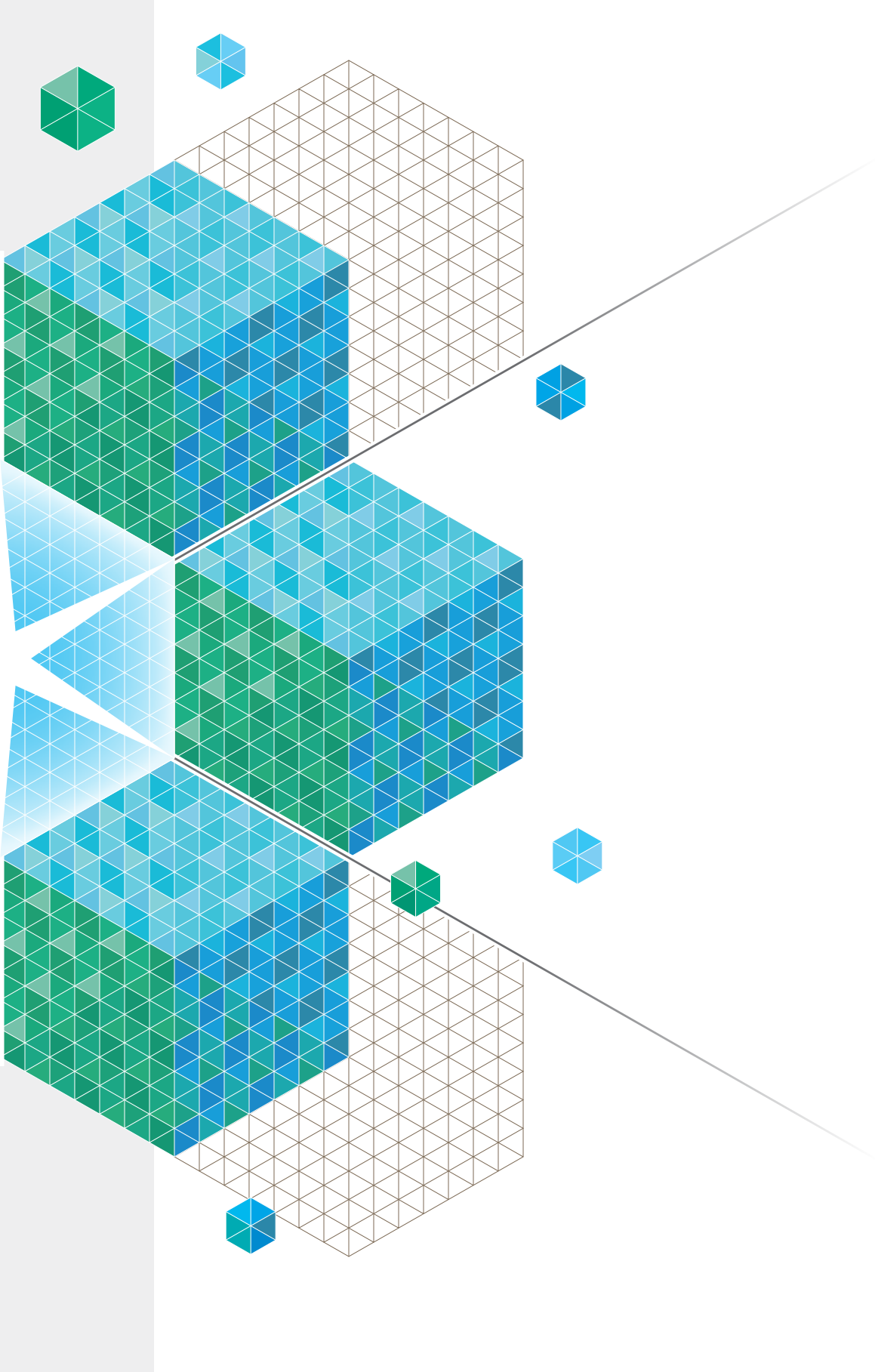




2017
Year in Review

National Council of State Boards of Nursing



2017 Year in Review

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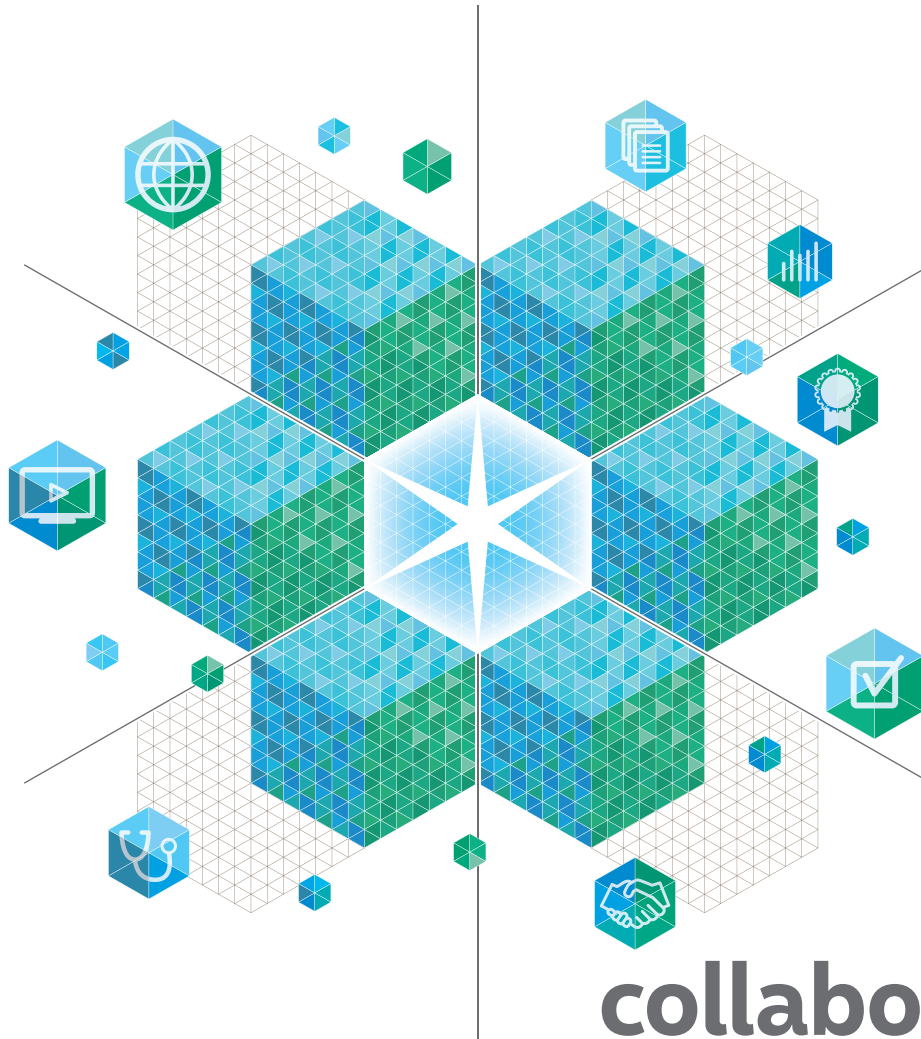
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“Teamwork is the ability to work together toward a common vision. The ability to direct individual accomplishments toward organizational objectives. It is the fuel that allows common people to attain uncommon results.”

— Andrew Carnegie



collaborating
for the
future of
regulation

The 2017 NCSBN Annual Theme

The theme for 2017, **Collaborating for the Future of Regulation**, arises out of the concept of hive intelligence utilizing the beehive, nature's finest example of collaboration as the center point of the design. This hexagon-shaped graphic is an illustration of the work of member boards and NCSBN staff in collaboration with external organizations, to advance its regulatory mission and vision.

The honeycomb formation in this image portrays high-functioning collaboration and what can be achieved through it. The small floating hexagons are a dynamic element in the design presenting the fruit of labor incorporated into the system much like pollen-laden bees would stream into a hive. Each of the individual floating hexagon pieces are segmented into color patterns that have a corresponding match in the larger hexagons, depicting the role that each individual and board of nursing has to play.

