

BOARD OF REGISTERED NURSING

# BRN Report

*winter 2013*





**Board of Registered Nursing**

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# Message from the Board President

by Board President Raymond Mallel



The past year has been another very busy one for the Board of Registered Nursing (BRN) Board members and staff. I and five of the other current Board members were appointed last

year after the BRN was reconstituted by the Legislature and Governor in February 2012. We began in June of last year tackling the disciplinary matters and other work that had been put on hold and unable to be completed without a Board in place. Extra meetings were held to complete this work and the Board was successful in processing and eliminating the backlog of cases that had accumulated.

In addition to disciplinary matters, the Board continues to work on a variety of issues impacting registered nursing in California, including new and continuing school approvals, legislation, licensing and nursing practice issues, and drafting regulations. Most recently, the Board has begun work with the Department of Consumer Affairs' SOLID (Strategic Organization, Leadership, and Individual Development) Planning Solutions to update the Board's Strategic Plan. While the Board has been successful in filling most of the positions in the Enforcement Division we are still in need of Nursing Education Consultants for both the enforcement and education areas of the Board.

Finally, I would like to congratulate and welcome our two most recent Board members — Joshua Groban and Beverly Hayden-Pugh — who have jumped right in and rolled up their sleeves! I look forward to working with them as we continue our commitment to protect the health and safety of consumers by promoting quality registered nursing care in California.

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## Next Board Meeting

See the BRN Web site at [www.rn.ca.gov/about\\_us/meetings.shtml](http://www.rn.ca.gov/about_us/meetings.shtml) for the latest dates and locations of upcoming Board and Committee meetings.

*The purpose of the **BRN Report** is to inform registered nurses of Board policies, activities, and processes, current laws related to nursing, and issues pertaining to the regulation of nursing practice and education.*

# Board Transitions to New Computer System

The Board of Registered Nursing (BRN) transitioned to the new Department of Consumer Affairs' (DCA) computer system — called BreEZe — in October. BreEZe has replaced the licensing and enforcement legacy systems that were more than 20 years old. All boards and bureaus under DCA will be converted over the next 18 months. Once completed, BreEZe will be the largest online enterprise licensing and enforcement solution in the world, bringing improved access to our services, greater ease of use for our stakeholders and improved back-office functionality that will greatly enhance our licensing and enforcement efficiency. Some of the enhanced services available on the new computer system include the ability to:

- » Renew a license.
- » Pay with a major credit card in a secure environment.
- » Track the status of an application or licensing request.
- » Submit address changes for RN licenses only at this time.
- » Obtain proof of renewal status and real-time licensee information.
- » File a complaint.

Additional services, including the ability to apply online, will be made available in April and August of 2014. Watch for future BRN publications outlining the enhanced features of all of our BreEZe online services.

# Meet Our Newest Board Members

Board members serve as the policy-setting body for the Board. Some represent different areas of RN practice and some are public members.



**Beverly Hayden-Pugh, MA, RN**, was appointed to the Board by Governor Brown on August 20, 2013, as the Board's nurse administrator member. She is currently vice president and chief nursing officer at Children's Hospital

Central California and has been in her current role since 2003. She has led the organization in attaining the Magnet Nursing Designation, a recognition achieved by less than 5 percent of hospitals nationwide. Ms. Hayden-Pugh began her career with Children's Hospital in 1983 as a staff RN in the pediatric/oncology unit. Since then, she has served in a variety of positions at the hospital. She is a member of several professional and community organizations, including the Association of Nurse Leaders, American College of Healthcare Executives, and the Nursing Leadership Council. Her term expires on June 1, 2015.



**Joshua Groban** is serving as a public member on the Board and was appointed by Governor Brown on April 8, 2013. He has served as senior advisor to the Governor since 2011 and prior to that he was legal counsel

for the "Jerry Brown for Governor Campaign" in 2010. Mr. Groban was an attorney at Munger, Tolles, and Olson, LLP, from 2005 to 2010, and at Paul, Weiss, Rifkind, Wharton, and Garrison LLP from 1999 to 2005. He earned a juris doctorate degree from Harvard Law School. His term expires on June 1, 2017.

# RN Renewal Fees Help Fund Student Scholarship and Loan Repayment Programs

Contributed by Charlene Almazan, Program Officer  
ADN and BSN programs, Health Professions Education Foundation

Did you know that there are registered nursing scholarship and loan repayment programs funded in part through a \$10 surcharge on all RN biennial renewal fees? The Health Professions Education Foundation (Foundation), established in 1987 and housed in the Office of Statewide Health Planning and Development Department (OSHPD), provides these scholarships to associate and bachelor of science degree in nursing (ADN and BSN) students to recruit qualified nurses into medically underserved areas of California. The Foundation is currently in the process of revising regulations to implement programs for Entry Level Masters (ELM) students/professionals as well as the nurse educator program.

Financial incentive is offered to students so that once licensed they will work in areas of unmet need. In exchange for funding of educational costs for one school year, a recipient of the scholarship is obligated to find employment for two years after they complete their degree at a qualifying facility.

The purpose of the BSN loan repayment program is to retain individuals who are currently working in medically underserved areas of California by repaying educational debt they have incurred from their BSN degree. In exchange for the award, professionals commit to working in an underserved area for two years.

## Eligibility for prelicensure scholarships and BSN loan repayment programs

### SCHOLARSHIP PROGRAMS

- » Accepted or enrolled in a California BRN approved program.
- » Maintain at least a 2.0 GPA.
- » Enrolled in at least six units.
- » Graduation after a specific date (check the foundation Web site).

- » Free from any other service obligation.
- » Have valid legal presence to live and work in California.
- » Submit a complete application in Responsive Electronic Application for California's Healthcare (CalREACH) by deadline date (check the foundation Web site).
- » Willing to provide full-time (minimum 32 hours per week) direct patient care at a qualified facility in California for 24 months after graduation

### LOAN REPAYMENT PROGRAMS

- » Licensed as a RN with a BSN degree.
- » Have outstanding educational debt.
- » Currently practicing as a RN with a BSN degree, providing full-time (minimum 32 hours per week) direct patient care at a qualified facility in California.
- » Willing to commit to working in a qualified facility for 24 months.
- » Free from any other service obligation.
- » Have valid legal presence to live and work in California.
- » Submit a complete application in CalREACH by deadline date (check the foundation Web site).

Awards are determined based on career goals, community background, financial need, cultural and linguistic competency, academic performance, community involvement, and work history. When determining awards, the advisory committee looks at the entire application packet. Following is some recent data on the number and amounts of applications received and awarded.

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# Scholarship and Loan Repayment *continued*

## ADN Scholarship Program (ADNSP)

Fiscal Year July 1-June 30	Apps Rec'd	# Awarded	Amount Requested	Amount Awarded
2012/2013	124	64	\$1,240,000.00	\$566,537.00
2011/2012	204	60	\$1,878,788.00	\$454,536.00
2010/2011	164	36	\$1,639,000.00	\$290,952.00

## BSN Scholarship Program (BSNSP)

Fiscal Year July 1-June 30	Apps Rec'd	# Awarded	Amount Requested	Amount Awarded
2012/2013	108	63	\$1,404,000.00	\$693,680.00
2011/2012	156	51	\$2,096,520.00	\$484,842.00
2010/2011	129	42	\$1,601,118.00	\$462,882.00

## BSN Loan Repayment Program (BSNLRP)

Fiscal Year July 1-June 30	Apps Rec'd	# Awarded	Amount Requested	Amount Awarded
2012/2013	174	67	\$1,454,514.87	\$565,446.00
2011/2012*	--	--	--	--
2010/2011	134	66	\$1,085,291.05	\$534,789.00

\*In 2010/2011, cycles changed to once a year. The scholarship deadline was September 11, 2010, and loan repayments deadline was March 24, 2012. In Fiscal Year 2011/2012, all programs moved to a September deadline, so there was not a March cycle in 2011/2012 for BSNLRP.

