

Annual Report
Fiscal Year 2014

BOARD OF NURSING

July 2014



**DIVISION OF CORPORATIONS, BUSINESS
AND PROFESSIONAL LICENSING**

This Annual Performance Report is presented in accordance with Alaska Statute 08.01.070(1) and Alaska Statute 37.07.080(b). Its purpose is to report the accomplishments, activities, and the past and present needs of the licensing program.

**ALASKA BOARD OF NURSING
FY 2014 ANNUAL REPORT**

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THE STATE
of ALASKA
GOVERNOR SEAN PARNELL

Department of Commerce, Community,
and Economic Development

BOARD OF NURSING

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June 9, 2014

Sara Chambers, Director
Division of Corporations, Business and Professional Licensing
PO Box 110806
Juneau, AK 99811-0806

Dear Director Chambers,

The Board of Nursing respectfully submits the 2014 Annual Report, summarizing our accomplishments, budget, staff and operations. Included in the Annual report are our goals for 2015.

The Board has had a very successful year executing the complex charge of regulating the most diversified group of licensees of any other board. Our Licensees make up 38.5% of the division's licensees and have credentials ranging from high school diplomas to doctoral degrees. The Board is extremely fortunate to have Dr. Nancy Sanders, Ph.D., R.N., as our Executive Administrator. Dr. Sanders is a licensee of our profession. According to Mark Brengelman, JD, MA, "this raises unique issues such as higher professional pay and authority to make substantive, practice decisions". The Board feels confident in delegating many duties to Dr. Sanders so the day to day operations of the office and response to inquiries made through the office are executed in a timely manner. As of April 2014, the Board received 2 new members, an LPN and a public member to complete our roster.

The Board is diligent in reviewing the direct and indirect expenses. The Board continues to request on a quarterly basis, an explanation as to why the indirect expenses have increased by 40% from FY 08 to FY 13 but direct expenses have increased by only 20%. The Board Chair is actively working with the legislators to resolve the budget concerns.

The Board realized the Division was not going to put forth our statute changes that have been requested since 2008 so we did. Dr. Sanders and I worked with Senator Giessel to draft, testify and deliberate our bill, SB 166. The Board effectively worked with the legislators. I am proud to say SB 166 should be signed into law in July. The Board continues to review our statutes and regulations and continues to update them to ensure our mission to ACTIVELY PROMOTE AND PROTECT THE HEALTH OF THE CITIZENS OF ALASKA THROUGH THE SAFE AND EFFECTIVE PRACTICE OF NURSING AS DEFINED BY LAW will be done. The Board has identified other statute changes that need to be made in the next legislative session.

The Board continues to take public testimony on issues. The Board is diligent in executing our other duties such as adjudication, monitoring new educational programs and being responsive to our licensees.

The Board continues to work with the new Director in hopes of resolving the 3rd party reimbursement travel policy that severely impacts Board members being able to attend National Council State Boards of Nursing programs. Board members realize that regulation work is unique. The only resource Board members have to learn about regulatory work and to network is by attending NCSBN events. The Board supports Dr. Sanders to be more involved with NCSBN committees like she has been in the past. The Board requests the Director to support her in this role. Dr. Sanders is viewed by NCSBN as a great resource and is consulted for her expertise as an executive in regulatory work.

The Board looks forward to working with you as our new Director.

Respectfully,
Beth Farnstrom, BSN, RN
Board Chair

**ALASKA BOARD OF NURSING
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IDENTIFICATION OF BOARD**

<u>Board Member</u>	<u>Date Appointed/Reappointed</u>	<u>Term Expires</u>
Beth Farnstrom, RN Chair	March 1, 2007/March 1, 2011	March 1, 2015
Erin Pringle, MS, RN Secretary	August 26, 2010/March 1, 2014	March 1, 2017
Denise Valentine, RN, ANP	January 28, 2008/March 1, 2012	March 1, 2016
Thomas Hendrix, PhD, RN	March 1, 2009/March 1, 2013	March 1, 2016
Kevin Dougherty Public Member	March 1, 2010	March 1, 2014
Julie Gillette Public Member	March 1, 2011	March 1, 2015
Hannah Espera, LPN She was no longer eligible for LPN seat as she is now a licensed RN. She began working as an RN in December 2014.	October 19, 2012	October 31, 2014
Carrie Miller, LPN	January 27, 2014	March 1, 2016
Mary (Jennie) Grimwood Public Member	March 1, 2014	March 1, 2018