At the core of the design is a star that is a radiating energy source that both produces and takes in fuel powered by the work of all. The six-pointed star is inspired by the stars on the City of Chicago flag—a nod to the headquarters of NCSBN.

The axis lines of the illustration extend outward from the center hexagon indicating expansion, growth and an increasing influence in the regulatory field both nationally and internationally.

The icons highlight areas of NCSBN's products, services and initiatives: NCLEX® Examinations (checkmark), nursing practice (stethoscope), online learning (video screen), published works (document icon), research (chart graphic), licensure (seal with ribbon), global reach (globe) and collaboration (hands).



About NCSBN

The National Council of State Boards of Nursing (NCSBN®) is a not-for-profit organization whose membership comprises the boards of nursing in the 50 states, the District of Columbia, and four U.S. territories — American Samoa, Guam, Northern Mariana Islands and the Virgin Islands. There are also 30 associate members.

The member boards that comprise NCSBN protect the public by ensuring that safe and competent nursing care is provided by licensed nurses. NCSBN is the vehicle through which boards of nursing act and counsel together on matters of common interest.

Our Mission

NCSBN provides education, service and research through collaborative leadership to promote evidence-based regulatory excellence for patient safety and public protection.

Our Vision

Advance regulatory excellence worldwide.



NCSBN Values

Our values arise out of our purpose as an organization. They help us define our culture and beliefs and guide our actions as we face challenges and opportunities.

Collaboration

Forging solutions through respect, diversity and the collective strength of all stakeholders.

Excellence

Striving to be and do the best.

Innovation

Embracing change as an opportunity to better all organizational endeavors and turning new ideas into action.

Integrity

Doing the right thing for the right reason through honest, informed, open and ethical dialogue.

Transparency

Demonstrating and expecting openness, clear communication, and accountability of processes and outcomes.

2017 Year in Review

The 2017 theme, “Collaborating for the Future of Regulation,” provided the foundation for the groundbreaking work of NCSBN throughout the year. Here are the highlights of the year’s accomplishments.

Enhanced Nurse Licensure Compact (eNLC) Enactment: A Modern Nurse Licensure Solution for the 21st Century



ENHANCED NURSE LICENSURE COMPACT

The signing of legislation by North Carolina Gov. Roy Cooper on July 20, 2017, triggered the landmark enactment of the **enhanced Nurse Licensure Compact** (eNLC), ushering in a new era of nurse licensure in the U.S.

Allowing nurses to have mobility across state borders, the eNLC increases access to care while maintaining public protection. The eNLC, which is an updated version of the original NLC, allows for registered nurses (RNs) and licensed practical/vocational nurses (LPN/VNs) to have one multistate license, with the ability to practice in person or via telehealth in both their home state and other eNLC states.

“The eNLC allows for registered nurses (RNs) and licensed practical/vocational nurses (LPN/VNs) to have one multistate license, with the ability to practice in person or via telehealth in both their home state and other eNLC states.”

— Enhanced Nurse Licensure Compact

The eNLC also enables nurses to provide telehealth nursing services to patients located across the country in other eNLC states without having to obtain additional licenses. In the event of a disaster, nurses from multiple states can easily respond to supply vital services. Additionally, almost every nurse, including primary care nurses, case managers, transport nurses, school and hospice nurses, among many others, needs to routinely cross state boundaries to provide the public with access to nursing services, and a multistate license facilitates this process.

Boards of nursing (BONs) were the first health care provider regulatory bodies to develop a model for interstate practice with the original adoption of the NLC in 1997 and its implementation in 2000. While other health care provider regulatory bodies are just getting started in this process, the NLC has been operational and successful for more than 15 years.

Tri-Regulator Collaborative Crafts Position Statements

The **Tri-Regulator Collaborative**, the governing boards of the three organizations representing the state boards that license physicians, nurses and pharmacists — the Federation of State Medical Boards (FSMB), National Association of Boards of Pharmacy (NABP), and NCSBN — drafted and approved two position statements that highlight the organizations’ shared commitment to protecting public health as well as the common issues faced by the three groups.

The “Tri-Regulator Collaborative Position Statement on Electronic Health Records” (EHRs) called for improving interoperability and uniformity of use, declaring that the seamless transfer of this data is essential to the delivery of high-quality health care and to patient safety. The multiple systems that comprise today’s health care network provide little or no interoperability and present serious concerns for practitioners and regulators. The collaborative urged that steps be taken by all stakeholders to bring uniformity and interoperability to EHRs across all practice settings.

Practitioner wellness is a patient safety issue and is increasingly affecting practitioners in the medical, nursing, and pharmacy professions. In the “Tri-Regulator Collaborative Position Statement on Practitioner Wellness,” the Tri-Regulator Collaborative expressed its commitment to identifying and preventing practitioner burnout. Today, knowledge overload, numerous technology innovations, social media pressures and a rapidly changing practice environment create numerous challenges. More needs to be done to provide practitioners with the wellness strategies and assistance they need to deal with the stress of these challenges, which often leads to practitioner burnout and/or unhealthy responses.

Center for Regulatory Excellence (CRE) Grants Awarded

In 2017, the **NCSBN CRE Grant Program** awarded grants totaling nearly \$1 million to the following institutions: University of Rochester, Purdue University, Columbia University and University of Pittsburgh. Since the grant program began in 2007, it has awarded more than \$14.5 million in grant funding to 65 national and international organizations. The CRE Grant Program funds innovative projects that can have measurable impact on nursing regulation and can create meaningful change. CRE’s research priorities include national and international regulatory issues, patient safety, practice (RNs, LPN/VNs and advanced practice registered nurses [APRNs]), nursing education, continued competence, nurse mobility and substance use disorder.

New Institute of Regulatory Excellence (IRE) Inductees

Fellows of the **NCSBN IRE** were inducted at the NCSBN Annual Meeting in August 2017. The IRE began in 2004 with the purpose of providing BONs with high-quality regulatory education, expanding the body of knowledge related to regulation through research and scholarly work, developing the capacity of regulators to become expert leaders, and developing a network of regulators who collaborate to improve regulatory practices and outcomes. The IRE Fellowship Program is a four-year comprehensive educational and professional development program designed for current or former regulators who want to enhance their knowledge of and leadership in nursing regulation. The program includes experiences in analyzing issues involving public policy and regulation, strategic planning, patient safety and communication. It also requires the application of evidence-based concepts in decision making and leadership.



Regulatory Scholars Program (RSP) Initiated

The RSP's goals include developing the field of nursing regulation by building regulatory experts and researchers, providing high-level evidence for nursing regulatory and policy decision making, and encouraging scholarly dialogue and publications.

Designed to add to the body of knowledge in nursing regulation and expand the number of internal and external stakeholders educated in advanced nursing regulation, the program has three components: the **CRE Grant Program for Doctoral Students**, a **paid graduate internship** and an **unpaid graduate student experience**.



New Associate Members Welcomed

The College of Registered Psychiatric Nurses of Alberta (CRPNA), the College of Registered Psychiatric Nurses of Manitoba (CRPNM) and the Registered Psychiatric Nurses Association of Saskatchewan (RPNAS) became associate members, bringing the total number of members in this category to 30. Created by a Delegate Assembly (DA) resolution in 2007, the associate membership category is designed to provide a forum in which nursing regulatory bodies from around the globe can join NCSBN in a dialogue regarding issues of common concern, as well as share information and knowledge in a multicultural exchange of thoughts and ideas.

New Membership Category

The 2007 DA passed a resolution that created the associate member category. The bylaws specified that “an **Associate Member** is a nursing regulatory body or empowered regulatory authority from another country or territory, which is approved by the Delegate Assembly.” The following August, the College of Registered Nurses of British Columbia was voted in by the DA as the first associate member. Previously, the membership of NCSBN consisted only of state and territorial boards of nursing in the U.S., known as member boards. A third membership category, the exam user, was just approved by the DA in August 2017.