On July 1, 2013, the Foundation launched an online application through the Responsive Electronic Application for California's Healthcare (CalREACH). CalREACH gives applicants the opportunity to apply for programs, submit applications, and communicate with program officers online. To access applications, users can visit [www.calreach.oshpd.ca.gov](http://www.calreach.oshpd.ca.gov). All applications must be submitted by the deadline date which is in September or October each year. More information can be obtained at the following Web sites:

- » Foundation: [www.healthprofessions.ca.gov](http://www.healthprofessions.ca.gov).
- » Facebook: [www.facebook.com/CalHealthWorkforce](http://www.facebook.com/CalHealthWorkforce).
- » Twitter: [www.twitter.com/HealthProfCAgov](http://www.twitter.com/HealthProfCAgov).

If you would like the Foundation to come to your school or organization to do a presentation about its nursing scholarship or loan repayment programs, please contact Charlene Almazan at [charlene.almazan@oshpd.ca.gov](mailto:charlene.almazan@oshpd.ca.gov). Follow us on Facebook and Twitter to get information on future events we will be attending.

The testimonials included here are excerpts from the stories told by these nursing students who were awarded scholarships.

*Information about this and other financial assistance opportunities is available on the Board of Registered Nursing's Web site at [www.rn.ca.gov/careers/financial-aid.shtml](http://www.rn.ca.gov/careers/financial-aid.shtml).*

# Scholarships Making a Difference

## Two recipients share their stories



"With the help of the Office of Statewide Health Planning and Development Bachelor of Science Nursing Scholarship, I have now completed two full years in the school of nursing with high grades. I used the money by investing my time and resources in doing my best in my student nurse career. After undergoing a rigorous and competitive interview recently, I am now one of the ten externs for Loma Linda University Medical Center. Here, I hope to be challenged in learning to integrate nurse knowledge, skills, and patient interaction."

~ *Vanessa Sevilla, currently attending Loma Linda University School of Nursing*

"This scholarship money came at a perfect time and literally saved my life. It is one of the best things that happened to me during my nursing school and I am about to take my NCLEX exam. This scholarship gave me a chance to focus on my school, and worry less on my financial need. It was a big help for me and my family, as I support my single parent mother. I am currently volunteering at a Kaiser Permanente hospital in a stroke/telemetry unit and continue to volunteer in the UC San Diego Health System's cardiovascular health screening. Thank you for awarding me this scholarship. It has helped me a lot with my nursing school, and now that I'm done, I promise to give back by doing my part for the community. Thank you!"

~ *Jazel Ruivivar, recent RN graduate*



## When You Need Information STAT, Visit the BRN Web Site

When you need information "STAT," check our Web site at [www.rn.ca.gov](http://www.rn.ca.gov)!

It provides the latest information about upcoming Board events, licensing and renewals, links to other healthcare-related sites, scope of practice, the Diversion Program, discipline, and much more:

- » Do you want to renew your license? Do it online!
- » Do you want to get a licensure application form? Get one online!
- » Do you want to find out what colleges offer nursing programs? Check online!

# Nursing Practice Issues

## New Legislation for Medical Assistants Impacting Nurse Practitioners and Certified Nurse-Midwives

Recent legislation (Senate Bill 352; Chapter 286) enacted September 9, 2013, deletes the requirement that services performed by a medical assistant be in a specified clinic when under the specific authorization of a physician assistant, nurse practitioner, or certified nurse-midwife. Written instructions by the licensed physician and surgeon or podiatrist may provide that the supervisory function for the medical assistant for tasks or supportive services be delegated in a standardized procedure to the nurse practitioner or certified nurse-midwife. Medical assistant tasks may be performed when the supervising physician and surgeon is not onsite, if the nurse practitioner or certified nurse-midwife is functioning pursuant to standardized procedures, as defined by section 2725 of the Business and Professions Code. The nurse practitioner, certified nurse-midwife, or physician assistant is prohibited from authorizing a medical assistant to perform any clinical laboratory test or examination for which the medical assistant is not authorized, as specified, a violation of which would constitute unprofessional conduct.

The legislation amends section 2069 of the Business and Professions Code and uses the following definitions which are summarized here:

“Medical assistant” means a person at least 18 years of age who may be unlicensed and performs basic administrative, clerical, and technical support services under the supervision for a licensed physician and surgeon, a licensed podiatrist, physician assistant, nurse practitioner, or certified nurse-midwife, and has had at least the minimum amount of hours of appropriate training established by the Medical Board of California. The medical assistant shall be issued a certificate indicating satisfactory completion of the required training and copies must be retained by the employer.

“Specific authorization” means a specific written or a standing order prepared by the supervising physician and surgeon or the supervising

podiatrist, or the physician assistant, the nurse practitioner, or the certified nurse-midwife authorizing the procedures to be performed on a patient, the duration of which shall be consistent with accepted medical practice. The specific written or standard order shall be placed in the patient’s medical record.

“Supervision” means the supervision of procedures authorized by a licensed physician and surgeon, a licensed podiatrist, a physician assistant, nurse practitioner, or certified nurse-midwife, within the scope of their respective practices, who shall be physically present in the treatment facility during the performance of those procedures.

“Technical supportive services” means simple routine medical tasks and procedures that may be safely performed by a medical assistant who has limited training and who functions under the supervision of a licensed physician and surgeon or a licensed podiatrist, or a physician assistant, a nurse practitioner, or a certified nurse-midwife.

For additional information and specific legislative language regarding this new legislation please see the following website: [http://www.leginfo.ca.gov/cgi-bin/postquery?bill\\_number=sb\\_352&sess=CUR&house=B&author=pavley\\_%3Cpavley%3E](http://www.leginfo.ca.gov/cgi-bin/postquery?bill_number=sb_352&sess=CUR&house=B&author=pavley_%3Cpavley%3E).

## New Medical Board Regulation — Physician Availability During Cosmetic Procedures

Effective July 1, 2013, a new regulation from the Medical Board of California requires that whenever an elective cosmetic medical procedure involving the use of a laser or intense pulse light device is performed by a licensed healthcare provider, a physician with relevant training and expertise shall be immediately available to the provider.

“Immediately available” means the physician must be reachable by electronic or telephonic means without delay. For more information on the new law go to [www.mbc.ca.gov/About\\_Us/Laws/Proposed\\_Regulations](http://www.mbc.ca.gov/About_Us/Laws/Proposed_Regulations).



# Nurse E-notify System Keeps Employers Informed

On December 3, 2012, the National Council of State Boards of Nursing (NCSBN) implemented the Nursys® e-Notify system. This is a nurse licensure notification system which provides employers with real-time e-mail notifications about nurses they employ. The system provides licensure and publicly available discipline data directly to the employer, without the employer having to seek it out.

Nursys is the only national database for verification of nurse licensure, discipline, and practice privileges for registered nurses and licensed practical/vocational nurses. It consists of data obtained directly from the licensure systems of participating national boards of nursing through frequent, secured updates. The e-Notify system alerts subscribers when changes are made to a nurse's record, including changes to:

- » License status.
- » License expirations.
- » Pending license renewal.
- » Public disciplinary action/resolutions and alerts.

