Adair	22	41	37	17	19	136
Alfalfa	2	2	6	10	7	27
Atoka	16	27	16	17	12	88
Beaver	4	2	5	2	2	15
Beckham	31	30	31	27	18	137
Blaine	6	11	13	15	9	54
Bryan	20	52	47	54	35	208
Caddo	31	46	57	51	25	210
Canadian	64	139	144	84	69	500
Carter	29	46	48	46	49	218
Cherokee	76	73	52	47	31	279
Choctaw	5	15	20	16	21	77
Cimarron	0	1	1	0	2	4
Cleveland	109	220	224	155	105	813
Coal	12	7	12	10	8	49
Comanche	103	188	150	124	87	652
Cotton	7	6	10	6	8	37
Craig	12	19	18	22	21	92
Creek	38	71	75	61	61	306
Custer	35	50	35	21	30	171
Delaware	22	27	37	28	22	136
Dewey	4	18	6	6	9	43
Ellis	4	4	6	4	4	22
Garfield	40	57	45	36	54	232
Garvin	20	45	45	34	37	181
Grady	40	75	70	42	43	270
Grant	1	6	3	1	6	17
Greer	5	15	6	11	3	40
Harmon	5	7	5	5	4	26
Harper	6	11	4	7	4	32
Haskell	16	35	30	21	10	112
Hughes	12	16	19	19	28	94
Jackson	29	45	36	29	25	164
Jefferson	3	7	7	10	8	35
Johnston	5	9	9	10	9	42
Kay	38	62	56	35	25	216
Kingfisher	9	30	21	15	11	86
Kiowa	12	21	16	12	16	77
Latimer	4	14	12	13	5	48

Licensed Practical Nurses by County and Age–FY 2019							
County	20-29	30-39	40-49	50-59	60 Plus	Total	
Leflore	51	70	87	56	44	308	
Lincoln	23	34	35	39	39	170	
Logan	7	26	29	17	24	103	
Love	6	9	12	6	4	37	
Major	10	10	10	7	11	48	
Marshall	8	8	17	16	6	55	
Mayes	25	48	62	52	25	212	
McClain	36	84	55	44	26	245	
McCurtain	47	63	56	38	28	232	
McIntosh	19	21	21	19	19	99	
Murray	8	17	23	22	10	80	
Muskogee	64	80	81	71	67	363	
Noble	4	15	17	12	4	52	
Nowata	9	11	14	11	12	57	
Okfuskee	10	16	11	14	9	60	
Oklahoma	289	648	641	444	392	2,414	
Okmulgee	41	69	49	55	35	249	
Osage	18	19	29	17	18	101	
Ottawa	20	30	42	36	30	158	
Pawnee	14	22	6	16	9	67	
Payne	48	80	57	49	40	274	
Pittsburg	36	69	56	55	34	250	
Pontotoc	40	73	63	43	52	271	
Pottawatomie	49	82	91	83	44	349	
Pushmataha	9	15	15	24	15	78	
Roger Mills	4	1	4	2	6	17	
Rogers	58	106	86	70	41	361	
Seminole	20	36	47	32	24	159	
Sequoyah	35	59	57	49	28	228	
Stephens	45	77	66	44	34	266	
Texas	7	6	3	5	6	27	
Tillman	7	14	10	10	4	45	
Tulsa	235	510	490	301	285	1,821	
Wagoner	23	28	36	31	27	145	
Washington	48	78	66	44	43	279	
Washita	11	15	21	17	20	84	
Woods	18	9	15	9	2	53	
Woodward	27	46	28	28	17	146	
Unknown	57	39	21	14	6	208	
Total	2,383	4,193	3,963	3,025	2,482	16,117	



Licensed Practical Nurses Residing and Licensed in Oklahoma by Field of Employment and Hours–FY 2019

Employment	Full-Time 35+ Hours	Part-Time 1-19 Hours	Part-Time 20-34 Hours	Total
Hospital	2,179	70	209	2,479
Long Term/Extended Care	3,737	116	298	4,178
Academic Setting	56	7	14	83
Home Health	1,552	100	238	1,911
Community Health	711	32	36	785
School Health	136	5	15	160
Occupational Health	97	4	6	109
Ambulatory Care Setting	853	15	31	904
Private Practice	5	1	1	8
Other	1,965	95	152	2,330
Case Management	1	0	0	1
Policy or Regulatory Agency	8	0	1	9
Insurance/Utilization Review	51	3	1	56
Public Health	331	17	22	372
Correctional Facility	240	4	14	259
Unknown				49
Total	11,922	469	1,038	13,693

