

Oklahoma Board of Nursing

Fiscal Year 2022 Annual Report



Including Nursing Education Program
and Nurse Population Data
July 1, 2021 to June 30, 2022

Oklahoma Board of Nursing

FY 2022



**Annual Report and Statistical Data for the Fiscal Year Ended
June 30, 2022**

J. Kevin Stitt, Governor

Jenny Barnhouse, DNP, RN, 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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Board Members

<u>Name</u>	<u>Term Expires</u>	<u>Geographic District</u>
Shelly Swalley, MS, RN Nursing Education	5/31/2023	8
Kathy O'Dell, DNP, RN, CEN, NEA-BC Nursing Service Acute Care	5/31/2024	6
Kyle Leemaster, MBA, RN Nursing Service	5/31/2025	4
Amber Garretson, APRN-CNS, CCRN Advanced Practice Nursing	5/31/2026	5
Nikole Hicks, PhD, RN, CNE Nursing Education	5/31/2026	1
Patricia 'Liz' Massey, DNP, RN, NEA-BC, NE-BC Nursing Service Acute Care	*5/31/2021	5
Mandy Nelson, DNP, APRN-CNS Advanced Practice Nursing	*5/31/2021	1
Janice 'Jan' Palovik, MSA, RN	5/31/2022	3
Cathy Abram, MEd, LPN Long Term Care	*5/31/2022	7
Lindsay Potts, LPN	5/31/2023	2
Shawn Stachovic, LPN	5/31/2026	4
Marilyn Turvey, BS, LPN	*5/31/2021	8
Georgina 'Gina' Calhoun Public Member	co-term w/ Governor	3
Kathryn N. Taylor Public Member	co-term w/ Governor	2

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.

*Board Member serves until replacement appointment is made.



Mission~Vision~Values

Mission

Public Protection Through Nursing Regulation.

Vision

Top Ten Nursing Board.

Values

Collaborative

Integrity

Accountable

Growth Mindset



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 Act* 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, 2022)

Executive

Jenny Barnhouse, DNP, RN
Executive Director

Mike Starchman, RN, CPA
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

Melanie Russell, BA
Licensing Specialist

Laura Ashbaker, RN, ADN
Licensing Analyst

Janet Campbell
Legal Secretary

Romelda Daniels, BA
Administrative Technician/Receptionist

Dana Hall, AA
Administrative Technician

Darma Miner
Administrative Technician

Karen Murdock
Administrative Technician

Keziah Price
Administrative Technician

Peer Assistance Program

Vacant
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

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

Vacant
Nurse Investigator

Vacant
Nurse Investigator

Robin Bryant, BA
Legal Secretary

Andrea Denman, AA
Legal Secretary

Teena Jackson
Legal Secretary



Executive



Executive Division Information

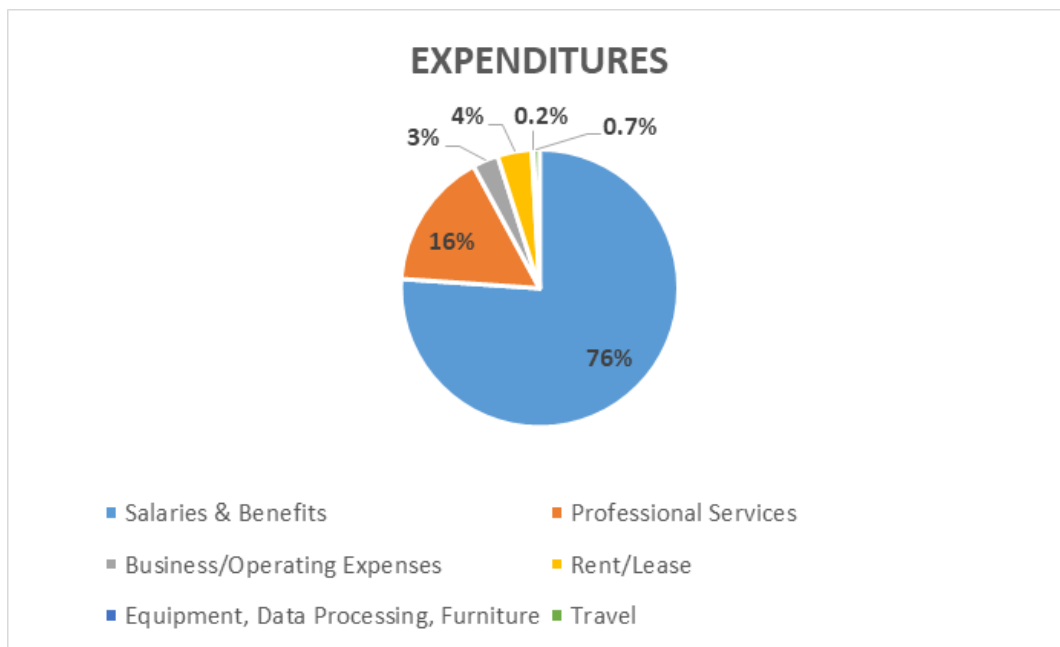
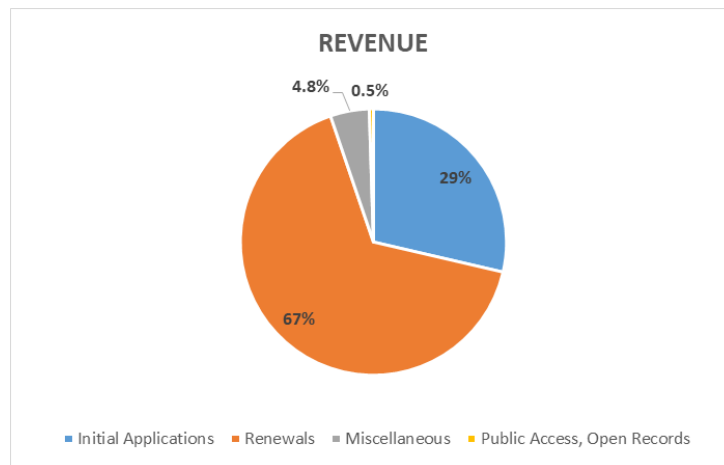
The Executive Division of the agency consists of the Executive Director, Jenny Barnhouse, DNP, RN and supporting staff, Michael Starchman, RN, CPA, Business Manager, and Sandra Ellis, CPM, Executive Assistant. Dr. Barnhouse provides executive oversight to the agency as a whole, and serves as principal operations officer, managing the Board's resources and staff. Dr. Barnhouse 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. The Executive Director 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 the Executive Director's 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 2022 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 2022 gross revenue was \$4,163,945.00 and expenses totaled \$4,037,327.00. The charts below depict the breakdown of revenue and expenditures.

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 \$401,294.50 out of the gross revenue above to the General Revenue Fund in Fiscal Year 2022.





FY 2022 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 51,459 licensure applications submitted during FY 2022, ninety-nine percent were submitted online with an average processing time for all applications of 0.3 calendar days.
2. In alignment with the agency strategic plan, the Message Center of the licensing database system, Optimal Regulatory Board Service (ORBS), has enhanced communication with applicants regarding the status of submitted applications. The ORBS Message Center has decreased the number of telephone calls received from applicants/licensees and allows for tracking communication through the communication log versus searching through callback books to track correspondence. During FY 2022, additional Regulatory Services staff were assigned to the Message Center to facilitate retrieval of and uploading of documents submitted by applicants. The average processing time for applications in FY 2022 Quarter 4 is noted as 0.15 days compared to the FY 2022 Quarter 1 Dashboard indicator of 1 day.
3. Following a pilot period of eleven nursing education programs from October 2021 through December 2021, the ORBS Affidavit of Graduation Portal (AOG) was opened to the remaining 92 Board-approved nursing education programs beginning on February 1, 2022. The AOG portal provides access to Oklahoma nursing education programs to submit electronic affidavit of graduation for their students to be given authorization to test. The nursing education programs upload official transcripts to each student's account during this process and provide an approval via affidavit. Orientation for the pilot nursing education programs was held on October 5 and 6, 2021. Effective February 1, 2022, six nursing education campuses were on-boarded to the portal each week. By February 29, 2022, all 103 nursing education programs were utilizing the AOG portal.
4. On February 3, 2020, Executive Order 2020-03 was filed with the Oklahoma Secretary of State. The Executive Order charged all state agencies to undertake a critical and comprehensive review of agency administrative rules to identify costly, ineffective, duplicative, and outdated regulations and to issue a report thereon. In FY 2022, proposed permanent Rules were submitted and approved in consideration of phase 2 revisions. The final Rules were published in the Oklahoma Register on September 1, 2022 and became effective on September 11, 2022.
5. Pursuant to Executive Order 2022-06, the agency website was updated on June 30, 2022, providing public notice regarding how the Board of Nursing stores personally identifiable data and with whom the information is shared.
6. In response to a request received on June 20, 2022, from the Legislative Office of Fiscal Transparency (LOFT) pursuant to 62 O.S. § 8014, data was provided as requested on July 8, 2022, to assist with a performance evaluation of the agency conducted by LOFT. Categories of data provided included licensure, budget, staffing, legal, and discipline.
7. In January, 2022, the agency relocated its offices to 2501 N. Lincoln Blvd. into the MC Connors bldg. The previous office space leased was 9,603 sq. ft. with annual rent of \$109,680. The new lease represents 5,760 sq. ft. reducing the rent by \$26,586 annually.

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

1. In identifying regulatory Rules revisions pursuant to Phase 2 of Executive Order 2020-03, alignment with statutory requirements was maintained. The proposed permanent Rules were adopted by the Board February 1, 2022; approved by Governor Stitt's declaration on June 21, 2022; were published in the Oklahoma Register on September 1, 2022, and became effective September 11, 2022.