There is little or no charge to subscribe to the service. Employers can learn more and sign up by visiting the Nursys Web site at <https://www.nursys.com>. An introductory video on the system is available on the Web site.

## A New Look for Web Site Still Being Planned

The BRN is continuing to plan for a new look to its Web site! The goal is to make the Web site as helpful and user-friendly as possible by making frequently visited pages and needed information easier to locate and overall navigation more efficient so that users can find the information they need quickly and easily.

When you have the opportunity to visit our Web site, please take a minute to answer our Web site satisfaction survey and give us your feedback at [www.dca.ca.gov/webapps/rn/survey.php](http://www.dca.ca.gov/webapps/rn/survey.php).



# BRN Nursing Education Consultants: Who They Are and What They Do

Nursing Education Consultants (NECs) are employees of the State who hold a master's or higher degree in nursing or a related field, have an active, valid California RN license and have at least five years of active work experience in the field of nursing, which includes at least three years as teaching faculty. Below is an introduction of our current NECs:

**Miyo Minato, RN, MN** - Ms. Minato began at the BRN as an NEC in 2000 and was promoted to Supervising NEC in 2011. Prior to joining the BRN, she worked as director of nursing in both nursing education and practice. She also worked many years as a staff nurse and a nursing program instructor. Ms. Minato previously served as the staff liaison for the Board Education/Licensing Committee.

**Janette Wackerly, RN, BSN, MBA** - Ms. Wackerly began work for the BRN as an NEC in 1989 and was promoted to Supervising NEC in 2011. Prior to joining the BRN she worked as director of nursing education for many years at a Sacramento acute care hospital. Her previous experience includes case management and discharge planning and staff nurse. Ms. Wackerly currently serves as the staff liaison for the Board Nursing Practice Committee and has represented the Board on National Council State Boards of Nursing Committees. She frequently consults with the Licensing Unit on Advanced Practice RN applications and issues.

**Badrieh Caraway, RN, MS, MEd, CHES** - Prior to joining the BRN in January 2005, Ms. Caraway had positions for more than 10 years as a clinical educator, disease management coordinator, and director of nursing program development at Kaiser Permanente. She has also served as manager of education services at St. Vincent Medical Center in Los Angeles, assistant director and faculty at a BSN program, and worked as part-time faculty at Sonoma State University MSN Distance Learning program. She has also worked as a private consultant. Ms. Caraway reviews employment requests and remedial education for RNs on probation.

**Katie Daugherty, RN, MN** - Ms. Daugherty joined the BRN in 2000. Prior to joining the BRN she worked in a number of private sector healthcare facilities, including acute and long-term care settings as a department manager for quality/performance improvement, educational services, LTC DSD,

and as a clinical supervisor, charge nurse, and RN staff nurse. She previously held various academic faculty positions in ADN and BSN degree programs and served as a prelicensure program assistant director and director and an area coordinator for an RN to BSN degree program. Ms. Daugherty has represented the Board on various committees for the National Council of State Boards of Nursing. She currently assists the Licensing Unit, as needed, in reviewing curriculum for internationally educated applicants.

**Kelly McHan, RN, MPH** - Ms. McHan has both private and public sector experience in her nursing career. She has worked as an associate professor, public health nurse, hospice case manager, school nurse, health information specialist, home health nurse, and staff nurse. Ms. McHan reviews employment requests and remedial education for RNs on probation. The BRN welcomed her to the NEC staff in 2009.

**Carol Mackay, RN, MN** - Ms. Mackay first worked with the BRN from 1986 to 1993 and then returned in 1995. Prior to first joining the BRN, Ms. Mackay held various academic positions specializing in pediatrics in diploma, ADN, and BSN programs. She currently works as a retired annuitant, assisting NECs with site visits, reviewing new program feasibility studies and handling special projects.

**Leslie Moody, RN, MSN, MAEd** - Prior to joining the BRN in 2010, Ms. Moody served as the director of nursing and allied health at Copper Mountain College where she had also been an instructor. She has experience in nursing administration, quality and risk management, education, informatics, and multiple clinical areas. Ms. Moody currently serves as staff liaison for the Board Education/Licensing Committee.

**Laura Shainian, RN, MSN** - Ms. Shainian has many years of experience as a staff nurse for a variety of employers as well as a nursing instructor. She has also worked as a nursing program director. One of the BRNs most recent hires, she joined the NEC staff in 2012.

**Alice Takahashi, RN, MS** - Ms. Takahashi worked as an NEC for the BRN from 1984 to 1989 and then went to work as a director in acute care at San Pedro

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# Nursing Education Consultants *continued*

Peninsula Hospital. She returned to the BRN in 1993 as a full-time NEC until 2000 when she retired and began working as a retired annuitant for the BRN. She currently works assisting with enforcement and discipline issues and special projects.

**Shelley Ward, RN, MPH** - Ms. Ward first worked for the BRN from 1998 through 2000. She returned in 2009 with a background of working various positions in private sector employment. She has worked as a clinical agency coordinator, clinical practice manager, manager of clinical education, clinical educator, project manager/director, and public health nurse. Ms. Ward coordinates the compilation of the Director's Handbook and the presentations at the annual Director's meetings. She also represents the BRN on the Health Profession Education Foundation Advisory Committee. Ms. Ward coordinates the compilation of the Director's Handbook and the presentations at the annual Director's meetings. She also represents the BRN on the Health Professions Education Foundation Nurse Advisory Committee.

**Kay Weinkam, RN, MS, CNS** - Prior to joining the BRN in 1994, Ms. Weinkam worked in various hospitals as an educator, head nurse, and clinical nurse specialist as well as an educator in ADN and BSN nursing programs. She also worked as the Committee Review Coordinator for Blue Shield of California just prior to joining the BRN. Ms. Weinkam assists the Continuing Education Unit and currently serves as staff liaison for the Board Legislative Committee and she has also represented the Board on the National Council of State Boards of Nursing Disaster Preparedness Committee.

## The job of a Nursing Education Consultant

Business and Professions Code sections 2786 and 2788 require approval of prelicensure nursing programs and continued inspection of approved programs. The Board approves prelicensure nursing programs, nurse practitioner, and nurse midwifery programs in California, which is necessary to ensure that nursing programs are adequately preparing nurses to provide competent and safe care that will not cause patient harm. The Board currently has 142 approved prelicensure nursing programs, 22 nurse practitioner programs and three nurse-midwifery programs. The NECs at the BRN review and monitor nursing programs to make sure they are in compliance with the statutory and regulatory

educational requirements of the Nursing Practice Act. This is done through ongoing communication and periodic program evaluation for continued program approval. The ongoing monitoring and review includes periodic site visits for ongoing program approval. The NECs also work with the many proposed new schools that wish to begin a prelicensure nursing program. These schools must submit letters of intent, feasibility studies, and self studies as part of the approval process. NECs work closely with these schools to assist, advise, and educate them on the process.