ALASKA BOARD OF NURSING
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IDENTIFICATION OF STAFF

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Rebekah Beecher, Administrative Clerk I until August 8, 2013

Danielle Giardi, Administrative Clerk I starting May 12, 2014

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ALASKA BOARD OF NURSING
FY 2014 ANNUAL REPORT
IDENTIFICATION OF INVESTIGATIVE STAFF

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ALASKA BOARD OF NURSING
FY 2014 ANNUAL REPORT
NARRATIVE STATEMENT

The Annual Report reflects the Alaska Board of Nursing's continued attention and support for acceptable standards in nursing practice and nursing education in Alaska. The members of the Board take their responsibility to protect the public seriously and look forward to another year of service to the Alaskan consumers of nursing care.

The Board of Nursing had two notable accomplishments during FY 2014:

The first was the passage of SB 166 in the legislature. Senator Cathy Giessel sponsored the bill. The bill will be signed on 6/18/2014 by Governor Sean Parnell. Several key changes were approved:

- the Board now has authority to promulgate regulations for a "retired nurse" category of licensure,
- there is now an designated ANP seat on the Board,
- the nurse educator can be teaching in an Associate Degree, Baccalaureate, or graduate nursing program,
- additional changes were approved to update the statute.

Secondly, through regulation change, was able to recognize clinical nurse specialists as advanced nurse practitioners. In the future, the four roles of advanced practice nursing will be advanced as a statute change.

The Board of Nursing conducted four (4) three-day meetings during FY 2014:

- July 10-12, 2013 in Anchorage,
- October 23-25, 2013 in Anchorage,
- January 22-24, 2014 in Anchorage, and
- April 2-4, 2014 in Juneau.

A range of issues were addressed by the Board of Nursing at its meetings which are detailed in the evaluation of FY 2014 Goals and Objectives.

The Board has delegated the review of applications for nursing licensure and nursing assistant certification to the Executive Administrator. If questions arise regarding whether an applicant is qualified because of their background, the investigators assigned to the Board of Nursing are consulted. Depending on that review, the application is either approved or presented at a Board meeting for advice, approval or denial.

In FY 2014, the two provisionally approved Associate Degree Nursing programs in Anchorage started their curriculums. AVTEC, Alaska's Institute of Technology, that has a provisionally approved Associate Degree RN program, graduated cohorts during FY14. Too few graduates have taken the licensing examination, NCLEX, to determine the success of the program. That said, the first cohort had an inadequate pass rate. AVTEC faculty members and administrators were notified so that an assessment and changes could be made.

Charter College, a for-profit institution, started their first cohort in FY 2014. This program has not graduated its first cohort to date. The Board takes the review of the provisionally approved programs very seriously in order to protect the citizens of Alaska and to assure the quality of the program for the entering students.

The Board continues to review policies and procedures for investigation of complaints and issues brought before the Board. A primary concern of the Board of Nursing is consistency in discipline. New disciplinary guidelines were approved during FY 13 to assist in this endeavor. The guidelines have been fully

implemented. The investigators have been very helpful in providing information to the Board and answering the Board's questions concerning investigations and the investigative process. In addition, an Assistant Attorney General with the Department of Law attends meetings when requested to advise the Board on legal matters.

All Board of Nursing meetings are public-noticed and a copy of the agenda is posted on the Board's website. In addition, the agenda is forwarded to individuals or institutions who have registered on the Board's listserv. Approximately 800 registrants are currently sent the agenda and other information via the listserv. Topics of interest to advanced nurse practitioners are forwarded to the President of the Alaska Nurse Practitioner Association for posting on their listserv.