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

1. In FY 2022, the first year offered, the Board of Nursing participated in the NCSBN Annual Report process yielding a link to the report to provide to Board-approved nursing education programs for completion of the report, an aggregate report that has been statistically- analyzed for comparison of state nursing education programs at the national level, and a Performance Indicator for each nursing education program approved by the Board of Nursing. The Education IDP Committee reviewed the statistically analyzed data during the October 2021 meeting and noted the presence of warning signs for high-risk programs. During the November 2022 Board Meeting, Board members reviewed and accepted the Education Informal Disposition Panel's recommended actions and category of nursing program approval for the nursing education programs meeting and not meeting the minimum standards for nursing education programs.
2. With the passage of HB 2873, the Universal Licensing Recognition Act, and an effective date of November 1, 2021, applications for individuals moving to and residing in Oklahoma were developed to meet the intent of the law. The Universal Licensing applications, differing from current endorsement application requirements, were made available for completion and submission in the ORBS licensing database effective November 1, 2021 for a fee not exceeding the cost of current in-state nursing licensure fees. In FY 2022, eight Universal Licenses were issued.
3. On October 28, 2021, the Board of Nursing received the fully executed Notification from Governor J. Kevin Stitt regarding the Oklahoma Board of Nursing submitted emergency Rules, Title 485. Chapter 10. Licensure of Practical and Registered Nurses Subchapter 23. Temporary COVID Licensure Requirements. The emergency Rules provided authority for temporary reinstatement for RNs, LPNs and AUAs, with continuing qualifications for practice waived for individuals whose license or certificate had been inactive for less than five years. In addition, authority was granted for temporary licensing of individuals licensed in another state who made application for temporary licensure in Oklahoma at the same level of unencumbered licensure held in another state. The emergency Rules remain through September 14, 2022, or until superseded by another rule. In FY 2022, pursuant to Subchapter 23 emergency Rules, 11 temporary reinstatement licenses and 33 temporary out-of-state licenses were issued. All temporary licenses issued through Subchapter 23 Emergency Rules had an expiration date of September 14, 2022.
4. Effective June 15, 2022, all Board of Nursing staff received upgraded computers from desktop computers to laptop computers. This has allowed agency staff to telework under necessary circumstances while continuing to provide agency services.

Strategic Plan Goal #4: Champion A Positive, Values Based Workplace Culture

1. The Oklahoma State Employee Engagement Survey (EES) is an annual survey distributed to all state government employees that assesses employee perceptions at their respective state agency. The survey measures employees' perception toward the agency's work culture and their satisfaction and engagement in their work. The agency's employee engagement score was 88% compared to the overall state score of 74% and the employee satisfaction score was 90% compared to the overall state score of 73%. Meetings were held with all agency staff to review the outcomes of the EES and to solicit input for improvement.



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Savings, Efficiencies and Shared Services:

1. In alignment with the agency strategic plan, conversion from the current licensing database to a turnkey license management system, Optimal Regulatory Board Service (ORBS), was completed in October 2020. 191,967 licensee records were mapped and migrated to ORBS, while 43 applications with default and conventional checklists were configured in the new system. ORBS efficiencies include digitizing paper processes, allow for electronic upload of third-party documents required for application completion, decreased manual input of data and comprehensive disaster recovery implementation. ORBS is offered at no cost to nursing regulatory boards. Converting to this licensure database system from an end-of-life customized licensing system on an AS400 system has cost savings of \$159,391.34 during FY 2021 and a cost avoidance of \$195,690.81 during FY 2022.
2. With full implementation of the Affidavit of Graduation on February 29, 2022, Board staff no longer upload all transcripts for Examination applicants. In FY 2022, there were 4,159 examination applications received. Board staff now only upload transcripts received from out-of-state nursing education programs and Advanced Practice Registered Nurse nursing education programs. With the efficiency noted in not uploading individual transcripts for each examination applicant, Board staff now assist in the online review process of all application types.
3. 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 2022, the Executive Director issued a combined total of 88 Corrective Action and Executive Director Orders. Comparing FY 2022 to FY 2021, the Board experienced a 2% decrease in licensure settlement hearings (Informal Disposition Panel) and a 20% reduction in the number of full Board hearings.
4. On December 1, 2021, Board staff began providing NCLEX Candidate Reports to applicants electronically versus postal mail as previously sent. Projected cost savings for the remainder of FY 2022 was \$1,994.76 in consideration of postage and staff time savings.



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 2017	CY 2018	CY 2019	CY 2020	CY 2021	1 & 5 Year Variances
Number of Candidates	2,083	2,035	2,060	2,192	2,162	↓ 1.4% & ↑ 3.8%
Oklahoma Pass Rate	86.27%	88.75%	89.42%	85.31%	83.63%	↓ 1.7% & ↓ 2.6%
National Pass Rate	87.12%	88.30%	88.18%	86.58%	82.49%	↓ 4.1% & ↓ 4.6%

*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 2017	CY 2018	CY 2019	CY 2020	CY 2021	1 & 5 Year Variances
Number of Candidates	1,228	1,207	1,088	939	992	↑ 5.6% & ↓ 19.2%
Oklahoma Pass Rate	86.64%	86.83%	87.41%	87.75%	87.40%	↓ 0.4% & ↑ 0.8%
National Pass Rate	83.85%	85.93%	85.63%	83.09%	79.60%	↓ 3.5% & ↓ 4.3%

*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 decreased in the past year. The NCLEX-RN pass rate for Oklahoma graduates peaked in CY 2019. The 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 increased 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.

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

	CY 2017	CY 2018	CY 2019	CY 2020	CY 2021	1 & 5 Year Variances
Partial RN Program Completion	135 (90.37%)	190 (93.68%)	145 (92.41%)	138 (92.75%)	168 (95.83%)	↑ 21.7% & ↑ 24.4% ↑ 3.1% & ↑ 5.5%
RN Graduate	4 (50%)	2 (50%)	3 (100%)	2 (100%)	1 (100%)	↓ 50% & ↓ 75% ↔ 0% & ↑ 50%



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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 significantly higher than the national pass rate. It is unknown how many of those individuals seek employment as Licensed Practical Nurses. Throughout the remainder of the report, the numbers are reported by fiscal year.

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

	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022	1 & 5 Year Variances
Registered Nurse	2,396	2,452	2,611	2,611	2,789	↑ 6.8% & ↑ 16.4%
Licensed Practical Nurse	1,513	1,483	1,219	1,087	1,244	↑ 14.4% & ↓ 17.8%
Total Applicants	3,909	3,935	3,830	3,698	4,033	↑ 9.1% & ↑ 3.2%
# Reporting Arrests	255	232	237	240	172	↓ 28.3% & ↓ 32.6%
% Applicants Reporting Arrests	6.5%	5.9%	6.2%	6.5%	4.3%	↓ 2.2% & ↓ 2.2%

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 have shown moderate growth over the past 5 years. Licensed Practical Nurse applications peaked in 2018 and then have shown a steady decrease until FY 2022. Total numbers of exam applicants have remained steady over the past 5 years with the most noticeable decrease occurring in 2021.

Beginning January 1, 2013, a national fingerprint-based criminal background check was added as a requirement as opposed to just a state-based criminal background check. The past four years have shown a consistent percentage of applicants who report an arrest on their applications. It is of note that of all the application types requiring a fingerprint criminal background check, 26.28% percent of applicants with a criminal history did not report any or all their criminal history on their applications.

Processing Time for Initial Applications for Licensure by Examination

	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022	1 & 5 Year Variances
# days from receipt of completed application to approval	4.2	4.4	2.2	2.2	1.3	↓ 40.9% & ↓ 69%

The average processing time continues to remain well under the Board’s established maximum time parameter and with staff continuing to look for efficiencies in streamlining and organizing licensing processes coupled with the implementation of the Optimal Regulatory Board System licensing database in October of 2022, the processing time was lowered by 69% from 5 years ago.



New Licenses Issued By Examination

Level of Licensure	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022	1 & 5 Year Variances
Registered Nurse	1,842	1,963	1,925	1,942	1,910	↓ 1.7% & ↑ 3.7%
Licensed Practical Nurse	1,150	1,068	883	925	940	↑ 1.6% & ↓ 18.3%
Total	2,992	3,031	2,808	2,867	2,850	↓ 0.6% & ↓ 4.8%

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 2018	FY 2019	FY 2020	FY 2021	FY 2022	1 & 5 Year Variances
Registered Nurse	2,169	1,091	1,261	1,006	1,128	↑ 12.1% & ↓ 48%
Licensed Practical Nurse	224	199	186	130	160	↑ 23.1% & ↓ 28.6%
Total	2,393	1,290	1,447	1,136	1,288	↑ 13.4% & ↓ 46.2%

Over the past five years, the number of applications for RN and LPN licensure by endorsement has varied widely. A significant decrease in the number of endorsement applications occurred beginning in the 3rd quarter of FY 2018. The decrease was expected as this Board joined the enhanced Nurse Licensure Compact (eNLC), implemented nationwide on January 19, 2018. The eNLC allows those nurses who have a multistate license in another compact party state that 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 2018	FY 2019	FY 2020	FY 2021	FY 2022	1 & 5 Year Variances
Registered Nurse	1,814	1,216	982	792	919	↑ 16% & ↓ 49.3%
Licensed Practical Nurse	139	116	121	83	138	↑ 66.3% & ↓ 0.7%
Total	1,953	1,332	1,103	875	1,057	↑ 20.8% & ↓ 45.9%

The number of licenses issued is in correlation with the increase and decrease in the number of applications submitted.

Number of Certified Verifications Provided to Other States

Level of Licensure	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022	1 & 5 Year Variances
Registered Nurse	1,231	5,136	2,193	3,836	5,024	↑ 30.9% & ↑ 308.1%
Licensed Practical Nurse	209	285	133	218	236	↑ 8.3% & ↑ 12.9%
Total	1,440	*5,421	2,326	4,054	5,260	↑ 30% & ↑ 265%

*Since 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.

Processing Time for Endorsement Applications

Type of Function	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022	1 & 5 Year Variances
Processing time to issue a license for a completed endorsement application	4.2 days	3.4 days	2.8 days	6.9 days	3.2 days	↓ 53.6% & ↓ 23.8%
Processing time for a completed certified verification	2.4 days	*N/A	*N/A	*N/A	*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 decreased significantly in the past year. With the implementation of the new licensing database, the uploading of required documents by the applicants have prompted modification in the processing of applications.

New Licenses Issued by Universal Licensing Endorsement

Effective November 1, 2021, Advanced Practice Registered Nurses, Registered Nurses, and Licensed Practical Nurses moving to or living in Oklahoma who are currently licensed in another state or territory and that license has been in good standing for at least one year before making application to Oklahoma may apply through the Universal Licensing Endorsement application for licensure in the State of Oklahoma for the same level of licensure held in another state. The Board may issue such license if all requirements are met.