Per the amended bylaws, “**Exam User Members** must have an organization mandate exclusively related to the regulation of the profession and protection of the public and use the prelicensure exam developed by NCSBN.” Additional bylaws revisions redefined the associate member as “a nursing regulatory body or empowered regulatory authority that is in whole or in part empowered by government to license and regulate nursing practice in the jurisdiction, which is approved by the Delegate Assembly.” The first exam user members will be eligible to be voted in at the DA in August 2018. Some of NCSBN’s current associate members will be eligible for NCSBN Exam User membership.

An Exam User member is an organization that must have a mandate exclusively related to the regulation of the profession and protection of the public and use the prelicensure exam developed by NCSBN.

International Collaboration

NCSBN had the honor of hosting a delegation from the **Republican Center for Health Development in Kazakhstan (RCHD)**. The group was made up of health professionals, educators and government officials, led by Ainur Aiypkhanova, MHA, the RCHD general director. They were visiting the U.S. with a desire to learn more about the mission, functions and procedures of NCSBN, the licensing and scope of practice of U.S. nursing as well as educational requirements. In a two-day meeting with NCSBN CEO David Benton, RGN, PhD, FFNF, FRCN, FAAN, and some members of the NCSBN leadership team, the delegation had the chance to see presentations about how U.S. BONs function; NCLEX® examinations; the Nursys® database; how the NCSBN Interactive Services division provides continuing education and resources for nurses; and how NCSBN communicates with its members and the general nursing population through outreach, marketing and social media.

Honors

NCSBN CEO David Benton received the Great Cross of Spanish Nursing in the Gold Category from the Spanish General Council of Nursing in Barcelona on May 26, 2017.

Benton was presented with this honor for his work in support of nursing regulatory bodies and his key role in defining necessary regulatory changes for professional nursing. This award also recognized his advancement of the principle that nursing is an essential and fundamental profession in national health care systems, as well as the concept that all citizens have the right to adequate health care. Additionally, Benton's longstanding commitment to the international advocacy of the nursing profession through his various roles was lauded, most notably in his former position as the CEO of the International Council of Nurses (ICN) from 2008–2015.





The delegation from the Republican Center for Health Development in Kazakhstan met with NCSBN CEO David Benton and members of the NCSBN leadership team on a mission to learn more about health care and the regulatory environment in America.

“I am honored to receive this prestigious award and delighted that the importance of regulation is recognized in the citation as this reinforces the role it plays in shaping our profession toward meeting the needs of those we serve in this complex, dynamic and digital age.”

— David Benton

Nursys e-Notify®

The **Nursys e-Notify** notification system provides both individual nurses and institutions that employ nurses with automatic license status updates quickly, easily, securely and free of charge through a simple enrollment process.

Nursys is the only national database for licensure verification for RNs, LPN/VNs and APRNs. Nursys is designated as a primary source equivalent database through a written agreement with participating BONs. Nursys is live and dynamic, and all updates to the system are reflected immediately, pushed directly from participating BON databases through frequent, secured data updates.

Individual nurses who self-enroll into Nursys e-Notify can take advantage of this convenient way to keep up-to-date with their professional licenses receiving licensure status updates, track license verifications for endorsement and create and manage multiple license expiration reminders directly. Keeping on top of license status can help nurses prevent fraudulent licenses or certificates from being issued in their names.



NCSBN's Nursys Database Welcomes Data from the National Board of Certification and Recertification for Nurse Anesthetists (NBCRNA)

The NBCRNA began uploading their certification information into the NCSBN Nursys database. NBCRNA is the first APRN credentialing association to use Nursys to provide electronically primary source certification information to BONs.

This new service is especially valuable to BONs as they now have real-time access to current certification credentials as part of the licensure process for certified registered nurse anesthetists (CRNAs). This is also of great benefit to CRNAs for whom continual certification is a requirement of licensure/state recognition.

Transition to Practice (TTP)

A new TTP online e-learning program for **newly licensed nurses** was launched. The program reviews and discusses important concepts integral to patient safety and critical thinking helping new graduates understand how to apply nursing knowledge, learn new skills and think critically as they transition from newly licensed nurses to confident professionals.

Based on NCSBN's Transition to Practice multisite, randomized and controlled study that found transition programs increase new nurse competence, satisfaction and retention and decrease stress and self-reported errors, the program includes courses for both new graduate nurses and preceptors. Course content is evidence-based and highly interactive, aimed at strengthening core competencies.

NCSBN Leadership

Philip D. Dickison, PhD, RN, was named to the position of chief officer, Operations and Examinations. Dickison was previously chief officer of examinations at NCSBN. In his new role, he will oversee programs and services related to the operations of the organization including the Examinations, Human Resources, Marketing and Communications, Member Relations, and Performance Measurement and Standards Setting departments.



“Dr. Dickison is a unique and extremely talented individual who through translating his expertise in measurement across the wider organization will help us improve our operational performance and service to our members while assisting us in pursuing regulatory excellence.”

— David Benton

Products and Services

NCSBN's products and services are provided to the nursing community and to other allied health professions to contribute to the body of nursing knowledge and the science of regulation.

Publications and Web Resources

NCSBN produces a wide variety of publications including books, white papers, brochures and research briefs that focus on the NCLEX-RN® and NCLEX-PN® Examinations, as well as health care issues and activities, in addition to conducting its own research studies by addressing some of today's most important nursing practice issues. These publications present in-depth information and best practice techniques to enhance perspective and contribute to the nursing knowledge base. These publications are available for download free of charge from the NCSBN website, www.ncsbn.org.

An online library of resources and tools also includes 27 videos that count among its catalog subjects such as nursing licensure explained for new nurses, professional boundaries in nursing, substance use disorder in nursing, the NLC and NCLEX. Additionally, recorded webinars, toolkits and presentations are available for download.



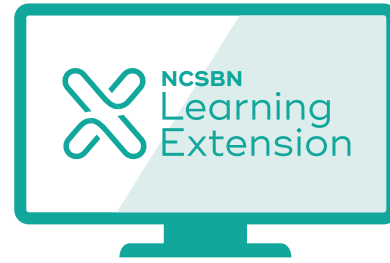
SINCE 2011, MORE THAN
2.5 MILLION BROCHURES
AND POSTERS HAVE BEEN
DISTRIBUTED BY NCSBN.

Brochures

NCSBN has distributed more than 2.5 million outreach brochures free of charge to both the nursing community and the public at large. Distributed to more than 5,000 hospitals, long-term care facilities, nursing schools, associations, organizations and consumer groups in the U.S., Canada and overseas, the brochures are part of NCSBN's extensive offerings for nurses and consumers that include posters, videos, books, research briefs, white papers and position statements.

Online Courses

NCSBN Learning Extension is a pioneer in e-learning for the nursing community, currently offering 78 online courses promoting safe nursing practices to nurses, student nurses and nursing faculty. The online campus catalog covers a range of subjects, including continuing education courses for nurses, preparatory courses for licensure exam candidates, and item writing and test development courses for nursing faculty. Rich in content and features, the online courses offer interactive and fun learning experiences, which facilitate better understanding of the topics presented. Online course offerings for external audiences are available through the NCSBN Learning Extension campus located at www.learningext.com. NCSBN Learning Extension delivered 64,000 online courses during 2017. Since its inception in 1998, the Learning Extension has reached more than 580,000 users in countries around the world.



SINCE ITS INCEPTION IN 1998, THE **LEARNING EXTENSION** HAS REACHED MORE THAN **580,000 USERS** ACROSS THE GLOBE. 64,000 ONLINE COURSES WERE DELIVERED IN 2017.

Collaboration Tools

NCSBN supports online engagement of its membership with survey tools, collaboration sites, discussion forums, video conferencing and live webinars/webcasts.