In addition, NECs provide consultation and support for other program areas at the BRN. The Enforcement Division consults with NECs on complaints, investigations, and discipline issues and some NECs spend a significant amount of their time approving employment for disciplined nurses on probation. Two NECs assist the Licensing Unit in reviewing international and Advanced Practice Registered Nursing applications and one NEC assists the Continuing Education Unit. They are often invited to present and represent the BRN at various healthcare-related activities and they respond daily to public inquiries relating to practice and education issues. Some NECs represent the Board on National Council of State Boards of Nursing and other California nursing practice and education related committees. They consult with Board members and some of them work as Board committee liaisons to the following Board committees:

**Education/Licensing Committee** - Advises the Board on matters relating to: nursing education, including approval of prelicensure and advanced practice nursing programs; the National Council Licensure Examination for Registered Nurses (NCLEX-RN); and continuing education and competence.

**Nursing Practice Committee** - Advises the Board on matters relating to nursing practice, including common nursing practice issues and advanced practice issues related to nurse-midwife, nurse anesthetist, clinical nurse specialist, and nurse practitioner practice.

**Legislative Committee** - Advises and make recommendations on legislative matters affecting RNs.

# Implementing the Future of Nursing Recommendations in California

Contributed by Mary Dickow, MPA, Statewide Director, California Action Coalition

In October 2010, the Robert Wood Johnson Foundation selected California as one of the first five pilot states across the nation to lead the way in improving the health of our nation's population. That decision was based on the recognition of the important work in nursing and healthcare already underway in our State. Three years later California is one of 51 action coalitions that have been established to implement the recommendations outlined in the Institute of Medicine's landmark report, *The Future of Nursing: Leading Change, Advancing Health*. The key messages from the report are:

- » Nurses should practice to the full extent of their education and training.
- » Nurses should achieve higher levels of education and training through an improved education system that promotes seamless academic progression.
- » Nurses should be full partners, with physicians and other health professionals, in redesigning healthcare in the United States.
- » Efficient workforce planning and policy making require better data collection and an improved information infrastructure.

The California Action Coalition (CA AC) serves as the driving force in the State for the implementation of The Future of Nursing report recommendations and has worked with a diverse group of over 1,000 nurses, healthcare leaders, and strategic partners who are engaged in the implementation of the report recommendations. The CA AC ([www.caactioncoalition.org](http://www.caactioncoalition.org)) includes representatives from a wide variety of groups such as the AARP California, American Nurses Association California (ANA/C), Association of California Nurse Leaders, California Academy of Family Physicians, California Hospital Association, California Institute for Nursing & Health Care, nursing associations, schools, hospital systems, and consumer groups Statewide. We have also received generous support from the Gordon and Betty Moore Foundation and Kaiser Permanente National Patient Care Services. The CA AC structure is made up of a 14-person

Advisory Committee, full established workgroups for each of the eight recommendations, and regional champions across the State.

In recent months the CA AC has been busy with what we are calling "Phase II" of our efforts. We work closely with our colleagues at the Future of Nursing Campaign for Action ([www.campaignforaction.com](http://www.campaignforaction.com)) to implement the eight recommendations set forth in the report:

1. Remove scope of practice barriers.
2. Expand opportunities for nurses to lead and diffuse collaborative improvement efforts.
3. Implement nurse residency programs.
4. Increase the proportion of nurses with baccalaureate degrees to 80 percent by 2020.
5. Double the number of nurses with a doctorate by 2020.
6. Ensure that nurses engage in life-long learning.
7. Prepare and enable nurses to lead change to advance health.
8. Build an infrastructure for the collection and analysis of interprofessional healthcare workforce data.

The Campaign for Action has also identified specific indicators to measure success across the action coalitions. They created a data dashboard to capture the national progress in these key areas. California has adopted this platform to be consistent with the national agenda and identify our progress and areas of opportunity.

**PRACTICE:** The goal of the national campaign is for nurses and other health professionals to practice to the full extent of their education and training. We are fortunate to receive technical assistance from AARP and the Center to Champion Nursing in America who rally support and push for grass roots efforts across the nation. We also have strong support from AARP California at the statewide level. The CA AC works closely with the four advanced practice registered nurse groups in the State together with ANA/C and the BRN in an effort to build a stronger voice for

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# The Future of Nursing *continued*

the profession. While there is often an assumption that the efforts to remove scope of practice barriers applies to advanced practice nurses the CA AC focuses on enabling all nurses and our health professions partners to practice to the full extent of their education, training, and competencies and promoting interprofessional collaboration to provide seamless care to all Californians.

**LEADERSHIP:** The focus for this goal area is to increase the number of nurses in leadership positions at healthcare decision-making tables. The CA AC is working to identify opportunities to facilitate the appointment of more nurses on hospital boards and other Statewide leadership positions by engaging with strategic partners across the State. In addition, we have made a commitment to fostering the growth of future nurse leaders and connecting nurses across the State with an online mentorship tool. The tool was created and developed by a team of leaders consisting of members of the leadership and life-long learning workgroups with support from the Association of California Nurse Leaders and Kaiser Permanente. To learn more about this tool and to sign up to be a mentor or mentee go to: [www.acnlmentoring.org](http://www.acnlmentoring.org). The CA AC works closely with our national partners and other State action coalitions through a leadership collaborative that explores best practices and identifies models to develop all levels of nurse leaders.

**EDUCATION:** There are a number of recommendations that focus on nurses achieving higher levels of education, improving the education system through seamless progression, and increasing the diversity of the profession. California received one of nine grants supported by the Robert Wood Johnson Foundation for Academic Progression in Nursing (APIN). Funded by a two-year \$300,000 grant the APIN initiative is housed at California State University, Los Angeles (CSULA), and accepted ten students from seven community colleges in the area. The first cohort of students started the program with summer courses at CSULA. Workgroups focused on transition to practice, increasing the number of RNs with

baccalaureate degrees and doubling the number of RNs with a doctorate, and engaged in identifying new partners and opportunities to implement programs across the State. We work with the California Institute for Nursing & Health Care ([www.cinhc.org](http://www.cinhc.org)) to strengthen and expand the California Collaborative Model for Nursing Education, a strategy initiated by the institute to advance academic progression in nursing. In addition, the CA AC has engaged the statewide minority nurses associations, Men in Nursing chapters, and the California Nursing Students Association to recruit and develop a diverse group of nursing leaders who are well prepared to care for our increasingly diverse population.

Along with the implementation workgroups the CA AC is engaged in regional activities across the State. This allows for a localized structure to ensure successful implementation of interventions developed at the Statewide level while meeting the priorities of our eight regions. Our regional partners serve as spokespersons and expand our impact and visibility throughout California. Over the past three years the CA AC has held a number of events to highlight our work and continue to develop the strategic partnerships necessary to increase quality and access to care. The CA AC will continue to host regional meetings to engage additional partners, disseminate our accomplishments and develop a sustainability plan for our efforts.

We are excited about the progress to date in California and the opportunity to continue to add to this extraordinary time for nursing in our State. There has never been a time like this with the Affordable Care Act, The Future of Nursing report and the number of dedicated leaders championing numerous activities to improve the health of California. Broad participation from healthcare providers, policy makers, consumer advocates, academic partners and others in the California Action Coalition is critical not only for our success but to improve access to high quality care for all Californians. To get involved or learn more about the CA AC, please contact Mary Dickow at [mdickow@caactioncoalition.org](mailto:mdickow@caactioncoalition.org).



# BRN Needs Your Expertise!

The BRN Enforcement Program is currently recruiting qualified registered nurses to review case materials, prepare written opinions, and possibly testify at administrative hearings as expert witnesses.