Universal Licensing Endorsement

Level of Licensure	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022	1 & 5 Year Variances
Advanced Practice Registered Nurse					3	N/A & N/A
Registered Nurse					8	N/A & N/A
Licensed Practical Nurse					1	N/A & N/A

Temporary Critical Need License

Effective July 1, 2022, the Board of Nursing can grant a Temporary Critical Need license to an Advanced Practice Registered Nurse, Registered Nurse, and Licensed Practical Nurse who holds a valid, unexpired nursing license granted by another state or territory during the period of time in which there is a state of emergency declared by the Governor or a national emergency declared by the President of the United States pursuant to Section 1621 of Title 50 of the United States Code as long as the licensee's services are directly related to the particular declared emergency.

Temporary Critical Need License

Level of Licensure	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022	1 & 5 Year Variances
Advanced Practice Registered Nurse					0	N/A & N/A
Registered Nurse					1	N/A & N/A
Licensed Practical Nurse					0	N/A & N/A



Multistate Licenses Issued

The enhanced Nurse Licensure Compact (eNLC), 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 2018	FY 2019	FY 2020	FY 2021	FY 2022	1 & 5 Year Variances
Existing Active Licensee Registered Nurse	2,010	1,899	1,682	2,194	2,853	↑ 30% & ↑ 41.9%
Existing Active Licensee Licensed Practical Nurse	220	429	394	736	663	↓ 9.9% & ↑ 201.4%
Total	2,230	2,328	2,076	2,930	3,516	↑ 20% & ↑ 57.7%

Number of Multistate Applications for Existing Active Oklahoma Licensees Processed

Level of Licensure	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022	1 & 5 Year Variances
Existing Active Licensee Registered Nurse	1,782	1,851	1,527	2,029	2,656	↑ 30.9% & ↑ 49%
Existing Active Licensee Licensed Practical Nurse	158	371	334	589	625	↑ 6.1% & ↑ 295.6%
Total	1,940	2,222	1,861	2,618	3,281	↑ 25.3% & ↑ 69.1%

Processing Time for Multistate Applications for Existing Active Oklahoma Licensees

Level of Licensure	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022	1 & 5 Year Variances
Existing Active Registered Nurse and Licensed Practical Nurse Active Licensees	1.1 days	0.9 days	1.6 days	2.4 days	0.4 days	↓ 83.3% & ↓ 63.6%

With the exception of FY 2020, the number of existing multistate applications received has consistently increased.

Currently the processing time for this application type is less than 1 day.



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 2018	FY 2019	FY 2020	FY 2021	FY 2022	1 & 5 Year Variances
Registered Nurse and Licensed Practical Nurse	31,344	26,128	29,827	26,986	25,579	↓ 5.2% & ↓ 18.4%
Advanced Practice Registered Nurse and Prescriptive Authority Recognition	3,267	3,100	3,927	4,127	5,054	↑ 22.5% & ↑ 54.7%
Advanced Unlicensed Assistant	218	172	144	139	140	↑ 0.7% & ↓ 35.8%
% Nurses/AUAs Renewing Online	99.2%	98.9%	99.1%	99.3%	99.9%	↑ 0.6% & ↑ 0.7%

Overall, the number of renewals is reflective of the number of licensed nurses and certified AUAs. The increase seen among Advanced Practice Registered Nurses (APRNs) but not among the general RN renewals is due to some APRNs not requiring an Oklahoma RN license as they hold an active multistate RN license in another compact party state.

Number of Applications for Reinstatement/Return to Active Status

Type of Reinstatement	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022	1 & 5 Year Variances
Registered Nurse and Licensed Practical Nurse	1,244	1,545	1,388	1,054	887	↓ 15.8% & ↓ 28.7%
Advanced Practice Registered Nurse	40	68	48	76	103	↑ 35.5% & ↑ 157.5%
Prescriptive Authority	48	71	35	58	102	↑ 75.8% & ↑ 112.5%
Advanced Unlicensed Assistant	16	27	20	18	27	↑ 50% & ↑ 68.8%
Total	1,348	1,711	1,491	1,206	1,119	↓ 7.2% & ↓ 17%

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, it is expected that the overall number of reinstatement applications would fluctuate.



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Processing Time for Licensure Renewal and Reinstatement/Return to Active

Type of Function	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022	1 & 5 Year Variances
# days from receipt of completed renewal application to processing	1.6 days	1.7 days	1.7 days	0.2 days	0.003 days	↓ 98.5% & ↓ 99.8%
# days from receipt of completed reinstatement application until processing	2.2 days	1.8 days	2.7 days	2.7 days	1 day	↓ 63% & ↓ 54.5%

The processing time for renewal applications in FY 2021 showed a dramatic decrease due to the implementation of automatic features of the new licensing system.

The processing time for reinstatement applications showed the best processing time for the past 5 years in FY 2022 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 2018	FY 2019	FY 2020	FY 2021	FY 2022	1 & 5 Year Variances
Change of Address*	870	618	619	263	217	↓ 17.5% & ↓ 75.1%
Duplicates or Modifications	**1,771	1,496	1,399	1,530	1,638	↑ 7.1% & ↓ 7.5%
Open Records Requests	108	68	63	19	32	↑ 68.4% & ↓ 70.4%
Address Lists and Labels	66	86	76	54	74	↑ 37% & ↑ 12.1%
Visits to Board Office	5,161	4,825	2,805	***0	153	↑ 100 % & ↓ 97%
Written Verifications	558	508	363	364	247	↓ 32.1 % & ↓ 55.7%
Closed School Transcripts	11	23	17	9	14	↑ 35.7% & ↑ 27.3 %

*With the transition to the new licensing database on October 13, 2020, a significant decrease in the number of requests for change of address is noted. Licensees may submit a change of address through their Nurse Portal account in the Optimal Regulatory Board System (ORBS) licensing database.

**FY 2018 Duplications or Modifications data revised.

***FY 2021 the agency was closed to the public due to the COVID-19 pandemic and appointment only visits were allowed in FY 2022.



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 2018	FY 2019	FY 2020	FY 2021	FY 2022	1 & 5 Year Variances
APRN-CNP	2,952	3,418	3,977	4,197	4,748	↑ 13.1% & ↑ 60.8%
APRN-CNM	70	64	71	74	80	↑ 8.1% & ↑ 14.3%
APRN-CNS	283	287	292	289	293	↑ 1.4% & ↑ 3.5%
APRN-CRNA	729	725	787	784	771	↓ 1.7% & ↑ 5.8%
Total	4,034	4,494	5,127	5,344	5,892	↑ 10.3% & ↑ 46.1%

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.

Number of New APRN Licenses Issued

Type of License	FY 2018*	FY 2019	FY 2020	FY 2021	FY 2022	1 & 5 Year Variances
APRN-CNP	512	727	640	447	800	↑ 79% & ↑ 56.3%
APRN-CNM	9	3	14	5	11	↑ 120% & ↑ 22.2%
APRN-CNS	15	16	11	6	11	↑ 83.3% & ↓ 26.7%
APRN-CRNA	68	99	91	62	80	↑ 29% & ↑ 17.7%
Licenses issued through AS400 database from 7/1/2020 through 9/30/2020	N/A	N/A	N/A	*181		N/A
Total	612	845	756	701	902	↑ 28.7% & ↑ 47.4%

*On October 13, 2020, the Board of Nursing converted to a new licensing database, Optimal Regulatory Board System (ORBS). Licenses issued through the previous database (AS400) during FY2021 – Quarter 1 (July 1, 2020 – September 30, 2020) are noted.

The number of new APRN licenses issued is based on the total number of applications received which has fluctuated over the past 5 years.



Processing Time for APRN Licensure Applications

Type of Function	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022	1 & 5 Year Variances
# days from receipt of completed APRN application to processing	2.7 days	2.7 days	2.4 days	4.1 days	1.4 days	↓ 65.8% & ↓ 48.1%

Processing times for advanced practice licensure applications showed a significant decrease last year despite the increase in the number of licenses processed.

Number of Advanced Practice Registered Nurses with Prescriptive Authority

Type of License	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022	1 & 5 Year Variances
APRN-CNP	2,480	2,886	3,281	3,396	3,004	↓ 11.5% & ↑ 21.1%
APRN-CNM	54	51	55	57	46	↓ 19.3% & ↓ 14.8%
APRN-CNS	191	202	213	200	182	↓ 9% & ↓ 4.7%
APRN-CRNA*	479	507	561	543	492	↓ 9.4% & ↑ 2.7%
Total	3,204	3,646	4,110	4,196	3,724	↓ 11.3% & ↑ 16.2%

*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 is not reflective of the increased numbers of Advanced Practice Registered Nurses for FY 2022; whereas, in other years, it has been. Currently, 63.2 percent of Advanced Practice Registered Nurses hold prescriptive authority recognition.

Number of Prescriptive Authority Recognitions Issued

Type of License	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022	1 & 5 Year Variances
APRN-CNP	362	535	428	308	639	↑ 107.5% & ↑ 76.5%
APRN-CNM	6	3	6	5	6	↑ 20% & ↔ 0%
APRN-CNS	15	13	12	3	5	↑ 66.7% & ↓ 66.7%
APRN-CRNA	57	61	72	35	116	↑ 231.4% & ↑ 103.5%
Recognitions Issued through AS400 database from 7/1/2020 through 9/30/2020	N/A	N/A	N/A	*145		N/A
Total	440	612	518	485	766	↑ 57.9% & ↑ 74.1%

*On October 13, 2020, the Board of Nursing converted to a new licensing database, Optimal Regulatory Board System (ORBS). Licenses issued through the previous database (AS400) during FY 2021 – Quarter 1 (July 1, 2020 – September 30, 2020) are noted.



The number of prescriptive authority recognitions issued has varied widely over the past five years among the different APRN roles.

Number of Changes in Supervising Physicians

Number of Changes	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022	1 & 5 Year Variances
Total	1,370	1,460	1,515	1,358	1,905	↑ 40.3% & ↑ 39%

The number of changes in supervising physician increased significantly in the past year.

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 2018	FY 2019	FY 2020	FY 2021	FY 2022	1 & 5 Year Variances
# New Certifications	52	68	38	63	55	↓ 12.7% & ↑ 5.8%
Total # AUAs Certified	539	527	453	404	384	↓ 4.9% & ↓ 28.8%

While the number of new AUA certifications varies greatly over the years, the total number of certified AUAs has decreased every year.

Nursing Practice/Advanced Nursing Practice Activities

Written Responses to Practice Questions

For FY 2022, there were 101 written responses to practice related issues, as compared to 71 responses in FY 2021. The highest number of practice letters were to health care facilities, followed by clinics and APRNs. The written response variances of the FY 2021 report and FY 2022 report note an increase of 42.2 percent. The **summary of practice activities** and **types of issues** and **settings** addressed in the practice letters are summarized on the following pages.