In addition to the listserv, a concerted effort was made to keep the Board of Nursing website up to date. The updates to the website during FY 2014:

- The online form link for CNAs was prominently displayed. Information about LPN and RN renewal that will occur in FY 2015 was also prominently displayed.
- The names of nurses and CNAs disciplined by the board are updated after every Board meeting. The information is on the publically accessible Disciplinary Database. The Board determined that the names of these individuals will remain on the database indefinitely. The Discipline database is in the process of being reformatted.
- The Advisory Opinion database is updated after every Board meeting so that the public is privy to the opinions the Board has made concerning scope of practice questions, and education program approval. This database is in the process of being reformatted to make it easier for the licensees and employers.

In addition to the above actions to keep the public informed, the Board Chair, Beth Farnstrom, and the Executive Administrator submit articles for publication in two (2) newsletters: the Alaska Nurse, the quarterly newsletter of the Alaska Nurses' Association and Alaska Nursing Today, the newsletter of the Alaska Professional Nursing Association. Representatives of these two organizations plus the Alaska Nurse Practitioner Association also attend the quarterly meetings of the Board of Nursing.

The Board continues to review and modify the nursing regulations (12 AAC) to update them to reflect current nursing practice and to implement the mission of the Board of Nursing. The Board of Nursing's mission is to actively protect and protect the health of the citizens of Alaska through the safe and effective practice of nursing as defined by law.

ALASKA BOARD OF NURSING
FY 2014 ANNUAL REPORT
BUDGET RECOMMENDATIONS FOR FY 15

TRAVEL REQUESTS: ranked in order of the board's priority. Provide the best estimates based on past actuals and seasonal trends in travel, such as summer hotel rooms or increased fuel costs. Calculate on full costs and note any third-party fiscal offsets. Expand the tables below as needed.

Board Meetings

Date	Location	# of Board Members	# of Staff	Total Estimated Cost (total of airline, hotel, mileage, M&IE, parking, rental car, taxi, etc.)
7/9-11/2014	Anchorage, AK – Atwood Bldg. Suite 1270	7	1	\$5,139.44
10/22-24/2014	Fairbanks, AK – FMH or Cancer Center Conference Room	7	1	\$5,489.60
1/21-23/2014	Anchorage, AK-Atwood Bldg. Suite 1270	7	1	\$4,934.00
4/2014	Juneau, AK – SOB 9 th Floor Conf Rm A	7	1	\$8,127.19

Travel Required to Perform Examinations

Date	Location	# of Board Members	# of Staff	Total Estimated Cost (total of airline, hotel, mileage, M&IE, parking, rental car, taxi, etc.)
	N/A			
Description of meeting and its role in supporting the mission of the board:				

Out-Of-State Meetings and Additional In-State Travel

Rank in order of the board's priority. "Reimbursement" refers to payment to cover travel costs. "Direct" refers to an offer by a company to secure travel arrangements on behalf of the board member.