The BRN needs expert witnesses in the following areas of expertise:

- » AIDS/HIV
- » Oncology
- » Dialysis
- » Pediatric ICU
- » Hospice
- » Nurse Anesthetist
- » Wound Care
- » Botox/Laser/Dermabrasion
- » Corrections
- » Psychiatrist
- » Family Nurse Practitioner
- » Neonatal ICU
- » Psychologist
- » Risk Management/Quality Assurance

Expert witnesses play a very important role in consumer protection and patient advocacy. This exciting opportunity may be yours if you have the following qualifications:

- » A current and active California RN license.
- » Ten or more years of experience as an RN.
- » Five or more years of experience and expertise in one of the areas or specialties listed above AND current employment in that setting.
- » No prior or current charges or discipline against any healthcare related license in California or in any other place of licensure.
- » No criminal convictions, including any that were expunged or dismissed.

Expert witnesses are paid \$75 per hour for case review and preparation of the expert opinion report and \$75 per hour plus expenses if called to testify at an administrative hearing.

If you are interested, you can obtain an application and information on submitting your application from the Enforcement section on the BRN Web site at [www.rn.ca.gov](http://www.rn.ca.gov), or send your request in writing to:

## **Enforcement Division**

Board of Registered Nursing

P. O. Box 944210

Sacramento, CA 94244-2100

AN INTRODUCTION TO A SERIES OF ARTICLES:

# Addiction and the Registered Nurse

Presented by the BRN Diversion Program

The BRN will be providing a series of articles regarding the dangers of alcohol and drug misuse and abuse in the nursing profession. Critical information will be provided on why and how DUI and DWI convictions relate to the nursing profession, and will include recent court rulings on these issues. Additionally, specific information relating to drug addiction and barriers to addiction treatment will also be provided.

Stay tuned for a series of articles in future issues of *BRN Report* as we expound on the history of the nursing profession and how year after year the public continues to view RNs as the most trusted profession (Horton-Deutsch, McNelis, and Day, 2011). Despite this, however, there are nurses that suffer with substance use disorders who are hidden in a cloud of denial and concealment. Like other healthcare professionals, RNs are surprisingly unaware of the negative impact the disease can have as it relates to nurses and their patients.

Through this series of articles, the BRN will address some of the issues, obstacles, and barriers that surround addiction and the registered nurse. We will offer information on what assistance is available to those RNs living with secrecy and fear while struggling with the disease of addiction. Information will be provided on how the healthcare system can be a part of the health and healing of the nurse professional.

We will provide a detailed description and information regarding the BRN's Diversion Program and how it is a powerful tool used by the Board to address this crippling, dangerous, and deadly disease. We will address the individual components of the program that make it successful and share testimonials regarding its success. We will discuss why this monitoring program, and others like it, and treatment programs in general need to be supported and strengthened as well as why they are important to the registered nurse, the public, and the healthcare system as a whole.

*The BRN's Diversion Program is a voluntary and confidential program for registered nurses who may be suffering from substance use disorders, misuse, or mental illness. The program has been helping RNs licensed in California since 1985. The goal of the program is to protect the public by early identification of registered nurses who may be impaired due to substance abuse disorders, quickly removing them from practice and providing them access to appropriate intervention programs and treatment services. Participants join the Diversion Program either as a self- or Board-referral.*

*If you would like to obtain more information regarding this intervention program, please visit our Web site at <http://rn.ca.gov/diversion/index.shtml> or call the BRN's Diversion Program at (916) 574-7692. To reach the program 24 hours a day via the BRN's contractor, call (800) 522-9198.*

# Purchasing the Nursing Practice Act

The Nursing Practice Act (NPA) is the body of California law that mandates the Board to set out the scope of practice and responsibilities for RNs. The NPA is located in the California Business and Professions Code starting with section 2700. Regulations which specify the implementation of the law appear in the California Code of Regulations, Title 16, Division 14. Other related statutes are included in the Business and Professions Code, Civil Code, Corporations Code, and other miscellaneous codes.

The NPA, with regulations and related statutes from other codes, is updated annually and is available for purchase. LexisNexis has published the NPA in conjunction with the BRN. The 2014 NPA, which includes a CD, is \$28 and is available at [bookstore.lexis.com](http://bookstore.lexis.com).

The NPA laws and regulations, not including the related statutes from other codes, are also available on the BRN Web site at [www.rn.ca.gov/regulations/npa](http://www.rn.ca.gov/regulations/npa).

# Licensees, Have You Moved or Changed Your Name?

## Immediately report any name or address change to the BRN

**Licensees are required by law to notify the BRN if they move or change their name.** Title 16, California Code of Regulations section 1409.1 mandates that all licensees notify the BRN of any change in name or address within 30 days of the change. **The Enforcement Division issues citations and fines to nurses who fail to comply with this requirement.** You must provide the BRN with both the former and new name and your current address as appropriate. It is very important that we have current and complete records so licensees receive timely renewal and other important information.

## Licensees may submit address changes to the BRN by one of the following methods:

- » Download and complete the "Change of Address" form for licensees from the BRN Web site and print and mail to the BRN via regular mail or save and e-mail the completed form to [renewals.brn@dca.ca.gov](mailto:renewals.brn@dca.ca.gov).
- » Call (916) 322-3350 and speak directly with a BRN representative.

## Name changes must be submitted to the BRN in writing and include:

- » The completed "Notification of Name Change" form for licensees.
- » Copies of the required legal documentation certifying the name change.

Name change forms must be printed, completed, signed, and mailed to the BRN's Renewals Unit. More information on name and address changes can be found on the BRN Web site at <http://rn.ca.gov/address.shtml>.



# BRN Web Site Spotlight

The following is the second of many articles to highlight and describe an area of information available on the BRN Web site:

## **Information About Nursing Practice Available on the BRN Web Site**

*Did you know that the BRN Web site has extensive information and resources related to nursing practice information, advisories, and guidelines? These are provided by the BRN to ensure ongoing communication of competency standards to consumers, registered nurses, advanced practice nurses, employers, educators, and other regulators. Just visit the "Regulations" tab on the BRN's home page or go to [www.rn.ca.gov/regulations/practice.shtml](http://www.rn.ca.gov/regulations/practice.shtml). As the scope of nursing practice changes and grows, so does this information. You may wish to check back often for updates.*

# Mission Statement

The Board of Registered Nursing protects the health and safety of consumers by promoting quality registered nursing care in the State of California. We accomplish this through:

- » Licensing registered nurses.
- » Approving nursing education programs.
- » Establishing and upholding competency standards.
- » Intervening with discipline and rehabilitation.
- » Serving as the final authority in the interpretation and enforcement of the Nursing Practice Act.

# BRN Activities

The following summarizes the BRN activities for the 2012-2013 fiscal year. A fiscal year runs from July 1 through June 30.

## **Fiscal Year 2012-2013**

### **Licensing**

Applications Received	35,105
Licenses Issued	21,679
Total Licenses	403,438
Active	387,478
Inactive	15,960

### **Approved RN**

<b>Pre-Licensure Programs</b>	143
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### **Continuing Education Providers**

3,438

### **Enforcement Program**

Complaints Received	8,330
Cases Referred to Attorney General	1,773
Formal Charges Filed	1,372

### **Disciplinary Actions**

Revocation	304
Surrender of License	167
Probation	360
Probation with Suspension	1

### **Diversion Program**

Self-referrals	34
Board Referrals	176
Number of Participants	484
Successful Completions	110

# Recently Enacted Legislation Impacts Registered Nurses

Following is a summary of some of the legislation presented during the 2011-2012 legislative session and enacted in 2012 that affects the Board or the practice of registered nurses in some way. These summaries are not all-inclusive; additional information can be found at [www.leginfo.ca.gov](http://www.leginfo.ca.gov).