Summary of Practice Activities

Category	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022	1 & 5 Year Variances
# Practice Calls	2,456*	1,788	2,015	2,109	2,212	↑ 4.9% & ↓ 10%
# Practice Letters	60	70	80	71	101	↑ 42.2% & ↑ 68.3%
# Declaratory Ruling Requests	0	0	0	0	0	↔ 0% & ↔ 0%
# Declaratory Rulings, Policies & Guidelines Reviewed by Board	12	15	10	14	11	↓ 21.4% & ↓ 8.3%
# Meetings Attended as Board Representative	10	21	14	7	12	↑ 71.4% & ↑ 20%
# Presentations	7	14	13	8	8	↔ 0% & ↑ 14.3%

*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.

Settings of Practice Letters

Settings	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022	1 & 5 Year Variances
Medical Center	21	29	24	18	30	↑ 66.7% & ↑ 42.9%
RN, LPN, or APRN	18	11	11	12	23	↑ 91.7% & ↑ 27.8%
Specialty Organization/Health Care Provider	4	7	1	4	1	↓ 75% & ↓ 75%
OK State Dept. of Health	1	1	1	2	2	↔ 0% & ↑ 100%
Other State or Federal Agency	4	1	2	0	0	↔ 0% & ↓ 100%
School Nurse/Staff or Nursing Education	0	3	4	6	11	↑ 83.3% & ↑ 100%
Medical Office/Clinic/Ambulatory Center	7	14	19	16	23	↑ 43.8% & ↑ 228.6%
Long Term Care Facility/Agency	2	0	8	1	2	↑ 100% & ↔ 0%
NCSBN/Boards of Nursing	0	0	0	0	0	↔ 0% & ↔ 0%
Publication/Survey	0	0	0	0	0	↔ 0% & ↔ 0%
Other	1	4	3	6	4	↓ 33.3% & ↑ 300%
Credentialing Agency/Proprietary Corporation	3	0	7	6	5	↓ 16.7% & ↑ 66.7%
Total	60	70	80	71	101	↑ 42.3% & ↑ 68.3%



Types of Issues Addressed in Practice Letters

Type of Issue	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022	1 & 5 Year Variances
Scope of Practice	22	25	21	16	29	↑ 81.3% & ↑ 31.8%
Delegating & Training Unlicensed Persons	2	6	4	2	12	↑ 500% & ↑ 500%
Compact States Related/ License Requirement	11	10	0	0	2	↑ 100% & ↓ 81.8%
Telephone Triage & Case Management	0	0	0	0	0	↔ 0% & ↔ 0%
Esthetics & Medical Questions	0	1	0	0	0	↔ 0% & ↔ 0%
Emergency Screening [EMTALA]	0	0	0	0	0	↔ 0% & ↔ 0%
Pronouncement of Death By Nurses	1	0	0	0	0	↔ 0% & ↓ 100%
Medication-Related	3	1	5	6	3	↓ 50% & ↔ 0%
CEU & Continuing Qualification-Related	0	0	0	2	0	↓ 100% & ↔ 0%
Primary Source Verification	0	0	2	0	0	↔ 0% & ↔ 0%
Patient Care-Related	1	2	9	3	5	↑ 66.7% & ↑ 400%
Survey/Publication	0	0	0	0	0	↔ 0% & ↔ 0%
OBN Regulation of Nurses	2	4	1	6	4	↓ 33.3% & ↑ 100%
Licensure Requirements	2	3	16	14	15	↑ 7.1% & ↑ 650%
APRN Prescriptive Authority	13	15	16	16	19	↑ 18.8% & ↑ 46.2%
Resource Information	0	0	1	3	3	↔ 0% & ↑ 100%
Certification	1	2	3	1	1	↔ 0% & ↔ 0%
School Nurse/Staff or Nursing Education-Related	1	0	1	1	7	↑ 600% & ↑ 600%
Billing Information-Related	0	0	1	1	1	↔ 0% & ↑ 100%
Total	60	70	80	71	101	↑ 42.3% & ↑ 68.3%



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Practice Calls and Visits

During FY 2022, 2,212 practice calls and visits were documented compared to 2,109 in FY 2021. This notes an increase of 4.9 percent in practice calls and visits.

Classification of Callers or Visitors

Type of Caller/Visitor	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022	1 & 5 Year Variances
Registered Nurse	578	492	510	491	624	↑ 27.1% & ↑ 8%
Licensed Practical Nurse	373	333	403	650	709	↑ 9.1% & ↑ 90.1%
Advanced Practice Registered Nurse	524	423	551	458	431	↓ 5.9% & ↓ 17.7%
Advanced Unlicensed Assistant	4	10	8	9	9	↔ 0% & ↑ 125%
CMA or CNA	21	22	32	17	26	↑ 53% & ↑ 23.8%
School Nurse or School Staff	16	30	27	30	37	↑ 23.3% & ↑ 131.2%
Nursing Education	7	16	12	10	7	↓ 30% & ↔ 0%
Employer or Supervisor	194	249	203	199	181	↓ 9% & ↓ 6.7%
Physician or Office Staff	104	93	132	92	44	↓ 52.2% & ↓ 57.7%
Public	26	45	39	22	26	↑ 18.2% & ↔ 0%
Staffing Agency	33	13	19	51	24	↓ 52.9% & ↓ 27.3%
OK State Dept. of Health	6	6	12	9	6	↓ 33.3% & ↔ 0%
Other State/Federal Agency	5	9	9	15	8	↓ 46.7% & ↑ 60%
Credentialing Company or Payor	1	8	9	6	11	↑ 83.3% & ↑ 1000%
Pharmacy	22	23	30	31	47	↑ 51.6% & ↑ 113.6%
Attorney or Staff	12	16	19	19	22	↑ 15.8% & ↑ 83.3%
Other /MSL-Related Calls	530	0	0	0	0	↔ 0% & ↓ 100%
Total	2,456	1,788	2,015	2,109	2,212	↑ 4.9% & ↓ 9.9%



Practice Visits and Calls

Issue	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022	1 & 5 Year Variances
General Scope of Practice	376	396	449	406	473	↑ 16.5% & ↑ 25.8%
Delegation	83	101	84	71	103	↑ 45.1 % & ↑ 24.1%
Aesthetics & Skin Care	88	101	115	130	159	↑ 22.3% & ↑ 80.7%
Employment-Related	159	172	227	183	195	↑ 6.6 % & ↑ 22.6%
Staffing or Abandonment	79	102	145	160	125	↓ 21.9% & ↑ 58.2%
CEUs	49	37	94	76	90	↑ 18.4% & ↑ 83.7%
Licensing	*1,094	270	306	**648	**667	↑ 2.9 % & ↓ 39%
APRN Prescriptive Authority	275	259	226	232	211	↓ 9.1% & ↓ 23.3%
APRN Scope of Practice	219	228	239	146	117	↓ 19.9% & ↓ 46.6%
Other	34	122	130	57	72	↑ 26.3% & ↑ 111.8 %
Total	2,456	1,788	2,015	2,109	2,212	↑ 4.9% & ↓ 9.9 %

*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 that follows, 530 calls were related to multistate licensure (MSL) through the eNLC.

**From FY 2020 to FY 2022, the significant increase in Licensing is related to the implementation of notification of expiration of license by email and calls for those without email.



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. *School Nurse Position Statement*, #OBN-02, July 2021 [Revised]
2. *Exclusionary Formulary for Advanced Practice Registered Nurses with Prescriptive Authority*, #P-50B, September 2021 [Revised]
3. *Formulary Advisory Council Procedure for Amending the Formulary*, #P-50, September 2021 [Reviewed]
4. *Advanced Practiced Registered Nurse (APRN) Certification Examinations Approved by the Oklahoma Board of Nursing for Initial Licensure*, #P-52A, November 2021 [Revised]
5. *Advanced Practiced Registered Nurse Certification Examinations **No Longer** Approved by the Oklahoma Board of Nursing for Initial Licensure*, #P-52B, November 2021 [Revised]
6. *Decision-Making Model for Scope of Practice Decisions: Determining Advanced Practice Registered Nurse, Registered Nurse and Licensed Practical Nurse Scope of Practice Guidelines*, #P-10, November 2021 [Revised]
7. *Request for Inactive Status*, #P-08, February 2022 [Reviewed]
8. *Board Document Definitions*, #P-20, February 2022 [Revised]
9. *Registered Nurse Monitoring **Obstetrical** Patients Receiving Analgesia/Anesthesia by Catheter Techniques (Epidural, PCEA, and Intrathecal Catheters) Guidelines*, #P-04, March 2022, [Revised]
10. *Registered Nurse Administering, Managing and Monitoring Non-Obstetrical Patients Receiving Analgesia/Anesthesia by Catheter Techniques (Epidural, PCEA and Intrathecal Catheters) Guidelines*, #P-03, March 2022 [Revised]
11. *Changes in Status of Physician Supervising Prescriptive Authority: Guidelines*, #P-53, May 2022, [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 2021:**
 - ◊ *Prescriptions Issued by Advanced Practice Registered Nurses*
 - ◊ *Home Health Admission Orders*
 - ◊ *Supervising Physician Change to be Submitted Within 30 Days*
 - ◊ *Do You Want a License Expiration Reminder?*
- **January 2022:**
 - ◊ *New Online Nurse Portal*
 - ◊ *APRN Renewal*
 - ◊ *Electronic Prescriptions Required for Controlled substances*
 - ◊ *Oklahoma Board of Nursing to Relocate*
 - ◊ *Request for Electronic Prescribing Extension*
- **April 2022:**
 - ◊ *Oklahoma Tax Requirement for License Renewal*
 - ◊ *Notification of License Expiration*
 - ◊ *Child Abuse Examination Training*
 - ◊ *Education Required for Signing Death Certificates*
 - ◊ *Changing Supervising Physician for Prescriptive Authority*



Meetings and Presentations

The Associate Director for Nursing Practice attended and provided input/directions in 12 meetings this fiscal year. In addition, the Associate Director for Nursing Practice made eight (8) virtual 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 2022.