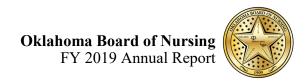
Licensed Practical Nurses Residing and Licensed in Oklahoma by Field of Employment and Age-FY 2019 **Employment** Under 20 60 Plus 20-29 30-39 40-49 50-59 Total 2,479 Hospital Long Term/Extended Care 1,036 1,083 4,178 Academic Setting Home Health 1,911 Community Health School Health Occupational Health Ambulatory Care Setting Private Practice Other 2,330 Case Management Policy or Regulatory Agency Insurance/Utilization Review Public Health Correctional Facility Unknown Total 1,604 3,546 3,604 2,759 2,129 13,693

		Licensed Pr by Field	ractical Nur of Employ	ses Residin ment and T	Practical Nurses Residing and Licensed in Oklahomald of Employment and Type of Position–FY 2019	d in Oklal n–FY 201	homa 9			
	Nurse Executive	Consultant	Nurse Manager	Nurse Faculty	Staff Nurse	Other	Nurse Researcher	APRN	Unknown	Total
Hospital	9	5	16	<i>L</i> 9	2,221	152	9	0	9	2,479
Long Term/Extended Care	47	18	373	171	3,217	341	0	0	11	4,178
Academic Setting	0	0	1	18	25	32	5	0	2	83
Home Health	13	9	73	62	1,494	258	1	1	3	1,911
Community Health	5	7	46	34	631	09	0	0	2	785
School Health	8	0	3	111	122	20	0	0	1	160
Occupational Health	1	3	14	7	79	5	0	0	0	109
Ambulatory Care Setting	5	0	37	19	808	35	0	0	0	904
Private Practice	0	1	0	0	5	2	0	0	0	8
Other	∞	17	96	99	1,748	376	15	0	14	2,330
Case Management	0	0	0	0	0	1	0	0	0	1
Policy or Regulatory Agency	0	2	0	0	5	2	0	0	0	6
Insurance/Utilization Review	0	1	10	1	19	22	3	0	0	56
Public Health	0	4	12	23	314	17	2	0	0	372
Correctional Facility	0	0	8	12	236	9	0	7	0	308
Total	88	64	684	481	10,924	1,329	32	3	39	13,693



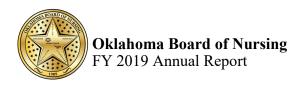
Degree and Average Age of Registered Nurses and Licensed Practical Nurses–FY 2019					
Degree	No. of Nurses	Average Age			
Diploma or Associate Degree	8	53			
Associate Degree—Nursing	29,783	46			
Diploma —Nursing	1,937	62			
Baccalaureate—Nursing	13,058	41			
Baccalaureate—Non-Nursing	123	56			
Board Request/Re-Entry	17	47			
Master's—Nursing	2,914	45			
Master's—Non-Nursing	849	54			
Doctorate—Nursing (PhD)	68	58			
Doctorate—Non-Nursing	118	60			
Doctorate—Nursing Practice (DNP)	345	45			
Doctorate—Nursing Other	39	54			
Advanced Practice Certificate	85	63			
Post-Master's Certificate	115	49			
Post-Master's Certificate 2nd	6	51			
PN Equivalency	395	36			
PN Program	16,414	44			
Unknown	276	35			
Total Registered Nurses	49,641	46			
Total Licensed Practical Nurses	16,901	44			

Licensed Nurses Residing in Oklahoma by Field of Employment and Gender–FY 2019							
	Ma	ale	Female		To	tal	
	RN	LPN	RN	LPN	RN	LPN	
Hospital	2,832	221	20,950	2,237	23,782	2,458	
Long Term/Extended Care	114	353	1,493	3,798	1,607	4,151	
Academic Setting	26	6	878	71	904	77	
Home Health	119	103	2,405	1,787	2,524	1,890	
Community Health	49	28	913	751	962	779	
School Health	8	2	415	154	423	156	
Occupational Health	12	8	171	99	183	107	
Ambulatory Care Setting	172	35	2,491	864	2,663	899	
Private Practice	0	0	2	7	2	7	
Other	239	96	3,127	2,116	3,366	2,212	
Case Management	0	0	0	1	0	1	
Policy or Regulatory Agency	5	1	72	8	77	9	
Insurance/Utilization Review	11	3	348	52	359	55	
Public Health	23	14	577	356	600	370	
Correctional Facility	27	21	150	236	177	257	
Unknown					677	265	
Total	3,637	891	33,992	12,537	38,306	13,693	