Rank	Date	Location	# of Board Members	# of Staff	Total Estimated Cost		Total Potential Third-Party Offset
					(total of airline, hotel, mileage, M&IE, parking, rental car, taxi, etc.)	Conference Fee	<input checked="" type="checkbox"/> Reimbursement <input type="checkbox"/> Direct
1	8/13-15/2014	Chicago, IL	3	1	\$7,368.72	\$350.00	\$5,500.00
	Description of meeting and its role in supporting the mission of the board: Annual Meeting and Delegate Assembly of the National Council of State Boards of Nursing (NCSBN). This is a meeting of representatives of every state and territory of the US (except Puerto Rico) where regulatory issues; practice, education and discipline issues are discussed. Many stakeholders such as American Nurses Association, AACN (an accrediting body), and educational institutions, etc. are present. Associate members come from Canada, New Zealand, Australia, Singapore, Ireland, etc. because the issues are global in nature. NCSBN owns and administers the national licensure examination. The outcomes of all committee work are reviewed, new programs, research studies, etc. are determined.						
2	3/14-16/2015	Louisville, KY	2	1	\$6,000.00	N/A	<input checked="" type="checkbox"/> Reimbursement \$4000.00
	Description of meeting and its role in supporting the mission of the board: 2015 NCSBN Mid-Year meeting is a meeting of representatives of every state and territory of the US (except Puerto Rico) where regulatory issues; practice, education and discipline issues are discussed. In addition, leadership skills for the Board Chair and Executive Officer are offered. There is opportunity for sharing of solutions to common problems.						
3	6/23-24/2015	TBD		1	\$2,000.00	N/A	<input type="checkbox"/> Reimbursement <input type="checkbox"/> Direct \$2000.00
	Description of meeting and its role in supporting the mission of the board: NCSBN Executive Officer Summit Yearly, all of the Executive Officers of Boards of Nursing from every jurisdiction (states, territories of the US, plus several foreign countries and providences) meet to exchange information, share strategies that might help solve a problem in other jurisdictions, in this case Alaska, and network. There is only one Executive Officer per state/territory/or foreign jurisdictions. Being able to meet together is a means of decreasing the sense of isolation and remoteness. Important topics such as the impact of the Affordable Care Act and the movement to license military veterans as soon as possible will be discussed. Other subjects mirror my responsibilities for the Alaska Board of Nursing such as licensure issues, disciplinary issues, practice scenarios, and changes in education requirements for nurses.						

**ALASKA STATE BOARD OF NURSING
FY 2014 ANNUAL REPORT
BUDGET RECOMMENDATIONS FOR FY 2015 CONTINUED**

Out-Of-State Meetings and Additional In-State Travel Continued:

Rank	Date	Location	# of Board Members	# of Staff	Total Estimated Cost		Total Potential Third-Party Offset
					(total of airline, hotel, mileage, M&IE, parking, rental car, taxi, etc.)	Conference Fee	<input type="checkbox"/> Reimbursement <input type="checkbox"/> Direct
4	Fall 2015	Kotzebue, AK		1	\$650.00	N/A	Nurse Aide RSA
	Description of meeting and its role in supporting the mission of the board: The trip to evaluate the Alaska Technical Center's CNA program is required by regulation 12 AAC 44.830.						
5	10/28-30/2014	Chicago, IL	1	1	\$4000.00		\$2000.00
	Description of meeting and its role in supporting the mission of the board: The 2014 International Nurse Regulator Collaborative Symposium will provide an opportunity for nurse regulators to explore and discuss the evolution of concepts that inform public protection models. Who should attend: Members and staff from nurse regulatory bodies.						
6	4/14-15/2015	Rosemont, IL	1	1	\$3600.00		<input checked="" type="checkbox"/> Reimbursement \$1800.00
	Description of meeting and its role in supporting the mission of the board: NCSBN APRN Roundtable- the ANP member of the Board attends this meeting to keep up to date on issues specific to ANP practice. Specific current concerns include ANPs practicing in AK without AK license/authorization, APRN nurse licensure compact, and independent practice changes.						
7	6/1-3/2015	Indianapolis, IN		3	\$6000.00		<input checked="" type="checkbox"/> Reimbursement \$2000.00
	Description of meeting and its role in supporting the mission of the board: 2014 NCSBN Discipline Case Management Conference provides a forum to learn effective investigative tools, strategies and procedures for regulatory proceedings. An investigator that works on nursing cases usually attends to increase their skills and orient them to specific nursing issues.						
8	Fall 2014	Bethel, AK		1	\$650.00		<input type="checkbox"/> Reimbursement <input type="checkbox"/> Direct CNA RSA
	Description of meeting and its role in supporting the mission of the board: The trip to evaluate the Bethel CNA program is required by regulation 12 AAC 44.830.						

NON-TRAVEL BUDGET REQUESTS

Dues/Memberships/Resources/Online Training/Teleconferences/Examination Contracts

Provide details of the budgetary request. Break down into specific events, where applicable.