Number of Nursing Education Programs

Types and Numbers of Programs	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
# Advanced Practice Registered Nurse Programs				4	5
# Baccalaureate Programs/Campuses*	14/24	14/24	15/24	15/28	15/29
# Associate Degree Programs/Campuses	15/27	15/28	14/26	14/26	14/28
# Practical Nursing Programs/Campuses	29/49	30/47	30/47	31/48	32/48
Total	58/100	59/99	59/98	60/102	61/105

*RN-BSN not included

The total number of nursing education programs increased, with the total number of campuses also increasing. One (1) new Advanced Practice Registered Nursing Education Program opened. Specific to registered nursing education programs, two (2) new baccalaureate nursing education campuses and two (2) new associate degree nursing education program campuses opened. Practical nursing education programs gained one (1) new program. 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 2018	FY 2019	FY 2020	FY 2021	FY 2022
Advanced Practice Registered Nursing				100%	100%
Baccalaureate Degree*	100%	99.5%	96.8%	98.7%	99.5%
Associate Degree	92.9%	90.4%	92.9%	93.3%	92.4%
Practical Nursing	46.4%	48.9%	47.1%	44.3%	45.3%

*RN-BSN not included



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APRN programs are required to employ full-time faculty with a master’s or higher degree in nursing. 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 decreased slightly from FY 2018 to FY 2019, declining in FY 2020 and increasing in FY 2021 to FY 2022. The associate degree programs experienced a decrease in the percentage of master’s prepared or higher degree faculty from FY 2018 to FY 2019 and increasing in FY 2020 to FY 2021. The percentage of master’s prepared full-time faculty decreased slightly in FY 2022. 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 peaked in FY 2019 and decreasing FY 2020 and FY 2021. In FY 2022 the percentage of practical nursing faculty with a master’s degree in nursing or higher increased.

Applications to Nursing Education Programs

Type of Program	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022	1 & 5 Year Variances
Advanced Practice Registered Nursing				**263	**372	↑ 41.4% & N/A
Baccalaureate Degree*	2,766	2,484	2,859	3,417	2,904	↓ 15% & ↑ 5%
Associate Degree	3,453	3,750	3,120	3,428	3,159	↓ 7.8% & ↓ 8.5%
Practical Nursing	2,742	2,829	3,414	3,163	3,418	↑ 8% & ↑ 24.7%
Total	8,961	9,063	9,393	10,008	9,481	↓ 5.3% & ↑ 5.8%

*RN-BSN not included

** APRN Nursing Program applications are not included in the total number of applications. FY 2022 is the second year this data is reported.

APRN Nursing Programs applications increased from FY 2021 to FY 2022. While the number of individuals applying to baccalaureate degree nursing programs increased in applications FY 2020 to FY 2021; the number applying significantly decreased for FY 2022. The number of applications to associate degree programs reflected an increase from FY 2018 to FY 2019, then decreased somewhat in FY 2020. Likewise, the number of individuals applying to associate degree programs significantly increased in FY 2021, and significantly decreased FY 2022. The number of applications to practical nursing education programs increased this past year. There has been a 5.3 percent decrease in total applications submitted to nursing education programs over the past year.



Admissions to Nursing Education Programs

Type of Program	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022	1 & 5 Year Variances
Advanced Practice Registered Nursing				**128	**134	↑ 4.7% & N/A
Baccalaureate Degree*	1,488	1,213	1,236	1,247	1,338	↑ 7.3% & ↓ 10.1%
Associate Degree	1,874	2,077	1,965	1,650	1,716	↑ 4% & ↓ 8.4%
Practical Nursing	1,294	1,147	1,331	1,275	1,357	↑ 6.4% & ↑ 4.9%
Total	4,656	4,437	4,532	4,172	4,411	↑ 5.7% & ↓ 5.3%

*RN-BSN not included

** APRN Nursing Program admissions are not included in the total number of admissions. FY 2022 is the second year this data is reported with a slight increase seen in admissions.

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 have increased steadily from FY 2019 with a peak in admissions seen in FY 2018. Admissions to the associate degree nursing programs declined in FY 2021, increasing in FY 2022 with a peak in admissions in FY 2019. Admissions to practical nursing programs decreased in FY 2021, increasing in FY 2022, with a peak in admissions seen in FY 2020. Total admissions to Oklahoma nursing education programs increased by 5.7 percent over the past fiscal year.

Student Enrollment in Nursing Education Programs

Type of Program	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022	1 & 5 Year Variances
Advanced Practice Registered Nursing				**299	**320	↑ 7% & N/A
Baccalaureate Degree*	2,702	2,284	2,042	2,407	2,594	↑ 7.8% & ↓ 4%
Associate Degree	2,948	3,217	3,288	2,853	2,911	↑ 2% & ↓ 1.3%
Practical Nursing	1,933	1,546	1,632	1,315	1,466	↑ 11.5% & ↓ 24.2%
Total	7,583	7,047	7,362	6,575	6,971	↑ 6% & ↓ 8.1%

*RN-BSN not included

** APRN Nursing Program enrollments are not included in the total number of admissions. FY 2022 is the second year this data is reported with an increase seen in enrollments over FY 2021.



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Student enrollment in baccalaureate degree nursing education programs increased for FY 2021 and FY 2022 after a steady decrease in enrollment from FY 2019 and FY 2020. Enrollment in associate degree nursing education programs increased from FY 2018 to FY 2020, decreased in FY 2021, and increased slightly in FY 2022. Enrollment in practical nursing education programs increased over the past fiscal year, with the highest enrollment over the past five years occurring in FY 2018. Associate degree programs have the highest enrollment of the three types of nursing education programs, achieving a record high enrollment in FY 2020. Total overall enrollments in nursing education programs increased this past fiscal year by 6.0 percent.

Graduates from Nursing Education Programs

Type of Program	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022	1 & 5 Year Variances
Advanced Practice Registered Nursing				**72	**68	↓ 5.5% & N/A
Baccalaureate Degree*	870	834	859	871	802	↓ 7.9% & ↓ 7.8%
Associate Degree	1,140	1,217	1,294	1,323	1,180	↓ 10.8% & ↑ 3.5%
Practical Nursing	1,062	954	852	959	834	↓ 13% & ↓ 21.5%
Total	3,072	3,005	3,005	3,153	2,816	↓ 10.7% & ↓ 8.3%

*RN-BSN not included

** APRN Nursing Program graduates are not included in the total number of admissions. FY 2022 is the second year this data is reported with a decrease seen in the APRN Nursing Program graduates.

The number of nursing graduates from Oklahoma nursing education programs this past fiscal year decreased by 10.7 percent over the previous fiscal year, with FY 2021 having the largest number of graduates over the past five years. Baccalaureate degree nursing programs report a decrease in graduates of 7.9 percent over the past year. The number of graduates from associate degree nursing education programs and practical nursing education programs decreased this past fiscal year.

Admissions of Licensed Nurses in Nursing Education

Category	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022	1 & 5 Year Variances
APRN				128	134	↑ 4.7% & N/A
LPN-ADN	351	428	383	342	324	↓ 5.3% & ↓ 7.7%
LPN-BSN	16	22	57	12	31	↑ 158.3% & ↑ 93.8%
RN-BSN* Traditional Program	256	19	358	38	138	↑ 263.2% & ↓ 46.1%

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



Enrollment in an advanced practice registered nursing program requires an individual to hold a registered nurse license. Over the past fiscal year, the number of Licensed Practical Nurses (LPNs) admitted to associate degree nursing education programs decreased while the number of LPNs admitted to baccalaureate nursing education programs increased. The majority of LPNs chose associate degree education as their entry point into registered nursing. The significant increase for admissions of RN-BSN students seen in FY 2020 from the previous fiscal year was attributed to the transitioning of students from RN-BSN programs to traditional BSN programs through advanced standing. The number of RN-BSN admissions increased from FY 2021 to FY 2022. 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 2018	FY 2019	FY 2020	FY 2021	FY 2022
Advanced Practice Registered Nursing				36.8%	36.3%
Baccalaureate Degree*	29.6%	29.6%	33.3%	42.8%	43.3%
Associate Degree	34.1%	35.4%	33.7%	43%	40.3%
Practical Nursing	40.9%	41.3%	40%	47%	51.7%

*RN-BSN not included

Percentages of minority students enrolled in Oklahoma nursing education programs increased over the past year for baccalaureate degree and practical nursing education programs with practical nursing programs showing the highest increase of 4.7 percent. The percentage of enrollment of minorities decreased in associate degree nursing programs. This is the second year for advanced practice registered nursing education programs to report.

Percentage of Male Students Enrolled in Nursing Education Programs

Type of Program	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
Advanced Practice Registered Nursing				13.7%	16.3%
Baccalaureate Degree*	15.6%	12%	12%	12.9%	12.9%
Associate Degree	14.2%	12.6%	13.9%	13.2%	13.4%
Practical Nursing	9.3%	9%	7%	7.4%	9.5%

*RN-BSN not included

While the percent of male students enrolling in nursing education programs has remained relatively small, there was an increase in the percent of male students enrolled in associate degree and practical nursing education programs over the past year. The percentage stayed the same for baccalaureate degree nursing education programs. This is the second year for advanced practice registered nursing education programs to report with an increase of 2.6 percent.



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

Type of Program	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
Advanced Practice Registered Nursing				37.6	34.3
Baccalaureate Degree*	25.6	26.3	23.6	25.3	27.1
Associate Degree	29.6	28.2	37.9	27.9	28.3
Practical Nursing	27.7	28	28.1	27.7	28.1

*RN-BSN not included

The average age of students enrolled in advanced practice nursing programs was 34.3 years. The average age of students enrolled in baccalaureate nursing education programs decreased over the past year, while the average age of students in associate degree nursing education programs and practical nursing education programs has increased slightly.

Mean Completion Rates of Nursing Education Programs

Type of Program	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
Advanced Practice Registered Nursing				87.8%	87.8%
Baccalaureate Degree*	87.1%	86.7%	90.3%	87%	86.9%
Associate Degree	79.8%	80.6%	82.4%	81.5%	77%
Practical Nursing	80.2%	81.5%	77.5%	80.7%	78.9%

*RN-BSN not included

The data continues to support that most students admitted to nursing education programs are successful in completing their programs. In the past fiscal year, the completion rate for nursing education programs for baccalaureate degree, associate degree, and practical nursing decreased.