Videos

Videos are available for both membership and external audiences. There are 27 educational and promotional videos in the NCSBN catalog, which had 917,965 combined views during 2017. NCSBN records presentations at its conferences and the catalog now includes 592 presentations from 85 past events.



THERE WERE **917,965 VIEWS** OF NCSBN'S 27 EDUCATIONAL AND PROMOTIONAL VIDEOS DURING FY17.

The 2017 NCLEX® Examination

From April 1, 1994 through December 31, 2017, more than **5.4 million candidates** for nurse licensure have taken NCLEX® examinations via CAT.

For the calendar year ending Dec. 31, 2017, **308,313 candidates** took the NCLEX-RN® and NCLEX-PN® Examinations.

NCLEX® Pass Rates – RN

	JAN. – MAR. 2017			APR. – JUN. 2017			JUL. – SEP. 2017			OCT. – DEC. 2017			TOTAL		
	# TESTING	# PASSING	% PASSING	# TESTING	# PASSING	% PASSING	# TESTING	# PASSING	% PASSING	# TESTING	# PASSING	% PASSING	# TESTING	# PASSING	% PASSING
First-Time, U.S. Educated															
RN - Diploma	464	414	89.2	531	488	91.9	998	902	90.4	236	203	86.0	2,229	2,007	90.0
RN - BSN	19,575	17,692	90.4	26,902	24,635	91.6	22,907	20,367	88.9	6,593	5,721	86.8	75,977	68,415	90.0
RN - ADN	22,003	18,776	85.3	27,106	23,386	86.3	22,876	19,302	84.4	7,471	5,481	73.4	79,456	66,945	84.3
Special Program Codes	11	9	81.8	11	7	63.6	32	19	59.4	20	10	50.0	74	45	60.8
Total: First-Time, U.S. Educated	42,053	36,891	87.7	54,550	48,516	88.9	46,813	40,590	86.7	14,320	11,415	79.7	157,736	137,412	87.1
Repeat, U.S. Educated	8,955	3,940	44.0	10,233	4,191	41.0	11,653	5,983	51.3	10,586	4,771	45.1	41,427	18,885	45.6
First-Time, Internationally Educated	3,110	1,194	38.4	3,624	1,366	37.7	3,551	1,410	39.7	3,772	1,726	45.8	14,057	5,696	40.5
Repeat, Internationally Educated	3,919	904	23.1	4,484	1,020	22.7	4,229	952	22.5	4,643	1,378	29.7	17,275	4,254	24.6
ALL CANDIDATES	58,037	42,929	74.0	72,891	55,093	75.6	66,246	48,935	73.9	33,321	19,290	57.9	230,495	166,247	72.1

NCLEX® Pass Rates – PN

	JAN. – MAR. 2017			APR. – JUN. 2017			JUL. – SEP. 2017			OCT. – DEC. 2017			TOTAL		
	# TESTING	# PASSING	% PASSING	# TESTING	# PASSING	% PASSING	# TESTING	# PASSING	% PASSING	# TESTING	# PASSING	% PASSING	# TESTING	# PASSING	% PASSING
Total: First-Time, U.S. Educated	11,388	9,516	83.6	10,049	8,304	82.6	16,293	14,062	86.3	9,218	7,482	81.2	46,948	39,364	83.8
Repeat, U.S. Educated	3,441	1,213	35.3	3,879	1,286	33.2	3,662	1,343	36.7	3,872	1,407	36.3	14,854	5,249	35.3
First-Time, Internationally Educated	197	111	56.3	159	84	52.8	214	116	54.2	193	104	53.9	763	415	54.4
Repeat, Internationally Educated	271	59	21.8	284	46	16.2	291	68	23.4	299	71	23.7	1,145	244	21.3
ALL CANDIDATES	15,297	10,899	71.2	14,371	9,720	67.6	20,460	15,589	76.2	13,582	9,064	66.7	63,710	45,272	71.1

NCLEX® Pass Rates – RN

Candidates for Canadian Licensure/Registration

	JAN. – MAR. 2017			APR. – JUN. 2017			JUL. – SEP. 2017			OCT. – DEC. 2017			TOTAL		
	# TESTING	# PASSING	% PASSING	# TESTING	# PASSING	% PASSING	# TESTING	# PASSING	% PASSING	# TESTING	# PASSING	% PASSING	# TESTING	# PASSING	% PASSING
First-Time, Canadian Educated	1,450	1,199	82.7	3,066	2,614	85.3	3,603	2,891	80.2	1,523	1,215	79.8	9,642	7,919	82.1
Repeat, Canadian Educated	667	401	60.1	740	357	48.2	737	424	57.5	894	493	55.1	3,038	1,675	55.1
First-Time, Internationally Educated	212	124	58.5	286	158	55.2	243	148	60.9	197	123	62.4	938	553	59.0
Repeat, Internationally Educated	60	30	50.0	123	46	37.4	144	57	39.6	163	78	47.9	490	211	43.1
ALL CANDIDATES	2,389	1,754	73.4	4,215	3,175	75.3	4,727	3,520	74.5	2,777	1,909	68.7	14,108	10,358	73.4

More than **138,300 nurse licensure candidates** have taken NCLEX® examinations in international test centers.

Top Five Countries (with respect to volume)

First-Time, Internationally Educated Candidates for U.S. Licensure

JAN. - MAR. 2017	APR. - JUN. 2017	JUL. - SEP. 2017	OCT. - DEC. 2017	TOTAL	
Philippines 1,653	Philippines 1,918	Philippines 2,053	Philippines 2,170	Philippines 7,794	1
India 307	India 337	India 324	India 336	India 1,304	2
South Korea 218	Puerto Rico 207	Puerto Rico 199	Puerto Rico 232	Puerto Rico 819	3
Puerto Rico 181	South Korea 178	South Korea 180	South Korea 172	South Korea 748	4
Jamaica 164	Jamaica 161	Jamaica 122	Jamaica 139	Jamaica 586	5

Top Five Countries (with respect to volume)

First-Time, Internationally Educated Candidates for Canadian Licensure/Registration

JAN. - MAR. 2017	APR. - JUN. 2017	JUL. - SEP. 2017	OCT. - DEC. 2017	TOTAL	
India 109	India 168	India 118	India 89	India 484	1
Philippines 48	Philippines 57	Philippines 70	Philippines 57	Philippines 232	2
Australia 9	United Kingdom 9	Iran 12	United Kingdom 10	United Kingdom 32	3
Jamaica 7	Pakistan 7	United Kingdom 8	Australia 9	Australia 30	4
Pakistan 6	Israel 6	Australia 7	Israel 7	Pakistan 24	5