Product or service:	Provider:	Cost per event:
N/A		
Description of item and its role in supporting the mission of the board:		

**ALASKA STATE BOARD OF NURSING
FY 2014 ANNUAL REPORT
BUDGET RECOMMENDATIONS FOR FY 2015 CONTINUED**

Other Items with a Fiscal Impact:

Product or service: Electronic devices to use for paperless meetings	Provider: Infrastructure costs – would need to go through IT and out for bid.	Cost per event:
Description of item and its role in supporting the mission of the board: Board members are volunteers taking leave from their jobs to serve on the Board. Laptops or e-readers would facilitate getting the information to them prior to Board meetings allowing them more time for preparation. There would be cost savings from going paperless.		
Product or service: Live Scan fingerprinting	Provider: Infrastructure costs – would need to go out to bid.	Cost per event:
Description of item and its role in supporting the mission of the board: Statute AS 08.68.100(10) requires fingerprints to be submitted for new licensees/certificate holders (by exam, by endorsement, and by reinstatement). Being able to accept live scan fingerprints would facilitate the timely submission of fingerprints from all over the US. The ability to speed up the licensing/certification process would benefit the licensees/certificate holders and the public. Performing background checks directly meets the mission of the board to protect the public by licensing only qualified safe practitioners.		

Summary of FY15 Fiscal Requests

Board Meetings	23,690.07
Travel for Exams	N/A
Out-Of-State and Additional In-State Travel	30,268.72
Dues/Memberships/Resources/Online Training/Teleconferences – with each Board meeting – approx. 20 hrs/meeting	432.00
Total Potential Third-Party Offset	<17,300.00>
Other	
Total Requested:	37,090.79

Additional information:

Please note, not all of the proposed staff travel is for the Executive Administrator. Investigator(s) are also included in one of the requests. The Board Chair and the ANP member of the Board are also identified as attending some of the requested travel.

ALASKA BOARD OF NURSING
FY 2014 ANNUAL REPORT
RECOMMENDATIONS FOR PROPOSED LEGISLATION FOR FY 14

Focus Area (Check all that apply)

- Economic Development
- Government Within Our Means
- National Regulatory/Industry Changes
- Enhance Public Protection

INTRODUCTION

Healthcare is rapidly changing in complexity which has ramifications for nursing regulation. Access to safe nursing care is a top priority for Americans, Alaskans and governance leaders.

The fundamental charge to the Alaska Board of Nursing is the protection of the public through regulation for safe nursing practice. Statutes that are current with healthcare practices are paramount to the success of Board of Nursing's work in protecting the public.

The changes recommended in this document reflect a national consensus on advanced practice and titling for nurse practitioners, certified registered nurse anesthetists, certified nurse midwives and clinical nurse specialists. The statute changes are not capriciously recommended. The Board of Nursing has exercised prudence in recommending only the following changes.

PROPOSED STATUTE CHANGES WITH RATIONALES

1. Update title and licensure level in 08.68.100(a)(1)

Sec. 08.68.100. Duties and powers of board. (a) The board shall

- (1) adopt regulations necessary to implement this chapter, including regulations pertaining to practice as an advanced [nurse practitioner] **practice registered** nurses [and a nurse anesthetist] and regulations necessary to implement AS 08.68.331 – 08.68.336 relating to certified nurse aides in order to protect the health, safety, and welfare of clients served by nurse aides;

RATIONALE: Updates the duties and powers of the board to include APRNs. Nurse anesthetists are subsumed under the designation of APRNs.

The Department of Law has identified that the current abbreviation for advanced nurse practitioner (ANP) is the same as the abbreviation for adult nurse practitioner (ANP) and acute care nurse practitioner, creating title confusion. The APRN is now the nationally recommended title for this level of Registered Nurse.

The national APRN Consensus Model recommends licensure for APRNs (nurse practitioners, certified registered nurse anesthetists, certified nurse midwives and clinical nurse specialists) instead of the current authorization. Therefore, the Board of Nursing is requesting a change in the statute to reflect this change to licensure.