Requests for Program Changes

(Number of Programs Impacted With Percent of Total Programs Noted in Parentheses)

Type of Change	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
Change in Curriculum	5 (8.6%)	5 (8.5%)	3 (5.1%)	4 (6.7%)	6 (9.8%)
Program Format Change	0 (0%)	0 (0%)	0 (0%)	0 (0%)	1 (1.6%)
Extended/Additional Classes	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)
New Nursing Program/ Campus	0/2 (0%)/(2%)	1/2 (1.7%)/(2%)	1/0 (1.7%)	1/4 (1.7%)/(3.9%)	1/4 (1.6%)/(3.8%)
New APRN Program/ Campus				2/0 (50%)	1/0 (20%)



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

Type of Action	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
Routine Survey Visits	7 (12.1%)	4 (6.8%)	1 (1.7%)	8 (13.3%)	6 (9.8%)
Board-Directed Survey Visits	0 (0%)	1 (1.7%)	3 (5.1%)	3 (5%)	1 (1.6%)
Consultative Survey Visits	1 (1.7%)	3 (5.1%)	2 (3.4%)	1 (1.7%)	0 (0%)
Warnings Issued	0 (0%)	1 (1.7%)	2 (3.4%)	0 (0%)	3 (4.9%)
Programs on Conditional Approval	1 (1.7%)	0 (0%)	0 (0%)	1 (1.7%)	1 (1.6%)
Programs/Campuses Closed	5* (8.6%)	4* (6.8%)	1/2 (1.7%) (2%)	0/1 (0%)/(1%)	0/2 (0%)/(1.9%)
Pass Rate Reports Required	15 (25.9%)	6 (10.2%)	10 (10.2%)	8 (7.8%)	10 (9.5%)
Follow-Up Reports Required	0 (0%)	1 (1.7%)	11 (11.2%)	2 (2%)	3 (2.9%)

*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:

1. *Employment of Nursing Students or Non-Licensed Graduates Guidelines*, #E-04, 7/27/2021 [Reviewed]
2. *Simulated Patient Care Experiences (SPCE) for Registered and Practical Nursing Programs Guidelines*, #E-11, 7/27/2021 [Revised]; 3/29/2022 [Revised]
3. *NCLEX or AUA Certification Applicants With History of Arrest/Deferred Sentence/Conviction Policy*, #E-20, 11/16/2021 [Revised]
4. *Utilizing Skills Observers to Conduct AUA Skills Examinations Policy*, #E-42, 11/16/2021 [Revised]
5. *Review and Challenge of National Council Licensure Examination (NCLEX) Policy*, #E-25, 11/16/2021 [Reviewed]
6. *Nursing Education Program with Extended and Multiple Campuses*, #E-03, 2/1/2022 [Reviewed]
7. *Nursing Education Programs Offering Non-Traditional Learning Options Guidelines*, #E-08, 2/1/2022 [Revised]
8. *Board Decisions Regarding Nursing Education Programs*, #E-10, 2/1/2022 [Revised]
9. *Approved Skills List for Performance by Board-Certified Advanced Unlicensed Assistants*, #E-43, 2/1/2022 [Reviewed]



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10. *Medic Veteran to Licensed Practical Nurse Bridge Course Guideline, #E-45, 2/1/2022 [Revised]*
11. *Preceptor Policy for Registered Nurses and Licensed Practical Nurses, #E-02, 3/29/2022 [Revised]*
12. *Special Reports from Nursing Education Programs to the Board Guidelines, #E-06, 3/29/2022 [Revised]*
13. *Determining Appropriate Faculty to Student Ratios in the Clinical Area in Board-Approved Nursing Education Programs Guidelines, #E-09, 3/29/2022 [Revised]*

In FY 2022, the Board reviewed reports of survey visits conducted in the following nursing education programs and recommended continuing full approval:

- ATA College, Tulsa, Practical Nursing Program, Virtual, 1/18-20/2022
- Central Technology Center, Practical Nursing Program, Virtual, 3/8-10/2022
- Marian University, Leighton School of Nursing, Accelerated Bachelor of Science Nursing Program, OKC, 4/5-7/2022
- Southwest Technology Center, Practical Nursing Program, Altus, 4/26-27/2022
- High Plains Technology Center, Practical Nursing Program, Woodward, 5/5-6/2022
- Green Country Technology Center, Practical Nursing Program, Okmulgee, 6/8-9/2022

In FY 2022, there were no nursing education program focus survey visits reviewed that recommended continuing full approval.

In FY 2022, the Board reviewed the report of a focus survey visit conducted in the following nursing education program and recommended continued conditional approval status:

- Redlands Community College, El Reno, Associate Degree Nursing Program, Virtual, 10/4/2021

At the closure of FY 2022, there were no survey visits pending Board approval.

In FY 2022, there were no Nursing Education Program consultative visits conducted.

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 2022 by the following nursing education programs with a Calendar Year 2020 NCLEX pass rate ten percentage points or more below the national average:

- Redlands Community College, El Reno, Associate Degree Nursing Program
- Langston University, Tulsa, Baccalaureate Degree Nursing Program
- Southern Nazarene University, Bethany, Baccalaureate Degree Nursing Program
- Western Oklahoma State College, Altus, Associate Degree Nursing Program
- Langston University, Langston, Baccalaureate Degree Nursing Program
- Seminole State College, Seminole, Associate Degree Nursing Program
- Tulsa Community College, Tulsa, Associate Degree Nursing Program
- Western Oklahoma State College, Elk City & Lawton, Associate Degree Nursing Program
- Kiamichi Technology Center, Idabel, Practical Nursing Program
- Northeast Technology Center, Afton, Practical Nursing Program



A Board subcommittee reviewed the reports in October 2021, and made recommendations for each program. These recommendations were reviewed and accepted by the Board during the November 2021 meeting.

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

In FY 2022, the Board approved no Step I applications for a new program:

In FY 2022, the Board granted Provisional Approval for one (1) new program:

- MedNoc Training College, Practical Nursing Program, OKC, Provisional Approval, 7/28/2021

In FY 2022, the Board granted full approval to one (1) advanced practice registered nursing programs:

- Oral Roberts University, Anna Vaughn School of Nursing, Doctorate of Nursing Practice, Advanced Practice Registered Nurse Education Program-Certified Nurse Practitioner-Family, 3/29/2022

In FY 2022, the Board granted full approval to one (1) advanced unlicensed assistant program:

- Comanche County Memorial Hospital, Advanced Unlicensed Assistant Program, Lawton, 5/24/2022

In FY 2022, the Board approved additional program offerings on extended campuses for the following:

- Oklahoma Christian University, Baccalaureate Degree Nursing Program, Chickasaw Nation Medical Center in Ada and Mercy Hospital in Oklahoma City 11/18/2021
- Murray State College, Associate Degree Nursing Program, Durant, 2/2/2022
- Northeastern Oklahoma A&M College, Associate Degree Nursing Program, Kansas, 2/2/2022

In FY 2022, the Board approved additional program offerings on the same campuses for the following:

- University of Oklahoma, Fran and Earl Ziegler College of Nursing, Advanced Practice Registered Nursing Program, Additional Roles, DNP-NP, Psych/MH and DNP-NP and CNS, Neonatal; Oklahoma City, 2/3/2022
- Moore-Norman Technology Center, Practical Nursing Program, High School Select Pathway, Norman, 5/24/2022

In FY 2022, the following nursing education programs closed:

- East Central University, Baccalaureate Degree Nursing Program, Durant, June 2021

In FY 2022, the Board approved curriculum change requests from the following programs:

- Seminole State College, Associate Degree Nursing Program, Seminole, Curriculum Change, 7/29/2021
- Tulsa Community College, Associate Degree Nursing Program, Tulsa, Curriculum Adjustment, 7/29/2021
- Carl Albert State College, Associate Degree Nursing Program, Poteau and Sallisaw, Curriculum Change, 7/29/2021
- Francis Tuttle Technology Center, Practical Nursing Program, Oklahoma City, Curriculum Change, 7/29/2021



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- Indian Capital Technology Center, Practical Nursing Program, Stilwell, Instructional Format Change, 2/2/2022
- The University of Oklahoma, Fran and Earl Ziegler College of Nursing, Baccalaureate Degree Nursing Program, Oklahoma City, Tulsa, Lawton, Norman, and Duncan, Curriculum Change, 2/3/2022
- Rogers State University, Baccalaureate Degree Nursing Program, Claremore, Curriculum Change, 5/24/2022

Follow-Up Pass Rate Reports

There were three (3) nursing education program follow-up pass rate reports for FY 2022:

- Langston University, Baccalaureate Degree Nursing Program, Tulsa, regarding pass rates/warning status, 5/24/2022
- Southern Nazarene University, Baccalaureate Degree Nursing Program, Bethany, regarding pass rates/warning status, 5/24/2022
- Western Oklahoma State College, Associate Degree Nursing Program, Altus, regarding pass rates/warning status, 5/24/2022

Follow-Up Reports

There were no nursing education program follow-up reports for FY 2022.

Meetings:

The Nursing Education Consultant attended and provided input/directions in 9 meetings, which were primarily related to nursing education this fiscal year, as compared to 10 meetings attended in FY 2021.

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:

Kathy O'Dell, DNP, RN, Board Representative
Shelly Swalley, MSN, RN, Board Representative
Nikole Hicks, PhD, RN, CNE, Board Representative
Kim Stout, RN, Oklahoma Organization of Nurse Executives
Liz Michael, MS, RN, Oklahoma Organization of Nurse Executives
Chris King, RN, Oklahoma Organization of Nurse Executives
Karen Vahlberg, BSN, RN, Oklahoma Association for Home Care
Michele Bradshaw, MSN, RN, Oklahoma Nurses Association
Shelly Wells, PhD, MBA, MS, APRN-CNS, Oklahoma Nurses Association
Jennifer Gray, PhD, RN, Baccalaureate & Higher Degree Deans Council
Marcia Cullum, MSN, RN, Associate Degree Directors Council



Marietta Lynch, BSN, RN, Oklahoma Association of Health Care Providers
Amanda Churchman, MSN, RN, OK Department of Career & Technology Education
Stephanie Beauchamp, EdD, Oklahoma State Regents for Higher Education
Amy Gaither, MS, RN, Oklahoma State Department of Health
Dolores Cotton, MS, MEd, RN, Practical Schools of Nursing
Sarah McDaniel, LPN, Board-appointed LPN
Nicole Meek, BSN, RN, Board-appointed Representative of AUA Programs
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 virtually on October 22, 2021, February 19, 2021 and June 17, 2022.