NCLEX® Pass Rates – RN

2017 – First-Time, U.S. Educated Candidates

JURISDICTION	JAN. – MAR. 2017			APR. – JUN. 2017			JUL. – SEP. 2017			OCT. – DEC. 2017			TOTAL		
	# TESTING	# PASSING	% PASSING	# TESTING	# PASSING	% PASSING	# TESTING	# PASSING	% PASSING	# TESTING	# PASSING	% PASSING	# TESTING	# PASSING	% PASSING
Alabama	872	785	90.0	1,520	1,399	92.0	820	754	92.0	115	80	69.6	3,327	3,018	90.7
Alaska	78	73	93.6	66	62	93.9	75	71	94.7	35	32	91.4	254	238	93.7
American Samoa	1	0	0.0	-	-	-	-	-	-	-	-	-	1	0	0.0
Arizona	1,297	1,146	88.4	843	762	90.4	782	677	86.6	339	287	84.7	3,261	2,872	88.1
Arkansas	612	511	83.5	660	590	89.4	365	300	82.2	228	182	79.8	1,865	1,583	84.9
California	3,254	2,952	90.7	2,209	1,933	87.5	4,616	4,251	92.1	1,714	1,502	87.6	11,793	10,638	90.2
Colorado	595	547	91.9	812	735	90.5	521	455	87.3	180	162	90.0	2,108	1,899	90.1
Connecticut	276	251	90.9	578	539	93.3	850	784	92.2	161	137	85.1	1,865	1,711	91.7
Delaware	153	138	90.2	189	168	88.9	181	162	89.5	28	24	85.7	551	492	89.3
District Of Columbia	39	16	41.0	64	46	71.9	93	85	91.4	23	19	82.6	219	166	75.8
Florida	3,767	2,873	76.3	3,874	2,974	76.8	3,368	2,567	76.2	2,825	1,822	64.5	13,834	10,236	74.0
Georgia	1,193	1,080	90.5	1,854	1,694	91.4	677	599	88.5	234	208	88.9	3,958	3,581	90.5
Guam	-	-	-	-	-	-	5	5	100.0	8	8	100.0	13	13	100.0
Hawaii	119	103	86.6	89	76	85.4	195	164	84.1	75	61	81.3	478	404	84.5
Idaho	195	179	91.8	260	242	93.1	182	159	87.4	27	19	70.4	664	599	90.2
Illinois	1,946	1,690	86.8	2,549	2,238	87.8	2,036	1,741	85.5	516	405	78.5	7,047	6,074	86.2
Indiana	973	857	88.1	1,783	1,602	89.8	905	752	83.1	189	148	78.3	3,850	3,359	87.2
Iowa	538	461	85.7	804	714	88.8	585	494	84.4	163	128	78.5	2,090	1,797	86.0
Kansas	353	295	83.6	979	844	86.2	301	248	82.4	146	131	89.7	1,779	1,518	85.3
Kentucky	797	729	91.5	1,199	1,122	93.6	423	352	83.2	176	149	84.7	2,595	2,352	90.6
Louisiana	909	833	91.6	444	426	95.9	515	477	92.6	29	25	86.2	1,897	1,761	92.8
Maine	120	105	87.5	428	378	88.3	181	158	87.3	59	52	88.1	788	693	87.9
Maryland	796	710	89.2	845	751	88.9	707	611	86.4	145	109	75.2	2,493	2,181	87.5
Massachusetts	876	763	87.1	859	734	85.4	1,957	1,703	87.0	455	387	85.1	4,147	3,587	86.5
Michigan	1,422	1,264	88.9	1,885	1,715	91.0	1,206	1,044	86.6	390	336	86.2	4,903	4,359	88.9
Minnesota	1,051	885	84.2	1,640	1,432	87.3	640	514	80.3	229	185	80.8	3,560	3,016	84.7
Mississippi	511	441	86.3	1,015	879	86.6	208	172	82.7	36	28	77.8	1,770	1,520	85.9
Missouri	1,097	945	86.1	1,380	1,261	91.4	1,022	902	88.3	264	228	86.4	3,763	3,336	88.7
Montana	142	131	92.3	154	141	91.6	173	140	80.9	39	31	79.5	508	443	87.2
Nebraska	198	185	93.4	621	588	94.7	338	294	87.0	72	59	81.9	1,229	1,126	91.6
Nevada	342	316	92.4	381	356	93.4	245	222	90.6	143	129	90.2	1,111	1,023	92.1
New Hampshire	34	31	91.2	407	375	92.1	162	146	90.1	42	34	81.0	645	586	90.9
New Jersey	654	581	88.8	460	391	85.0	1,757	1,541	87.7	406	321	79.1	3,277	2,834	86.5
New Mexico	231	184	79.7	260	223	85.8	323	276	85.4	158	132	83.5	972	815	83.8
New York	2,095	1,812	86.5	2,197	1,882	85.7	4,399	3,719	84.5	757	619	81.8	9,448	8,032	85.0
North Carolina	700	649	92.7	2,665	2,475	92.9	380	311	81.8	78	68	87.2	3,823	3,503	91.6
North Dakota	129	112	86.8	316	299	94.6	48	42	87.5	6	4	66.7	499	457	91.6
Northern Mariana Islands	1	0	0.0	4	3	75.0	10	4	40.0	3	1	33.3	18	8	44.4
Ohio	2,011	1,741	86.6	2,710	2,315	85.4	2,721	2,321	85.3	849	665	78.3	8,291	7,042	84.9
Oklahoma	533	455	85.4	830	736	88.7	648	555	85.6	72	51	70.8	2,083	1,797	86.3
Oregon	105	95	90.5	326	277	85.0	798	735	92.1	158	134	84.8	1,387	1,241	89.5
Pennsylvania	1,287	1,173	91.1	2,482	2,303	92.8	2,673	2,425	90.7	667	588	88.2	7,109	6,489	91.3
Rhode Island	202	188	93.1	207	185	89.4	311	266	85.5	53	42	79.2	773	681	88.1
South Carolina	685	622	90.8	1,050	953	90.8	398	348	87.4	158	135	85.4	2,291	2,058	89.8
South Dakota	237	207	87.3	305	276	90.5	123	108	87.8	32	24	75.0	697	615	88.2
Tennessee	1,005	924	91.9	1,217	1,126	92.5	1,224	1,072	87.6	148	121	81.8	3,594	3,243	90.2
Texas	4,168	3,783	90.8	4,525	4,167	92.1	2,276	1,978	86.9	843	713	84.6	11,812	10,641	90.1
Utah	526	458	87.1	707	613	86.7	271	230	84.9	136	100	73.5	1,640	1,401	85.4
Vermont	6	3	50.0	209	184	88.0	68	58	85.3	3	1	33.3	286	246	86.0
Virgin Islands	5	3	60.0	3	2	66.7	15	12	80.0	3	1	33.3	26	18	69.2
Virginia	996	900	90.4	961	864	89.9	1,672	1,485	88.8	266	223	83.8	3,895	3,472	89.1
Washington	450	404	89.8	666	595	89.3	1,333	1,201	90.1	162	134	82.7	2,611	2,334	89.4
West Virginia	171	155	90.6	454	421	92.7	227	198	87.2	29	22	75.9	881	796	90.4
Wisconsin	1,248	1,104	88.5	1,488	1,345	90.4	672	577	85.9	229	191	83.4	3,637	3,217	88.5
Wyoming	52	43	82.7	117	105	89.7	132	125	94.7	19	18	94.7	320	291	90.9
ALL CANDIDATES	42,053	36,891	87.7	54,550	48,516	88.9	46,813	40,590	86.7	14,320	11,415	79.7	157,736	137,412	87.1

2017 – First-Time, Canadian Educated Candidates (RN Candidates for Canadian Licensure/Registration)

JURISDICTION	JAN. – MAR. 2017			APR. – JUN. 2017			JUL. – SEP. 2017			OCT. – DEC. 2017			TOTAL		
	# TESTING	# PASSING	% PASSING	# TESTING	# PASSING	% PASSING	# TESTING	# PASSING	% PASSING	# TESTING	# PASSING	% PASSING	# TESTING	# PASSING	% PASSING
Alberta	427	367	85.9	480	413	86.0	413	334	80.9	183	153	83.6	1,503	1,267	84.3
British Columbia	320	286	89.4	504	462	91.7	458	404	88.2	248	215	86.7	1,530	1,367	89.3
Manitoba	31	26	83.9	131	115	87.8	144	121	84.0	189	170	89.9	495	432	87.3
New Brunswick	2	1	50.0	134	93	69.4	137	80	58.4	14	8	57.1	287	182	63.4
Newfoundland And Labrador	-	-	-	123	113	91.9	69	61	88.4	34	33	97.1	226	207	91.6
Northwest Territories and Nunavut	-	-	-	14	13	92.9	-	-	-	-	-	-	14	13	92.9
Nova Scotia	24	21	87.5	163	135	82.8	142	99	69.7	69	60	87.0	398	315	79.1
Ontario	570	435	76.3	1,276	1,076	84.3	1,964	1,574	80.1	679	491	72.3	4,489	3,576	79.7
Prince Edward Island	15	14	93.3	53	44	83.0	3	3	100.0	1	1	100.0	72	62	86.1
Saskatchewan	58	47	81.0	177	146	82.5	259	206	79.5	89	71	79.8	583	470	80.6
ALL CANDIDATES*	1,447	1,197	82.7	3,055	2,610	85.4	3,589	2,882	80.3	1,506	1,202	79.8	9,597	7,891	82.2

*Note: 45 Candidates are not included because their educational jurisdictions are not one of the 10 regulatory bodies that decided to adopt the NCLEX-RN as the nursing licensure/registration exam for Canada.