- » **AB 1588; Chapter 742.** Requires the Board to waive the renewal fees and continuing education requirements of any licensee called to active duty as a member of the U.S. Armed Forces or the California National Guard if certain requirements are met.
- » **AB 1904; Chapter 399.** Requires the Board to expedite the licensure process for an applicant who holds a license as a registered nurse in another jurisdiction and is married to, or in a legal union with, an active duty member of the U.S. Armed Forces assigned to a duty station in California under official active duty military orders.
- » **AB 2570; Chapter 561.** Prohibits a Board licensee from including a provision in a settlement agreement for a civil dispute that prohibits the other party in the dispute from contacting, filing a complaint with, or cooperating with the Board, or that requires the other party to withdraw a complaint from the Board.
- » **SB 122; Chapter 789.** Requires meetings to be held in northern and southern California. Requires schools of nursing be subject to specified fees. Requires the Board to issue a cease and desist order to a school that is offering an unapproved nursing program, and shall notify the Office of the Attorney General and the Bureau for Private Postsecondary Education of such a school. It would constitute unprofessional conduct for a registered nurse to violate or assist in violation of the prohibition against conducting an unapproved school of nursing.
- » **SB 1365; Chapter 69.** Extends existing liability limits to registered nurses trained in emergency medical services for services rendered at the scene of an emergency or during an emergency air or ground ambulance transport.
- » **SB 1524; Chapter 796.** Deletes the requirement for at least six months' supervised experience for nurse practitioner or nurse-midwife eligibility for a furnishing number. Authorizes a physician and surgeon to determine the extent of the supervision in connection with furnishing or ordering of drugs and devices by a nurse practitioner or nurse-midwife.

Additional information regarding legislative and regulatory updates that impact RNs is available on the BRN Web site at [www.rn.ca.gov/regulations/index.shtml](http://www.rn.ca.gov/regulations/index.shtml).

# The BRN Needs Nurses

The BRN needs nurses to fill our Nursing Education Consultant (NEC) positions in both Education and Enforcement. The following qualifications allow you to compete in an open exam:

- » An active, valid California registered nurse license, and
- » Five years of active work experience in the field of nursing which must include at least three years as a member of the teaching faculty in a U.S. state-approved registered nurse, practical nurse, vocational nurse, or psychiatric technician program, or in a regionally accredited post-licensure program; or
- » Five years of experience in the field of nursing which must include at least three years as a clinical specialist, nurse practitioner, or in-service educator in a hospital, clinic, or private practice setting, and
- » A master's degree in nursing or a related field from an accredited college or university.

NECs in the Education area will help to ensure new and existing nursing programs meet the laws, regulations, and educational requirements. We won't always be in an economic recession and the Baby Boomers will eventually retire, opening the flood gates for new nurses to enter the healthcare field. California still needs nurses to care for the aging population and all consumers.

NECs who join the Enforcement team will be entering a new frontier as the BRN establishes new and exciting processes. The Enforcement NECs will triage incoming complaints to determine appropriate jurisdiction, will decide if formal investigation is warranted, review employment requests and remedial education for nurses on probation, run our Expert Witness Program, and make recommendations for case closure or referral for possible citation and fine or disciplinary action.

Some additional perks include working in a newly built, green-certified office with free parking that's close to shopping, and flexible work schedules.

If you meet the qualifications listed above and are interested in a new opportunity, please visit [www.dca.ca.gov/jobs/rneducation.pdf](http://www.dca.ca.gov/jobs/rneducation.pdf) for more information. We look forward to working with you!



# Enforcement Division Updates

## Do you need to verify an RN's license? You can do this through BRN or Nursys®!

Licensure information on California RNs can be accessed 24/7 at the BRN Web site at [www.rn.ca.gov](http://www.rn.ca.gov) by selecting "BreEZe License Verification" under the "Quick Hits" list on the home page. The BRN also has an automated voice verification system at (800) 838-6828 available Monday through Friday from 8 a.m. to 5 p.m.

You can also see if a nurse is licensed in more than one state on the National Council of State Boards of Nursing (NCSBN) Nursys® at [www.nursys.com](http://www.nursys.com). Nursys® is the nurse licensing database for the NCSBN. It includes data from member boards that have provided data and contains personal, licensure, education, verification and discipline information. The BRN became a participating member board in October of 2011 and California's RN data is now available in Nursys®.

Employers and the public can look up a license and print or download multiple licenses from all participating boards of nursing. For a list of boards of nursing participating in the QuickConfirm license lookup system, visit [www.nursys.com/LQC/LQCTerms.aspx](http://www.nursys.com/LQC/LQCTerms.aspx). This system has helpful information on nurses licensed in states other than California or in multiple states.

## For Employers:

### Remember to verify your current and prospective employees' RN licenses

Employers are required to verify all permanent and temporary RN licenses with the BRN pursuant to Business and Professions Code section 2732.05.

## For Applicants:

### Follow all NCLEX Test Site Rules and Regulations

To ensure all candidates' NCLEX results are earned under comparable conditions and represent a fair and accurate measurement, a standardized testing environment is maintained. Test site rules and regulations can be found in the NCLEX Candidate Bulletin at <https://www.ncsbn.org/1213.htm>. Violation of NCLEX rules may result in cancellation of

examination results, denial of licensure, and/or other disciplinary action.

## For Licensees:

### Immediately Report Any Name or Address Change

Licensees are required by law (Title 16, California Code of Regulations section 1409.1) to notify the BRN of any name or address changes within 30 days of the change. The Enforcement Division issues citations and fines to nurses who fail to comply with this requirement. The fine is \$100 for the first violation.

### Respond immediately if you receive a Continuing Education Audit

Please make sure that you respond to the BRN by the required date if you receive a letter that states you have been randomly selected for a continuing education (CE) audit. At the time of license renewal, you are allowed to self-certify that you have completed the required 30 hours of continuing education since your last license renewal. However, California Code of Regulations section 1451(d) states that "Licensees shall keep the certificates or grade slips from academic institutions pursuant to section 1458 (b)(7) for four years from the date they complete approved continuing education courses and must submit such certificates or grade slips to the Board when requested." Anyone who does not comply with the CE audit or who has not completed the required hours in the last renewal cycle may be referred to the Enforcement Division for review and investigation to determine if disciplinary action is necessary.

### Disclosing patient information on Internet social media is a violation of the NPA

The BRN has been receiving an increase in the number of complaints about nurses sharing patient information via Facebook or other social media sites. Any patient information learned during the course of treatment must be safeguarded by the nurse. Nurses have an ethical and legal obligation to maintain patient privacy and confidentiality at all times. Federal law reinforces and further defines privacy through the Health Insurance Portability

*continued on next page*

# Enforcement *continued*

and Accountability Act (HIPAA). Breaches of patient confidentiality or privacy by nurses could result in disciplinary action by the Board, civil or criminal penalties, and/or employment consequences. The Board seeks the maximum fine amount of \$2,500 for these violations. Additional information about this subject can be found in “White Paper: A Nurse’s Guide to the Use of Social Media” at the National Council of State Boards of Nursing Web site at [www.ncsbn.org/Social\\_Media.pdf](http://www.ncsbn.org/Social_Media.pdf).