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:

Carl Lafoon, DNP, APRN-CNP, Oklahoma Association of Nurse Practitioners
Margaret Rosales, MSN, 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, APRN-CNP, American College of Nurse Midwives, OK Chapter Affiliate
Jill Nobles-Botkin, MSN, APRN-CNM, American College of Nurse Midwives, OK Chapter Affiliate
Regina Kizer, MSN, APRN-CNM, American College of Nurse Midwives, OK Chapter Affiliate
Steve McKittrick, MS, MHS, 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
Rhonda Coleman-Jackson, DNP, APRN-CNS, Oklahoma Association of Clinical Nurse Specialists
Stephanie Moore, MSN, APRN-CNS, Oklahoma Association of Clinical Nurse Specialists
Karen Genzel, DNP, APRN-CNS, Oklahoma Association of Clinical Nurse Specialists
Amy Costner-Lark, DNP, APRN-CNS, Board-appointed Faculty from an Oklahoma Advanced Practice Registered Nursing Education Program for Clinical Nurse Specialist Educator



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

Amber Garretson, MSN, APRN-CNS, Board Representative

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

The Advanced Practice Advisory Committee meetings were held virtually on September 23, 2021 and February 22, 2022.

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

Jenny Schmitt, APRN-CRNA

Bruce Kennedy, APRN-CRNA

Appointed by the Oklahoma Society of Anesthesiologists

Jeremy Almon, MD

Brian Seacat, MD

Appointed by the Oklahoma Pharmaceutical Association

Mark St. Cyr, DPh

The Oklahoma Board of Nursing representative for CY 2022 was Kathy O'Dell, DNP, RN Board staff representatives were Gina Stafford, BSN, RN, and Jackye Ward, MSN, RN.

The FY 2022 annual meeting of the CRNA Formulary Advisory Council was held April 25, 2022. The CRNA Council reviews and provides recommendations for revision to the *CRNA Inclusionary Formulary, #P-50*, which is then reviewed by the Board for approval. The CRNA Formulary Advisory Council meeting was held consistent with the Open Meeting Act, 25 O.S. L. 2011 §301, *et seq.*

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:

Kathy O'Dell, DNP, RN
Jessica Cotton, MSN, APRN-CNM, APRN-CNP
Tracy Langley, MSN, APRN-CNP
Robin Potter-Kimball, MSN, APRN-CNS

Appointed by the Oklahoma Pharmaceutical Association:

Jay Kinnard, DPh
Deaton Chancey, DPh
JJ Peek, DPh
Kacee Blackwell, DPh

Appointed by the Oklahoma State Medical Association:

Samuel Ratermann, MD
Edward Legako, MD
Dana Stone, MD

Appointed by the Oklahoma Osteopathic Association:

Jason Regan, DO

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

The Formulary Advisory Council met August 19, 2021 to review the *Exclusionary Formulary for Advanced Practice Registered Nurses with Prescriptive Authority, #P-50B*. Formulary Advisory Council meeting was held consistent with the Open Meeting Act, 25 O.S. L. 2011 §301, *et seq.*



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 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. 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 2022, the Board reviewed or revised the following policies of the Program:

Peer Assistance Program Supervised Practice Guidelines, #PA-09

Peer Assistance Committee Code of Conduct, #PA-17

Peer Assistance Program Noncompliance Guidelines, #PA-20

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 3 committee members this year.

The following individuals have served on PAC during FY 2022:

Brandi Beers, RN	Penny Ramirez, RN
Robin Brothers, PhD, RN	Doug Richardson, LADC
Deborah Campbell, RN	Melissa Rios, LADC
Tim Castoe RN	Kimberly Roberts, APRN-CNS
Laura Clarkson, RN, CARN	Jaye Robertson, DNP, RN
Cathey Chambers, LADC	Becky Smith, MHR, RN, LADC*
Jeff Hudson, RN	Sheila St. Cyr, MS, RN-BC
Chris King, RN	Heather Stranger, MSN, RN
Dianna McGuire, MS, LADC, LPC, NCGCII	Leah Trim, RN
James Patterson, CADC, ICADC	

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



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During FY 2022, there were 19 individuals who served on committees. Each member averaged 29 hours in committee meetings (not including preparation time for the meeting). This is the equivalent of 3.6 days each of service work to the program.

There are currently 15 individuals still serving on four Committees. Twelve of the current PAC members are licensed nurses, 4 are certified or licensed in addictions and 9 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 meetings, volunteered an average of 46 hours, accepted 4 new applicants into the Program and met with an average of 32 nurses to review progress. The PAC reviewed progress with approximately 38% of the participants each month.

PAC Activity in Past Five Years

Activity	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022	Variations 1 Year & 5 Year
PAC Meetings	45	44	35	37	36	↓ 2 % & ↓ 20%
Scheduled Reviews	569	401	246	275	287	↑ 4% & ↓ 50%
Noncompliance Reviews	142	156	104	100	94	↓ 6 % & ↓ 34%
Total Reviews	711	557	350	372	383	↑ 3 % & ↓ 46%
Volunteer Hours	818	704	539	556	546	↓ 1.7 % & ↓ 33%

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.

Of the 50 nurses initiating contact with the Program for participation and completing the application process, 94% (47 nurses) entered the Program, 4% (2 nurses) failed to keep their appointment with the PAC or withdrew the application, 0% (0 nurses) were not accepted into the Program by the PAC. An additional 6 nurses contacted the Program and were interviewed by staff but chose not to make application.



New Cases in the Past Five Years

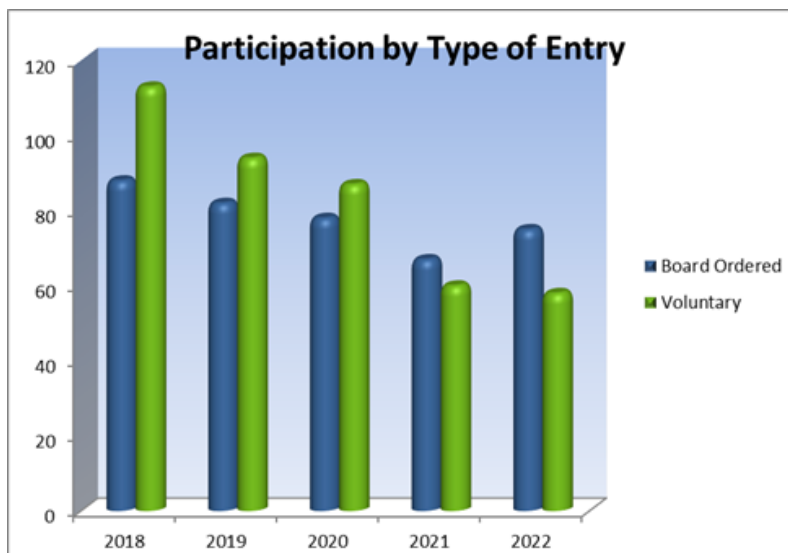
Activity	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022	Variations 1 Year & 5 Year
Entry Appointments Scheduled	59	64	69	41	50	↑ 22% & ↓ 15%
Entry Appointments Not Kept	3	4	1	2	2	-- & ↓ 33%
Entry Appointments Conducted	56	60	68	39	48	↑ 23% & ↓ 14%
Applicants Not Accepted	2	2	3	1	0	↓ 100% & 100%
Applicants Accepted	54	54	60	37	48	↑ 30% & ↓ 11%
Applicants Declining Contract	0	1	3	3	0	↓ 100% & --
Total Entering Program	54	54	60	37	47	↑ 27% & ↓ 13%
Total New Cases	59	64	69	41	50	↑ 22% & ↓ 15%

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 2022 was 31 months.

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 2022 was 11 months, compared to 13 months in FY 2021. Nine (45%) of the 20 individuals terminated from the program were in the program 3 months or less. The majority (65%) of individuals terminated from the program had less than one year’s participation and 60% 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).





Nurses Entering the Program with Board Action

Activity	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022	5 Year Total	Variances 1 Year & 5 Year
Entering	28	27	29	20	27	131	↑ 35% & --
Participants on 6/30	54	51	46	48	52	--	↑ 8% & ↓ 4%
Participants Discharged	18	15	20	9	13	75	↑ 44% & ↓ 28%
Participants Terminated	16	16	12	10	10	64	-- & ↓ 38%
Total Participation	88	82	78	67	75	*191	↑ 12% & ↓ 15%

(*5 year total participation equal number of participants on 6/30/2022 + discharges and terminations between 7/1/2018– 6/30/2022)

Thirty-four percent of the 191 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. Thirty-nine percent have been discharged for successful completion and twenty-seven percent are still in the program.

Nurses Entering the Program without Board Action

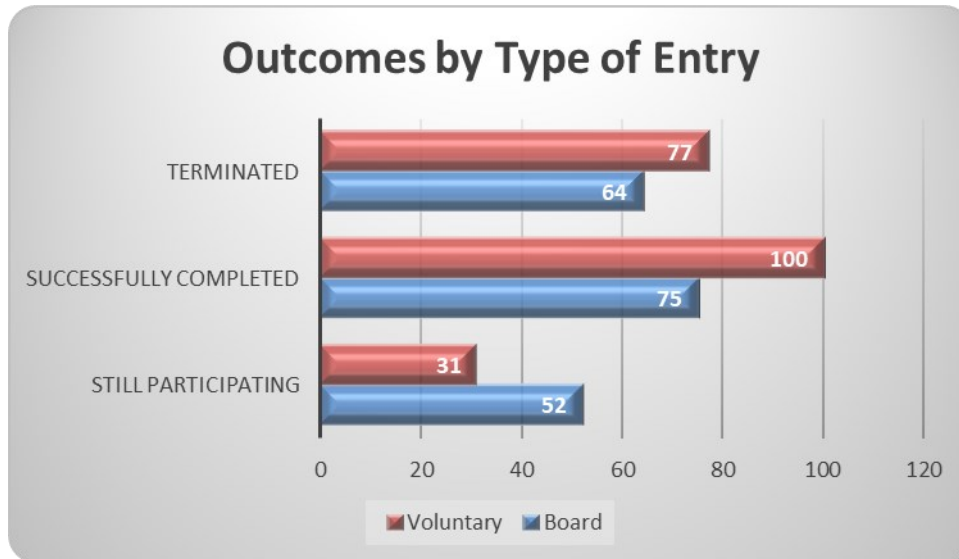
Activity	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022	5 Year Total	Variances 1 Year & 5 Year
Entering	26	27	31	17	20	121	↑ 18% & ↓ 23%
Participants on 6/30	68	54	44	38	31	--	↓ 18% & ↓ 54%
Participants Discharged	23	26	22	12	17	100	↑ 42% & ↓ 26%
Participants Terminated	22	14	21	10	10	77	-- & ↓ 55%
Total Participation	113	94	87	60	58	*208	↓ 3% & ↓ 49%

(*5 year total participation equal number of participants on 6/30/2022 + discharges and terminations between 7/1/2018 – 6/30/2022)

Sixty-five percent of the nurses in the program this year entered without Board Action. Thirty-seven percent of the 208 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-eight percent of the 208 nurses participating without Board Action in the past five years have been discharged for successful completion. Fifteen percent are still in the program.