NCLEX® Pass Rates – PN

2017 – First-Time, U.S. Educated Candidates

JURISDICTION	JAN. – MAR. 2017			APR. – JUN. 2017			JUL. – SEP. 2017			OCT. – DEC. 2017			TOTAL		
	# TESTING	# PASSING	% PASSING	# TESTING	# PASSING	% PASSING	# TESTING	# PASSING	% PASSING	# TESTING	# PASSING	% PASSING	# TESTING	# PASSING	% PASSING
Alabama	227	207	91.2	127	114	89.8	275	255	92.7	162	155	95.7	791	731	92.4
Alaska	1	1	100.0	-	-	-	-	-	-	-	-	-	1	1	100.0
American Samoa	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Arizona	81	71	87.7	99	89	89.9	193	186	96.4	93	85	91.4	466	431	92.5
Arkansas	190	173	91.1	255	240	94.1	361	327	90.6	78	70	89.7	884	810	91.6
California	1,642	1,178	71.7	1,638	1,115	68.1	1,772	1,306	73.7	1,392	959	68.9	6,444	4,558	70.7
Colorado	83	69	83.1	64	59	92.2	150	140	93.3	49	41	83.7	346	309	89.3
Connecticut	177	161	91.0	186	162	87.1	90	77	85.6	144	124	86.1	597	524	87.8
Delaware	37	30	81.1	15	12	80.0	75	69	92.0	16	12	75.0	143	123	86.0
District Of Columbia	6	3	50.0	9	8	88.9	4	3	75.0	13	12	92.3	32	26	81.3
Florida	866	678	78.3	616	419	68.0	951	737	77.5	808	600	74.3	3,241	2,434	75.1
Georgia	278	256	92.1	95	81	85.3	342	306	89.5	157	137	87.3	872	780	89.4
Guam	2	2	100.0	7	6	85.7	7	3	42.9	4	4	100.0	20	15	75.0
Hawaii	18	14	77.8	8	6	75.0	31	28	90.3	34	26	76.5	91	74	81.3
Idaho	52	50	96.2	27	27	100.0	70	66	94.3	19	19	100.0	168	162	96.4
Illinois	338	260	76.9	200	162	81.0	613	563	91.8	244	216	88.5	1,395	1,201	86.1
Indiana	203	187	92.1	66	52	78.8	229	212	92.6	67	53	79.1	565	504	89.2
Iowa	161	147	91.3	252	240	95.2	309	288	93.2	45	43	95.6	767	718	93.6
Kansas	200	157	78.5	383	353	92.2	229	192	83.8	13	11	84.6	825	713	86.4
Kentucky	244	225	92.2	136	120	88.2	88	78	88.6	57	54	94.7	525	477	90.9
Louisiana	311	274	88.1	274	239	87.2	154	132	85.7	91	75	82.4	830	720	86.7
Maine	2	2	100.0	1	1	100.0	1	0	0.0	1	0	0.0	5	3	60.0
Maryland	20	19	95.0	18	18	100.0	63	60	95.2	32	30	93.8	133	127	95.5
Massachusetts	130	106	81.5	20	15	75.0	638	576	90.3	100	83	83.0	888	780	87.8
Michigan	271	253	93.4	230	209	90.9	266	236	88.7	173	150	86.7	940	848	90.2
Minnesota	377	329	87.3	463	422	91.1	244	189	77.5	84	67	79.8	1,168	1,007	86.2
Mississippi	186	155	83.3	41	31	75.6	454	385	84.8	41	29	70.7	722	600	83.1
Missouri	200	184	92.0	135	113	83.7	589	556	94.4	157	141	89.8	1,081	994	92.0
Montana	17	16	94.1	23	23	100.0	30	30	100.0	18	17	94.4	88	86	97.7
Nebraska	38	34	89.5	85	80	94.1	66	59	89.4	41	37	90.2	230	210	91.3
Nevada	17	14	82.4	15	14	93.3	21	20	95.2	9	7	77.8	62	55	88.7
New Hampshire	43	36	83.7	31	27	87.1	20	14	70.0	45	35	77.8	139	112	80.6
New Jersey	314	235	74.8	333	254	76.3	409	336	82.2	449	362	80.6	1,505	1,187	78.9
New Mexico	27	24	88.9	34	32	94.1	21	18	85.7	17	17	100.0	99	91	91.9
New York	349	244	69.9	407	306	75.2	1,154	928	80.4	629	466	74.1	2,539	1,944	76.6
North Carolina	86	83	96.5	122	112	91.8	511	482	94.3	120	112	93.3	839	789	94.0
North Dakota	17	16	94.1	36	35	97.2	86	83	96.5	8	7	87.5	147	141	95.9
Northern Mariana Islands	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Ohio	666	553	83.0	601	482	80.2	1,028	881	85.7	701	567	80.9	2,996	2,483	82.9
Oklahoma	277	238	85.9	165	140	84.8	517	454	87.8	269	232	86.2	1,228	1,064	86.6
Oregon	82	72	87.8	66	55	83.3	121	97	80.2	141	114	80.9	410	338	82.4
Pennsylvania	547	485	88.7	358	292	81.6	626	544	86.9	647	543	83.9	2,178	1,864	85.6
Rhode Island	25	21	84.0	34	27	79.4	51	42	82.4	22	17	77.3	132	107	81.1
South Carolina	105	93	88.6	81	70	86.4	195	185	94.9	103	93	90.3	484	441	91.1
South Dakota	72	65	90.3	44	42	95.5	83	81	97.6	11	9	81.8	210	197	93.8
Tennessee	243	215	88.5	304	271	89.1	282	249	88.3	498	426	85.5	1,327	1,161	87.5
Texas	1,291	1,088	84.3	949	821	86.5	1,479	1,315	88.9	876	763	87.1	4,595	3,987	86.8
Utah	99	98	99.0	213	208	97.7	107	104	97.2	32	30	93.8	451	440	97.6
Vermont	1	1	100.0	6	6	100.0	132	130	98.5	1	0	0.0	140	137	97.9
Virgin Islands	-	-	-	1	0	0.0	-	-	-	-	-	-	1	0	0.0
Virginia	243	193	79.4	312	257	82.4	370	303	81.9	193	147	76.2	1,118	900	80.5
Washington	86	80	93.0	81	74	91.4	169	165	97.6	159	143	89.9	495	462	93.3
West Virginia	59	47	79.7	31	29	93.5	281	246	87.5	77	65	84.4	448	387	86.4
Wisconsin	339	332	97.9	325	307	94.5	272	263	96.7	75	74	98.7	1,011	976	96.5
Wyoming	42	42	100.0	27	27	100.0	64	63	98.4	3	3	100.0	136	135	99.3
ALL CANDIDATES	11,388	9,516	83.6	10,049	8,304	82.6	16,293	14,062	86.3	9,218	7,482	81.2	46,948	39,364	83.8

2016–2017

Board of Directors

Katherine Thomas, MN, RN, FAAN

President
Executive Director,
Texas Board of Nursing

Julia George, MSN, RN, FRE

President-elect
Executive Director, North Carolina
Board of Nursing

Gloria Damgaard, MS, RN, FRE

Treasurer
Executive Director,
South Dakota Board of Nursing

Suellyn M. Masek, MSN, RN, CNOR

Area I Director
Board Member,
Washington State Nursing Care Quality
Assurance Commission

Adrian Guerrero, CPM

Area II Director
Board Staff,
Kansas State Board of Nursing

James Cleghorn, MA

Area III Director
Executive Director,
Georgia Board of Nursing

Ellen Watson, MS, APRN, FNP-BC

Area IV Director
Vice Chair,
Vermont State Board of Nursing

Karen Scipio-Skinner, MSN, RN

Director-at-Large
Executive Director, District of Columbia
Board of Nursing

Valerie Smith, MS, RN, FRE

Director-at-Large
Associate Director,
Arizona State Board of Nursing

Lori Scheidt, MBA-HCM

Director-at-Large
Executive Director,
Missouri State Board of Nursing


Nathan Goldman, JD

Director-at-Large
Board Staff,
Kentucky Board of Nursing



Front row, left to right:
Julia George, Katherine Thomas, Gloria Damgaard

Back row, left to right:
**Valerie Smith, Ellen Watson, Adrian Guerrero, Karen Scipio-Skinner,
Nathan Goldman, Lori Scheidt, James Cleghorn, Suellyn Masek**



NCSBN Member Awards and Achievements

2017 NCSBN Delegate Assembly

NCSBN met in Chicago, Aug. 16-18, 2017, to consider pertinent association business with its member boards of nursing (BONs).