Nurses Endorsing into Oklahoma or Requesting a Verification to be Provided to Another State, Territory, or Country–FY 2019

Location			Endorse Into Oklahoma		License Verification to Another State	
		RN	LPN	RN	LPN	
AL	Alabama	29	3	119	6	
AK	Alaska	6	0	165	3	
AZ	Arizona	3	0	78	7	
AR	Arkansas	76	24	106	23	
	BELGIUM	1	0	0	0	
CA	California	60	12	204	10	
CO	Colorado	11	0	99	10	
CT	Connecticut	29	1	102	1	
DE	Delaware	1	0	37	0	
DC	District of Columbia	3	0	144	0	
FL	Florida	38	2	123	15	
GA	Georgia	9	2	87	3	
	GHANA	3	0	0	0	
GU	Guam	0	0	5	0	
HI	Hawaii	2	1	156	7	
ID	Idaho	2	0	55	1	
IL	Illinois	86	1	143	4	
IN	Indiana	18	0	130	5	
IA	Iowa	5	1	41	3	
	INDIA	9	0	0	0	
KS	Kansas	109	8	178	45	
KY	Kentucky	6	1	60	2	
	KENYA	10	0	0	0	
LA	Louisiana	24	4	118	2	
ME	Maine	1	0	46	1	
MD	Maryland	4	0	58	1	
MA	Massachusetts	7	1	205	4	
MI	Michigan	24	1	32	0	
MN	Minnesota	33	3	117	2	
MS	Mississippi	6	1	53	1	
MO	Missouri	47	3	88	9	
MT	Montana	3	0	52	0	
NE	Nebraska	6	1	84	2	



Nurses Endorsing into Oklahoma or Requesting a Verification to be Provided to Another State, Territory, or Country–FY 2019

Location		Endorse into Oklahoma		License Verification to Another State	
		RN	LPN	RN	LPN
NV	Nevada	1	0	99	5
NH	New Hampshire	2	0	94	1
NJ	New Jersey	19	2	162	1
NM	New Mexico	10	0	86	4
NY	New York	84	2	181	4
NC	North Carolina	9	0	72	4
ND	North Dakota	3	1	38	0
	NEPAL	3	0	0	0
ОН	Ohio	124	7	92	1
OR	Oregon	5	0	154	3
PA	Pennsylvania	108	2	120	4
	PHILIPPINES	28	0	0	0
RI	Rhode Island	5	0	192	3
SC	South Carolina	2	0	57	3
SD	South Dakota	0	0	42	3
TN	Tennessee	11	1	74	5
TX	Texas	115	29	204	52
UT	Utah	9	0	47	3
VT	Vermont	6	0	132	6
VI	Virgin Islands	0	0	7	0
VA	Virginia	10	1	71	5
WA	Washington	13	1	164	8
WV	West Virginia	2	0	40	0
WI	Wisconsin	4	1	72	3
WY	Wyoming	1	2	51	0
	Total	1,245	119	5,136	285

Advanced Unlicensed Assistants Certified in Oklahoma by County-FY 2019 County No. of AUAs Canadian 29 Cleveland 54 7 Creek Garfield 1 Garvin 2 Grady 4 Hughes 1 Kingfisher 1 Lincoln 5 Logan 4 McClain Oklahoma 245 Okmulgee 3 Pawnee 4 5 Pottawatomie 4 Rogers Seminole Tulsa 135 Washington 1 Woodward 1 Unknown 18 Total 527

Oklahoma Board of Nursing 2915 N. Classen Blvd., Ste. 524 Oklahoma City, Oklahoma 73106 phone: 405/962-1800 facsimile: 405/962-1821 visit us on the web at: http://www.nursing.ok.gov