10. AS 08.68.230. Use of title and abbreviation.

(d) A person who holds a temporary permit to practice as a licensed practical nurse shall use the title “Temporary Licensed Practical Nurse” and the abbreviation “TLPN”.]

RATIONALE: The title of “temporary” is never used. AS 08.68.230 was updated in 2014; this section (d) was inadvertently missed.

16. AS 08.68.279 Whistleblower protection for nurses concerning delegated duties.

(a) An employer may not discharge, threaten, or otherwise discriminate against a nurse employed by the employer regarding the nurse’s compensation, terms, conditions, location, or privileges of employment for a nurse’s refusal to **delegate** a task involving [a] nursing care [delete ***delegated to the nurse by the nurse’s superior***] **in violation of regulations adopted by the board, if**

(1) the nurse alleges that the task was [delete ***improperly delegated***] **not delegatable,**

(2) the nurse reports the [delete ***attempted improper delegation***] **requirement to improperly delegate** to the Board of Nursing within 72 hours after the attempted delegation was made; and

(3) the Board of Nursing finds that the task was [delete ***improperly delegated***] **not allowed to be delegated.**

(b) Relief and penalties.

(1) A person who alleges a violation of AS 08.68.279 may bring a civil action and the court may grant appropriate relief, including punitive damages.

(2) A person who violates or attempts to violate AS 08.68.279 is also liable for a civil fine of not more than \$10,000. The Department of Labor may enforce this subsection.

RATIONALE: The Board of Nursing was advised by an Assistant Attorney General to make these changes. AS 08.68.279 was hastily drafted in 2002, poorly worded, and the enforcement piece omitted as a result of that haste. This amended language reflects the language in the general whistleblower statute (AS 39.90.120), which covers public employees. The change does not make the Board of Nursing the enforcer; it clearly defines enforcement by the Department of Labor. Delegation of nursing duties is becoming much more prevalent and presents a real threat to public safety if it is done for economic expediency rather than safe nursing healthcare.

17. 08.68.??? (addition) Duty of facilities to report.

(a) A facility that fires, suspends, conditions or restricts the practice of a person licensed to practice nursing in the state shall report to the board the name and address of the person and the reason(s) for the action within seven working days after the action is taken. A facility shall also report to the board the name and address of a person licensed to practice nursing in the state if the person resigns while under investigation by the facility.

(b) Upon receipt of a report under (a) of this section, the board shall investigate the matter and, upon finding that there is reasonable cause to believe that the person who is the subject of the report is a danger to the health or welfare of the public or to patients, the person’s license may be disciplined or suspended under 08.68.275.

(c) If the board finds that a person licensed to practice nursing is unable to continue to practice with reasonable safety to the person’s patients or to the public, the board shall initiate action to suspend, revoke, limit, or condition the person’s license to the extent necessary for the protection of the patients and public.

RATIONALE: It is important for facilities to report to the board information that they have about the ability of nurses to practice safely. Currently, in regulation, there is a requirement for a nurse to report, but there is no requirement for a facility to report. Often it is the human resources department who

takes the action. If the problem is not reported to the board for action, a licensee could continue to practice and put the public at risk. The duty of a facility to report a physician is in the Board of Medicine's statute. The Board of Nursing is asking for a similar requirement.

19. 08.68.850(1) Advanced Practice Registered Nurse means a registered nurse authorized to practice in the state who, because of specialized education and experience, is certified to perform acts of medical diagnosis and the prescription and dispensing of medical, therapeutic, or corrective measures under regulations adopted by the board. APRNs include the following:

1. Certified Registered Nurse Anesthetists

2. Clinical Nurse Specialists

3. Certified Nurse Practitioners

4. Certified Nurse Midwife.

20. 08.68.850 (11) (addition) Clinical Nurse Specialist (CNS) is a registered nurse with graduate preparation (earned master's or doctorate) from a graduate program that prepares CNSs, and holds national certification in a specialty area. CNSs are clinical experts in the diagnosis and treatment of illness, and the delivery of evidence-based nursing interventions. A person may not act as a clinical nurse specialist, use the name, title, designation, initial or abbreviation of clinical nurse specialist or otherwise hold oneself out as a clinical nurse specialist unless the person is nationally certified as a clinical nurse specialist.