Highlights of some of the significant actions approved by the member BONs include:

- Approved proposed amendments to the NCSBN Bylaws
- Elected new members of the NCSBN Board of Directors and Leadership Succession Committee.
- Approved College of Registered Psychiatric Nurses of Alberta (CRPNA), College of Registered Psychiatric Nurses of Manitoba (CRPNM) and Registered Psychiatric Nurses Association of Saskatchewan (RPNAS) as associate members of NCSBN.

Photos by Tricia Koning Photography.
Videos by Plum Productions.



R. Louise McManus Award

Mary Blubaugh, MSN, RN

Former Executive Administrator
Kansas State Board of Nursing

The R. Louise McManus Award is the most prestigious award. Individuals nominated for this award shall have made sustained and significant contributions through the highest commitment and dedication to the mission and vision of NCSBN.



Meritorious Service Award

Linda D. Burhans, PhD, RN, NEA-BC, CPHQ, FRE

Board Staff
North Carolina Board of Nursing

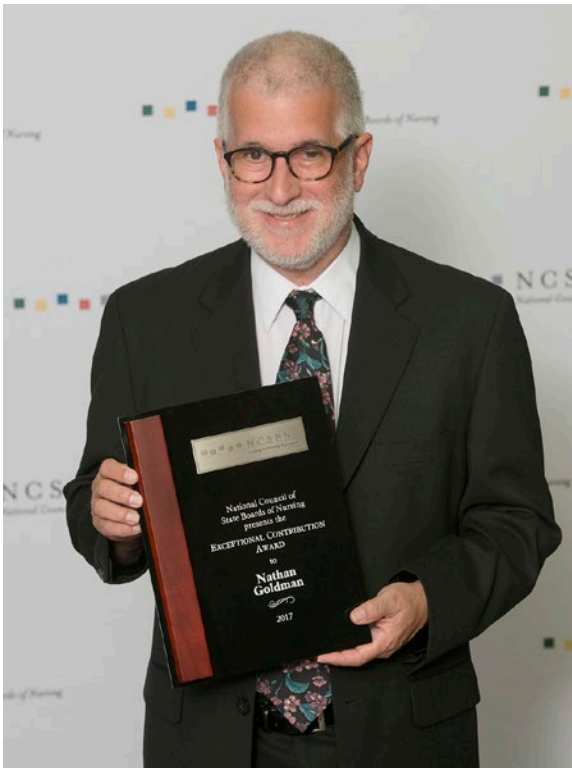
The Meritorious Service Award is granted to a member for significant contributions to the mission and vision of NCSBN.



Elaine Ellibee Award

Valerie J. Fuller,
PhD, DNP, AGACNP-BC, FNP-BC, FAANP
Board President
Maine State Board of Nursing

The Elaine Ellibee Award is granted to a member who has served as a board president within the past two years and who has made significant contributions to NCSBN.



Exceptional Contribution Award

Nathan Goldman, JD
Board Staff
Kentucky Board of Nursing

The Exceptional Contribution Award is granted for significant contribution and demonstrated support of NCSBN's mission.



Exceptional Contribution Award

Mindy Schaffner, PhD, MSN, CNS, RN

Board Staff

Washington State Nursing Care Quality Assurance Commission

The Exceptional Contribution Award is granted for significant contribution and demonstrated support of NCSBN's mission.



Exceptional Contribution Award

Catherine C. Woodard

Board Staff

Washington State Nursing Care Quality Assurance Commission

The Exceptional Contribution Award is granted for significant contribution and demonstrated support of NCSBN's mission.

2017 NCSBN Awards

Aug. 17, 2017 | Chicago



Regulatory Achievement Award

Minnesota Board of Nursing

The Regulatory Achievement Award recognizes the member board or associate member that has made an identifiable, significant contribution to the mission and vision of NCSBN in promoting public policy related to the safe and effective practice of nursing in the interest of public welfare.



Founders Award

Thomas G. Abram, MA, JD
NCSBN Legal Counsel

This prestigious award is given only upon occasion that an individual with ethics, integrity and sincerity has demonstrated the highest regard for the ideals and beliefs upon which NCSBN was founded.

Celebrating 100 Years of Nursing Regulation in 2017

NCSBN is proud to acknowledge the following member boards that celebrated their 100th anniversary in 2017. We honor the many contributions they have made to nursing regulation in service to public welfare and safety.



Centennial Award

Hawaii Board of Nursing



Centennial Award

South Dakota Board of Nursing

Centennial Award

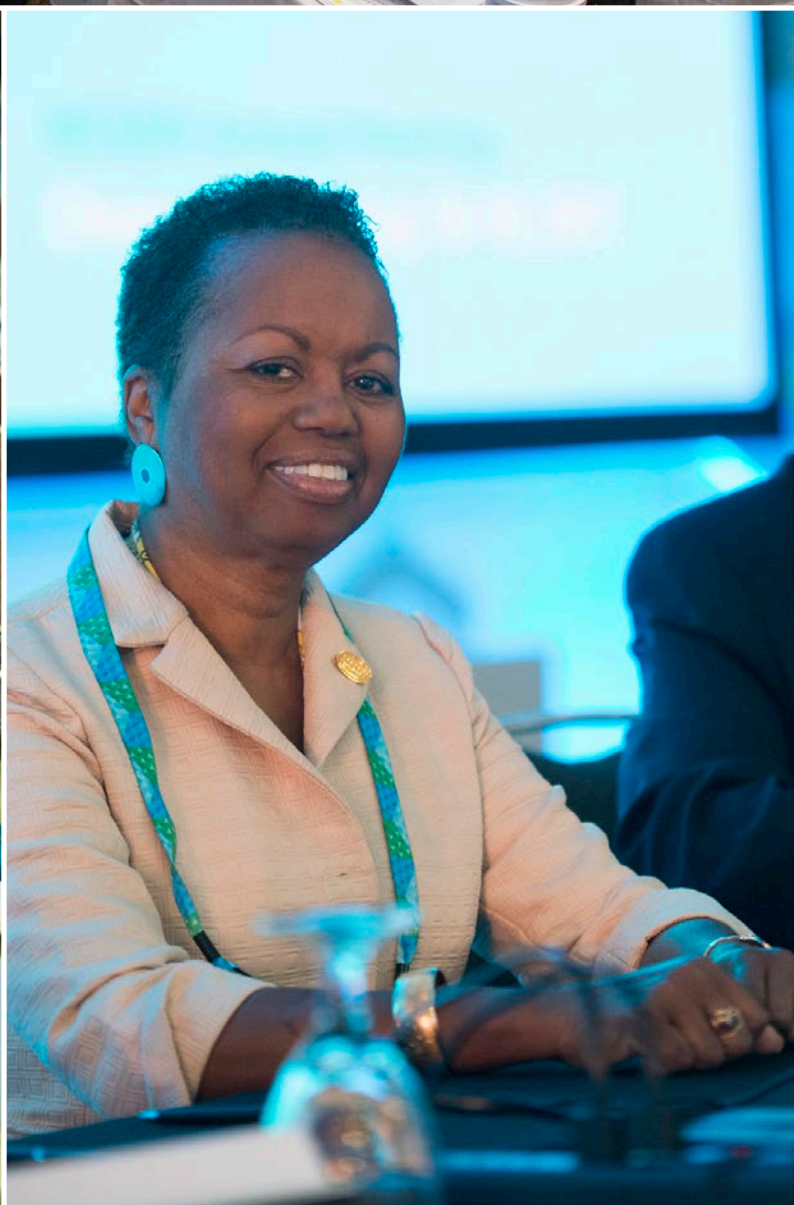
Utah State Board of Nursing



Centennial Award

Saskatchewan Registered
Nurses' Association

(not pictured)