**Outcomes by Type of Entry
2018-2022**



All Nurses Entering the Program

Activity	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022	5 Year Total	Variations 1 Year & 5 Year
Participants on 6/30	122	105	90	86	83	486	↓ 3% & ↓ 32%
Participants Discharged	41	41	42	21	30	175	↑ 43% & ↓ 27%
Participants Terminated	38	30	33	20	20	141	-- & ↓ 47%
Total Participants	201	176	165	127	133	*399	↑ 5% & ↓ 34%
Applicants not Entering	4	7	7	6	2	26	↓ 66% & ↓ 50%
Total Cases**	205	183	172	133	135	†425	↑ 2% & ↓ 34%

(*5 year total participation equal number of participants on 6/30/2022 + discharges and terminations between 7/1/2018 – 6/30/2022.

**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)

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

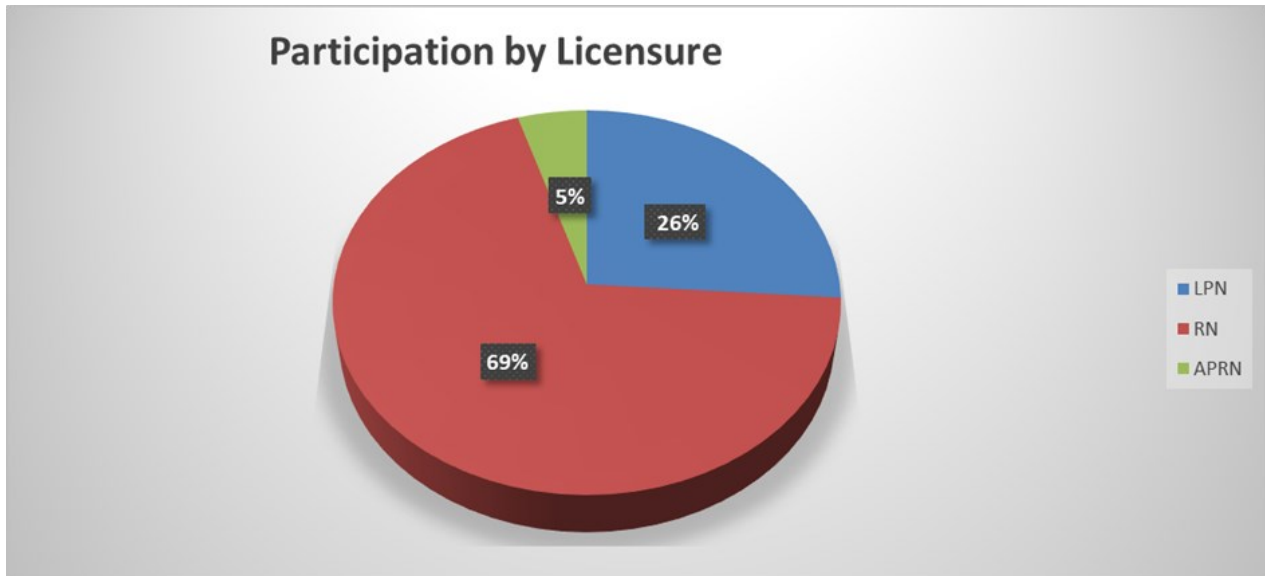
Nurses referred to the program without Board Action account for fifty-two percent of the nurses participating in the program in the past five (5) years, fifty-five percent of those terminated from the program, and seventy-two percent of the nurses successfully completing the program in the last five 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). Participation by license level for the past five years is illustrated in the following chart.

Participation by Licensure Type



Participation by Gender

Summary of Male Participation FY 2018–FY 2022

Activity	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022	5 Year Total	Variations 1 Year & 5 Year
Participants on 6/30	21	17	14	16	16	84	-- & ↓ 24%
Participants Discharged	4	7	8	3	5	27	↑ 67% & ↑ 25%
Participants Terminated	4	7	4	2	8	25	↑ 300% & ↑ 100%
Total Participation	29	31	26	21	29	*68	↑ 38% & --

(*5 year total participation equal number of participants on 6/30/2022 + discharges and terminations between 7/1/2018 – 6/30/2022)

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



Summary of Female Participation FY 2018–FY 2022

Activity	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022	5 Year Total	Variances 1 Year & 5 Year
Participants on 6/30	101	88	76	70	67	402	↓ 4% & ↓ 34%
Participants Discharged	37	34	34	18	25	148	↑ 39% & ↓ 32%
Participants Terminated	34	23	29	18	12	116	↓ 33% & ↓ 65%
Total Participation	172	145	139	106	104	*331	↓ 8% & ↓ 44 %

(*5 year total participation equal number of participants on 6/30/2022 + discharges and terminations between 7/1/2018 – 6/30/2022)

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

Office Activity

Office Activity by Type

Activity	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022	Variances 1 Year & 5 Year
Reports Monitored	5,265	4,172	3,990	3,274	3,468	↑ 6 % & ↓ 34%
Educational Presentations	7	9	8	3	2	↓ 33% & ↑ 71 %
Applicant Interviews	73	74	84	46	51	↑ 11% & ↓ 30%
Average Time From Application to Entry	7 days	6 days	10 days	13 days	7 days	↓ 46% & --
Average Time to Address	.21	< 1 day	< 1 day	< 1 day	<1 day	-- & --
Average Time to Remove from Nursing Practice when Relapse is Identified	<1 day	< 1 day	< 1 day	< 1 day	<1 day	-- & --

Forty-four 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.

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 2022, it took an average of <1 day for the program to address noncompliance issues, exceeding the performance measure. The program directs nurses with identified safety issues, relapse behaviors and/or identified relapse to cease nursing practice within one day of identification.



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The program defines success in the program as the number of participants who have successfully completed the program since its inception plus the number of participants still participating in the program at the end of the fiscal year. For FY 2022, the program success rate was 91%, compared to a 90% success rate at the end of FY 2021.

Office Activity Per Participant

Average Activity Per Participant Per Year	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022	5-Year Average
Reports	26	24	24	25	26	25
PAC Reviews	3	2.7	2.5	2.3	2.9	3

Relapse Rates

Relapse is defined as unauthorized use of mind-altering, intoxicating, potentially addictive drugs after a period of sustained abstinence. During FY 2022, the total relapse rate was 5%, which was identical to the 5% relapse rate in FY 2021.



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, revoke or suspend any licensure to practice as an Advanced Practice Registered Nurse, Registered Nurse single-state or multistate, or Licensed Practical Nurse, single-state or multistate, multistate privilege to practice in Oklahoma, 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 2022 that resulted in opened cases for investigation increased eleven percent (11%) compared to FY 2021. The number of alleged violations received against licensees/applicants represents 0.4% 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 2022 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	131	51,087	0.3%
LPN	109	16,512	0.7%
APRN	41	6,011	0.7%
AUA	0	387	0%
NCLEX-RN	20	2,162	0.9%
RN Endorsement	10	1,128	0.9%
NCLEX-LPN	29	992	2.9%
LPN Endorsement	3	160	1.9%
Total	343	78,439	0.4%

*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 2022	Drug	Nursing Practice	Abuse/Neglect	Felony	Viol. of Order	Other*	Reinstatement Return to Active	PAP Related	Worked Lapsed License	Deceit	Total
Number	64	53	7	36	0	98	13	10	48	14	343
Percentage	19%	15%	2%	11%	0%	29%	4%	3%	14%	4%	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 2022	Hospital	Nursing Home	Home Health	Other Nursing*	Other Non-Nursing**	Total
Number	57	44	17	87	138	343
Percentage	16%	13%	5%	29%	37%	100%

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

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

Types of Cases Opened in Clinical Settings in FY 2022

Type	Hospital	Nursing Home	Home Health	Other Nursing/Non-Nursing
Drug	37	8	6	13
Nursing Practice	11	14	3	25
Abuse/Neglect	0	3	1	3
Worked Lapsed License	7	11	2	28
Other	2	8	5	157
Total	57	44	17	225

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 2022, 45% of the cases were resolved/closed within six months.



FY 2022 Resolution/Closure Based on Length of Time Opened

Board Resolved	Total	Board Staff Closed	Total	Grand Total
Within 6 months	49	Within 6 months	110	159
After 6 months	102	After 6 months	88	190
Totals	151	Totals	198	349

Reasons for Closure by Board Staff

FY 2021	Insufficient Evidence	No Violation	Other*	Total
Total	43	7	141	191
Percentage	23%	3%	74%	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 10% decrease in the total number of hearings in Fiscal Year 2022 compared to Fiscal Year 2021.

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
2021	94	74	168
2022	92	59	151
Variance	↓ 2%	↓ 20%	↓ 10%

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 2022, fifty-nine (59) 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 table below indicates the type and number of Agreed Disciplinary Orders issued by the Executive Director during FY 2022.



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	20
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	8

Rate and Number of Individuals Disciplined

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 individuals disciplined in FY 2022 by type of licensure is shown below.

Number of Individuals Disciplined in FY 2022 by Type of License

Type	Total Number Disciplined	Total Number of Licenses	Rate of Nurses Disciplined
RNs	72	51,087	0.1%
LPNs	60	16,512	0.4%
APRNs (licensure & prescriptive authority recognition)	16	6,011	0.3%
AUAs	0	387	0%
All Individuals	148	73,997	0.2%



Nurse Population Data

The nurse population report (APRN, RN and LPN) in Oklahoma for FY 2022 is compiled from information provided by licensees at the time of licensure or renewal of licensure through June 30, 2022, for Advanced Practice Registered Nurses, Registered Nurses and Licensed Practical Nurses.

The summary shows Fiscal Year 2022 (July 1, 2021 to June 30, 2022).

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 2022	
RNs	51,087
LPNs	16,512
APRNs	5,981
Prescriptive Authority	4,148
AUAs	387
Nursing Education Programs	61
AUA Education Programs	6
Total Records	206,893

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