## For Consumers

### Disciplinary Actions and Reinstatements

The Disciplinary Actions section of the BRN Web site is no longer available due to the conversion of our legacy database systems into the new BreEZe system. Any disciplinary action taken against a licensee will be visible on the BreEZe License Verification system. Employers may subscribe to e-Notify in order to find out if an employee has been disciplined and when his/her license expires. See Page 7 of this BRN Report for more information on the Nursys® e-Notify system.

### Phony Registered Nursing Educational Programs

There has been a significant increase in inquiries and complaints involving unapproved distance learning programs and nursing programs where didactic education is received in California and clinical training is obtained in the Philippines or another foreign country. If you are aware of any nursing program operating in California which is not approved by the Board of Registered Nursing and not listed on the BRN Web site please contact the BRN Enforcement Division at (916) 557-1213 or a complaint can be filed online at <http://rn.ca.gov/enforcement/complaint.shtml>.

Any licensee found to be involved with or operating an unapproved registered nursing program may be investigated and referred to the Attorney General’s Office for possible disciplinary action against your registered nursing license up to and including license revocation. Unlicensed individuals operating an unapproved registered nursing program will be investigated and could be referred to the local district attorney and/or the Attorney General’s Office for civil and/or criminal action.

# Explanation of Terms

The following is an explanation of terms which may appear throughout the *BRN Report*:

**Board** refers collectively to the nine appointed members. The “Board” is the Board of Registered Nursing’s policy-making body that has responsibility for interpretation and enforcement of the Nursing Practice Act.

**BRN** is the Board of Registered Nursing. This is the State entity within the Department of Consumer Affairs that has the responsibility for implementation of Board policies and programs.

**DCA** is the Department of Consumer Affairs which supports many of the regulatory licensing entities in California, including the BRN.

**NPA** refers to the Nursing Practice Act. The NPA contains laws and regulations that govern the practice of registered nurses in California. It consists of sections 2700-2838 of the Business and Professions Code and Title 16, Division 14, of the California Code of Regulations. Nurses are responsible for knowledge of subsequent changes in the law. Publication of the *BRN Report* is one mechanism for informing registered nurses of these changes.

**RN(s)** is the abbreviation for registered nurse(s).

# NCLEX®-RN Exam Pass Rates for 2010-2012

## First time U.S.-educated candidates seeking licensure in California\*

	2010	2011	2012
Total number tested	12,141	11,398	11,334
Total number passed	10,572	10,024	10,172
Percent Passed (%)	87	88	89.7

\*Includes California and out-of-State U.S.-educated candidates  
Data Source: BRN ATS NCLEX Reports

## Repeat U.S.-educated candidates seeking licensure in California\*

	2010	2011	2012
Total number tested	2,466	2,448	2,076
Total number passed	1,269	1,235	1,068
Percent Passed (%)	51.4	50.4	51.4

\*Includes California and out-of-State U.S.-educated candidates  
Data Source: BRN ATS NCLEX Reports

## First time internationally educated candidates seeking licensure in California

	2010	2011	2012
Total number tested	8,087	4,213	2,056
Total number passed	2,748	1,053	493
Percent Passed (%)	34	25	24

## Repeat internationally educated candidates seeking licensure in California

	2010	2011	2012
Total number tested	9,463	7,932	5,612
Total number passed	1,686	1,339	872
Percent Passed (%)	17.8	16.9	15.5

# New NCLEX®-RN Passing Standard Became Effective April 1, 2013

The National Council Licensure Examination for Registered Nurses (NCLEX®-RN) is the national licensing examination that new RN applicants must take and pass as part of the requirements for licensure. The NCLEX®-RN measures the applicant's knowledge, skills, and abilities (KSAs) to safely and effectively practice as an entry-level registered nurse. As RN practice changes over time and requires higher levels of KSAs, the passing standard of the NCLEX®-RN must be reviewed and adjusted.

The National Council of State Boards of Nursing (NCSBN) Board of Directors evaluates the passing standard every three years, which coordinates with the three-year cycle of test plan evaluation. This three-year cycle was developed to keep the test plan and passing standard current to protect the public by ensuring minimal competence for entry-level RNs. Multiple sources of information are used to guide in the passing standard evaluation.

The NCLEX®-RN passing standard was raised and became effective April 1, 2013. This new passing standard will remain in effect through March 31, 2016. For more information on the NCLEX®-RN examination, including the 2013 NCLEX®-RN Test Plan, visit the NCSBN Web site at <https://www.ncsbn.org/nclex.htm>.

# NCLEX® Panel Recruitment: RNs Needed to Assist With Item Development Process

The National Council of State Boards of Nursing (NCSBN) is currently seeking interested RNs from California who may qualify to serve as item writers, item reviewers, or members of the Standard Setting Panel of Judges for the NCLEX® item and examination development process.

## Item Writing Panel

Item writers create the items (questions) that are administered in the NCLEX® examinations. You must have a master's or higher degree (for the NCLEX® RN exam only), and you must be responsible for teaching basic/undergraduate students in the clinical area OR currently employed in clinical nursing practice and working directly with nurses who have entered practice within the last 12 months. Additionally, you must be currently licensed and practice in California and employed in the United States or its member board jurisdictions. You must be a registered nurse for the NCLEX® RN exam or a licensed practical/vocational nurse (LPN/VN) OR RN for the NCLEX® PN exam.

## Item Review Panel

Item reviewers examine the items that are created by item writers. You must be currently employed in clinical nursing practice AND directly working with nurses who have entered nursing practice during the past 12 months, specifically in a precepting or supervising capacity. You must be currently licensed and practice in California and employed in the United States or its member board jurisdictions. You must be a registered nurse for the NCLEX® RN exam or a licensed practical/vocational nurse (LPN/VN) OR RN for the NCLEX® PN exam.

Benefits of participation include:

- » Earning continuing education contact hours.
- » Contributing to continued excellence in the nursing profession.
- » Networking on a national level.
- » Building new skills that are useful at work as well as for professional growth.

To apply for the Item Writing or Item Review Panel, complete an online application on the NCSBN Web site at <https://www.ncsbn.org/1227.htm>.

# NCLEX® Examinations to Go 'Green'

In an effort to improve both effectiveness and efficiency, the National Council of State Boards of Nursing's (NCSBN) NCLEX® program will go "green" and transition to a completely paperless program. Implementation for the paperless program will take place in the first quarter of 2014. The list of current paper-based materials to go paperless include the Authorization to Test (ATT) letter, scan form registrations and payments, and exam-related bulletins, handouts, and brochures.

To begin the process of transitioning to a paperless system, an e-mail address for all candidates who register on the phone or online will be required immediately. NCSBN ensures a smooth transition and that the same information will be delivered through electronic means. Visit [www.nclex.org](http://www.nclex.org) for more information or join the NCLEX® electronic mailing list.

# 2013 Snapshot of Registered Nurses in California

In February 2013, the number of total RNs in California surpassed 400,000! This number includes RNs with either an active or inactive license. Below are some statistics taken from a variety of BRN sources and reported here to provide a current “snapshot” of the RN population in California.

## Number of Licensees as of August 31, 2013

Description	Active Licenses	Inactive Licenses	Total Licenses
Registered Nurse	391,348	15,900	407,248
Clinical Nurse Specialist	3,395	28	3,423
Nurse Anesthetist	2,202	35	2,237
Nurse-Midwife	1,243	26	1,269
Nurse-Midwife w/furnishing	830	9	839
Nurse Practitioner	18,325	397	18,722
Nurse Practitioner w/furnishing	14,071	108	14,179
Psychiatric/Mental Health	356	18	374
Public Health Nurse	54,302	2,488	56,790
Continuing Education Provider	3,450	N/A	3,450

Data from California BRN licensee files.