Institute of Regulatory Excellence (IRE) Fellows

The IRE began in 2004 with the purpose of providing boards of nursing with high quality regulatory education, expanding the body of knowledge related to regulation through research and scholarly work, developing the capacity of regulators to become expert leaders, and developing a network of regulators who collaborate to improve regulatory practices and outcomes.

The IRE Fellowship Program is a four-year comprehensive educational and professional development program designed for current regulators who want to enhance their knowledge of and leadership in nursing regulation. The program includes experiences in analyzing issues involving public policy and regulation, strategic planning, patient safety and communication. It also requires the application of evidence-based concepts in decision making and leadership.

IRE awards were presented by BOD President Katherine Thomas.



Jennifer Best, MN, RN
Practice Consultant, College of
Registered Nurses of Nova Scotia



Kerry Howell, MA, LPN
Board Member, College of Licensed
Practical Nurses of British Columbia



Lynn Miller, DNP, NP
Policy Consultant, College of Registered
Nurses of Nova Scotia



**Crystal Tillman, DNP, CPNP, RN,
PMHNP-BC**
Manager, Education and Practice,
North Carolina Board of Nursing



Alison Wainwright, MSc, RN
Policy Research Coordinator, Policy,
Practice and Quality Assurance,
College of Registered Nurses of
British Columbia



Cynthia York, MSN, RN, CGRN
Director, RN Practice & Credentialing,
Louisiana State Board of Nursing

Executive Officer Service Recognition Awards

Service awards are given to the executive officers of boards of nursing to honor their commitment to nursing regulation and public protection. These awards were presented by BOD President Katherine Thomas.

Five Years



Carina Herman, MSN, RN
Executive Director/Registrar,
College of Licensed Practical
Nurses of British Columbia



Cynthia Johansen, MAL, MSc
Registrar and Chief Executive Officer,
College of Registered Nurses of
British Columbia

Not pictured:

Lynn Ansardi, RN
Executive Director,
Louisiana State Board of Practical
Nurse Examiners

Carolyn Mary Reed, MA, RN, FCNA
Chief Executive/Registrar,
Nursing Council of New Zealand

Suzanne Sullivan, JD, RN
Executive Secretary,
New York State Board of Nursing



Cynthia LaBonde, MN, RN
Executive Director,
Wyoming State Board of Nursing



Ann Mann, MN, RN
Executive Director/Registrar,
College of Licensed Practical Nurses
of Nova Scotia



Denise Nies, MSN, RN, BC
Executive Director,
New Hampshire Board of Nursing



Paula Schenk, MPH, RN
Executive Director,
Kentucky Board of Nursing

15 Years



Gloria Damgaard, MS, RN, FRE
Executive Director,
South Dakota Board of Nursing



Jay Douglas, MSM, RN, CSAC, FRE
Executive Director,
Virginia Board of Nursing

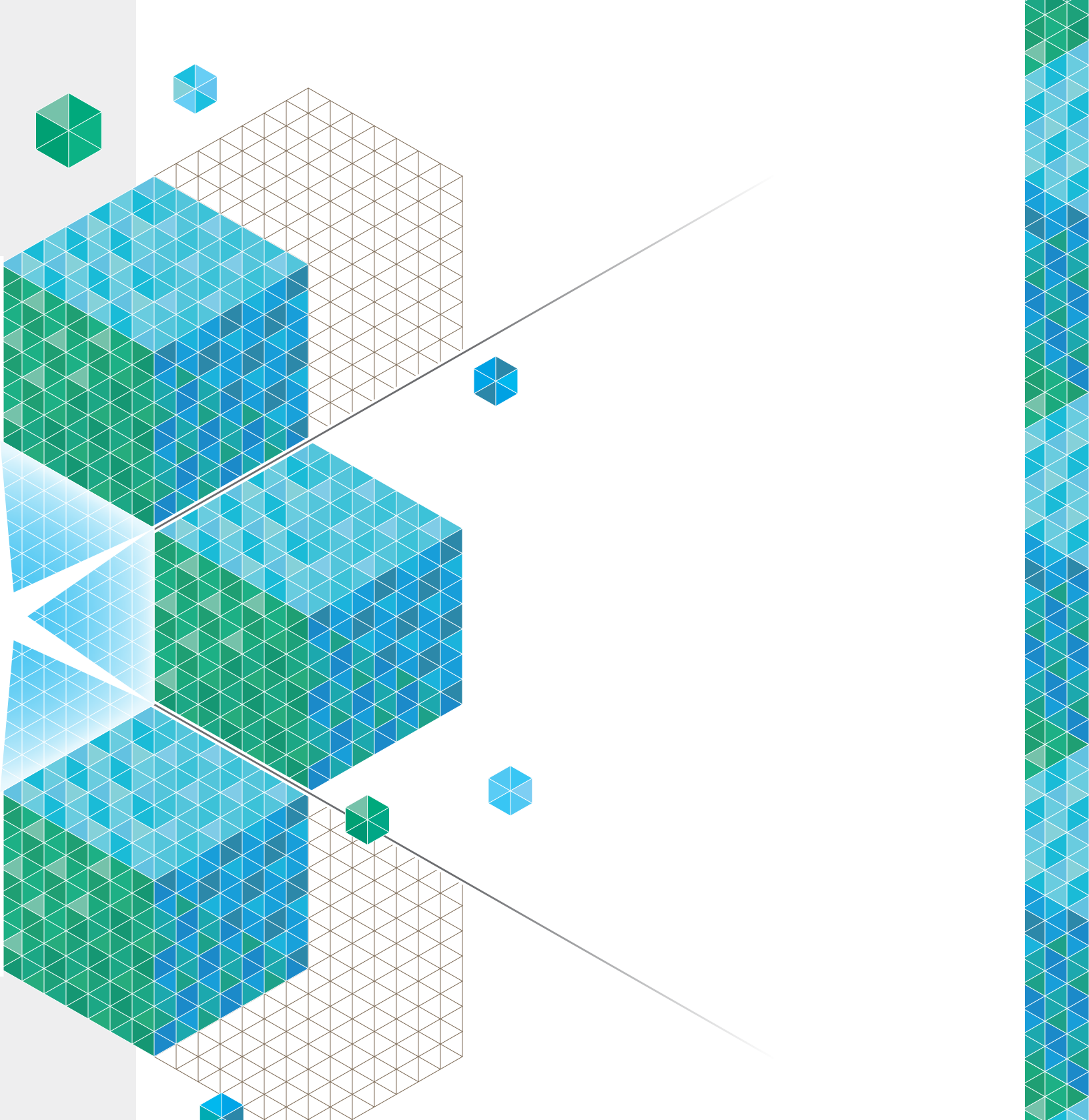


Karen Scipio-Skinner, MSN, RN
Executive Director,
District of Columbia Board of Nursing

Not pictured:

Laurette D. Keiser, MSN, RN
Executive Secretary/Section Chief,
Pennsylvania State Board of Nursing





NCSBN

National Council of State Boards of Nursing

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