## Age Distribution of Active RN Licensees as of August 31, 2013\*

Age Group	Number	Percent
Under 30	39,135	10.0%
30-34	40,309	10.3%
35-39	46,570	11.9%
40-44	46,179	11.8%
45-49	41,092	10.5%
50-54	52,832	13.5%
55-59	51,658	13.2%
60-64	42,657	10.9%
65 and older	30,916	7.9%

\*Numbers estimated from August 31, 2013 statistics based on 2012 California Survey of RN Report data.

## Racial/Ethnic Background of Currently Working RN Licensees Residing in CA

Race/Ethnicity	Percent
White, not Hispanic	53.4%
Hispanic	6.9%
Black/African American	5.2%
Filipino	21.3%
Asian Indian	1.5%
Other Asian	8.1%
Pacific Islander	0.4%
Native American	0.2%
Mixed/Other	3.1%

Data from 2012 California Survey of RNs Report.  
Note: Columns may not total 100% due to rounding.

continued on next page



# Snapshot of Registered Nurses *continued*

## Gender of Currently Working RN Licensees Residing in California

Gender	Percent
Male	11.6%
Female	88.4%

Data from 2012 California Survey of RNs Report.  
Note: Columns may not total 100% due to rounding.

## Employment Status of Active RN Licensees Residing in California

Employment	Percent
Employed in Nursing	85.1%
Not Employed in Nursing	14.9%

Data from 2012 California Survey of RNs Report.  
Note: Columns may not total 100% due to rounding.

## Pre-licensure Education of Currently Working RN Licensees Residing in CA

Education Level	Percent
Diploma Program	10.3%
Associate Degree	45.8%
Baccalaureate Degree	39.0%
Master's or Doctorate Degree	2.2%
LVN-30 Unit Option Program	2.7%

Data from 2012 California Survey of RNs Report.  
Note: Columns may not total 100% due to rounding.

## Highest Education of Currently Working RN Licensees Residing in CA

Education Level	Percent
Diploma Program	7.0%
Associate Degree	39.8%
Baccalaureate Degree	42.3%
Master's or Doctorate Degree	10.9%

Data from 2012 California Survey of RNs Report.  
Note: Columns may not total 100% due to rounding.

## BRN Certifications of Currently Working RN Licensees Residing in CA

Certification	Percent
None	75.9%
Clinical Nurse Specialist	2.6%
Nurse Anesthetist	0.7%
Nurse-Midwife	0.4%
Nurse Practitioner	5.6%
Psychiatric/Mental Health*	1.5%
Public Health Nurse	16.2%

\*The BRN maintains a list of eligible psychiatric/mental health nurse specialists.

Data from 2012 California Survey of RNs Report.  
Note: Nurses can have more than one certification, so columns will not total 100%.

## Graduates from BRN-Approved Pre-licensure Programs

Year	Number	Retention Rate
2011-2012	10,814	78.9%
2010-2011	10,666	77.4%
2009-2010	11,512	77.2%
2008-2009	10,526	75.2%
2007-2008	9,580	74.3%
2006-2007	8,317	72.7%
2005-2006	7,528	73.7%

Data from 2011-2012 BRN Annual School Report.

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# Snapshot of Registered Nurses *continued*

## Employment of Recent Nursing Program Graduates

Employment Location	2009-2010	2010-2011	2011-2012
Hospital	59.0%	54.4%	61.1%
Long-Term Care	9.7%	7.8%	8.3%
Community/Public Health	3.9%	4.5%	3.6%
Other Healthcare	6.0%	5.0%	5.2%
Other	14.8%	6.5%	4.2%
Unable to Find Employment	27.5%	21.8%	17.6%

Data from 2011-2012 BRN Annual School Report.

## Principal Job Title of Currently Working RN Licensees Residing in CA

Title	Percent
Direct Patient Care, Staff/Charge Nurse	66.9%
Management or Administration	10.8%
Advanced Practice (CNS, CRNA, CNM, NP)	5.2%
Service Setting Educator	1.1%
Nursing Program Academic Educator	1.4%
School Nurse/Public Health Nurse	2.3%
Patient Care Coordinator/Case Manager	3.9%
QI/Utilization Review	2.0%
Infection Control Nurse	3.1%
Other	4.4%

Data from 2012 California Survey of RNs Report.  
Note: Columns may not total 100% due to rounding.

## Principal Employer of Currently Working RN Licensees Residing in CA

Employment Location	Percent
Hospital	63.6%
Skilled Nursing/Extend. Care/Rehab.	6.1%
Office/Surgery Center/Dialysis	8.9%
Community/Home Health/Hospice	5.7%
Academic Nursing Program	1.3%
School Health (K-12 or College)	1.4%
Mental Health/Addiction Treatment	2.3%
Correctional Facility	1.6%
Case/Disease Management	2.5%
Other	6.1%

Data from 2012 California Survey of RNs Report.  
Note: Columns may not total 100% due to rounding.

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# Snapshot *continued*

## Additional Research from the BRN in 2013

In 2013, the BRN commissioned two reports to be completed in addition to the *2012 RN Survey and 2013 Forecasting Report*.

**RN Advanced Education Survey** - This was a survey of California RNs to learn about their post-licensure educational experiences and future plans. The survey was conducted, in part, to gain data in light of the Institute of Medicine's (IOM) Committee on the Future of Nursing recommendation that more RNs obtain doctoral degrees, and that 80 percent of RNs have at least a bachelor's degree. The purpose of the survey was to learn information about RN's educational experiences since licensure and/or their plans for additional education.

**Diversity Analysis** - This was a study of RN diversity in California completed by the BRN. A report was completed in 2012 and an update using data from the 2012 Survey of RNs was completed in 2013. An analysis of existing data was done to summarize the ethnic diversity of California RNs and their ability to provide culturally competent care, now and in the future, to the ethnically diverse population in California. The analysis focuses on the trends in the diversity of California RNs, statewide and by region, and compares this diversity to that of the population as a whole.

These and other BRN reports can be found on the BRN Web site at [www.rn.ca.gov/forms/pubs.shtml](http://www.rn.ca.gov/forms/pubs.shtml).





# Navigating the Phone System

## **Call (916) 322.3350 to reach the BRN**

When you hear the greeting, you can direct your call by pressing one of the following numbers. You do not need to wait for the greeting or menu to finish before pressing a number.

## **Press “2” to reach the Examination and Licensing Program.**

This option is for applicants for initial licensure, certification, or examination, and for verification of interim permits and temporary licenses.

## **Press “3” to reach the Renewals Program.**

Use this option to ask a renewal question, file an address change, or to reach other RN licensee services.

## **Press “4” to reach the Diversion Program.**

Use this option to inquire about the rehabilitation program for RNs who may be impaired by chemical dependency or mental illness.

## **Press “5” to file a complaint about a registered nurse.**

This option transfers the caller to the Enforcement Division.

## **Press “6” to obtain recorded information on a variety of topics.**

For example, BRN address; how to endorse from California to another state; application process for continuing education providers; referrals regarding vocational nurses, psychiatric technicians, certified nursing assistants, or home health aides.

## **Press “0” for all other inquiries.**

The BRN also has a toll-free, license verification number: (800) 838-6828 available Monday through Friday from 8 a.m. to 5 p.m.

As always, the BRN Web site, [www.rn.ca.gov](http://www.rn.ca.gov), is available 24/7!