21. 08.68.850 (12) (addition) Certified Nurse Midwife is a registered nurse with graduate preparation (earned master's or doctorate) from a graduate program that prepares CNMs, and holds national certification. More definition needed.

1. Explain the benefits the proposed legislation would provide.

See above for the rationale for each requested change to AS 08.68

Other benefits for ANP change to APRN

Consumers	Clearly understand the role of APRNs, know that there is a competent individual managing their care and that the practice of APRNs is regulated consistently for public protection.
Employers and Other Health Care Workers	Clearly understand the preparation, training and scope of practice of APRNs with whom they are working.
Current APRNs	Increase confidence in knowing that you will meet licensure requirements to practice and that your role and scope of practice will not change if you need to relocate.
Future APRNs	Have confidence that your education program is accredited and that you are receiving the appropriate education and training for preparation and entry into advanced practice nursing.
Boards of Nursing	Fulfill the public protection role and have confidence that licensed APRNs entering your state are competent, having met uniform requirements for licensure from other states.
Legislators	Be accountable to your constituents that an APRN regulatory model is being employed in recognition of public protection.

2. **Explain the consequences, if any, of not implementing the proposed statutory change.**
The nationally approved APRN Consensus Model would not be implemented in the statute (AS 08.68)
The public of Alaska would not benefit from changes that would provide safer nursing care and understanding of the roles of advanced practice nursing by the public.
3. **Describe any potential negative impacts of this legislation and how they would be minimized.**
The APRN Alliance of nurse practitioners, clinical nurse specialists, CRNAs, and nurse midwives have made substantial progress in endorsing the APRN Consensus Model. The Executive Administrator and the ANP on the Board of Nursing (the in-coming Chair) are currently working with the Alaska Nurse Practitioner Association (ANPA), the Alaska Nurses Association (AaNA) and other professional nursing organizations to encourage support of the title change and other changes to the statute.
4. **Who do you anticipate will support the bill and why? Include municipalities, groups, etc...**
Alaska Nurse Practitioner Association, APRN Alliance, and AaNA and hopefully organizations like Alaska State Hospital and Nursing Home Association (ASHNHA), AARP, etc.

The support of these changes by these organizations would promote safer care to the Alaskan public by licensing qualified nurses, advanced practice registered nurses and nurse aides.

5. **Who do anticipate will oppose the bill and why?**
There is always concern that the Alaska Medical Association and/or the American Medical Association (AMA) will try to restrict the practice of advanced nurse practitioners (APRNs if the statute is passed). ANPs in Alaska have a 30 year history of successful independent practice and independent prescriptive authority including controlled substances. However, those statistics do not deter some physicians and physician organizations from attempting to assert changes into legislation to limit the practice of ANPs.

It is documented that Alaska will need many more family practice health care providers in the future and ANPs (APRNs if the statute is passed) are qualified to fill this role.

6. **What other state departments will be affected by this legislation? Have you discussed the impact with the affected departments, and if so who and do they support this bill?**
HSS (Medicaid/Medicare) - the effect would be the required regulation changes. No, the Department has not been contacted.
7. **Identify and describe any previous state or federal legislation or similar efforts in other states which affect or relate to this proposal.**
The APRN Consensus Model has the support of over 50 national nursing organizations since 2008. Implementation of the Consensus Model will help standardize advanced nurse practitioner practice across the United States. Many states have changed their statute to endorse the APRN Consensus model. Additional states do so every year.
8. **Has this bill topic been previously introduced in the legislature? If so, what was the final outcome and why?**
No, the statute changes have not previously been introduced in the legislature.
9. **In the event questions should be raised during review of this request, please indicate below which board member should be contacted:**
Denise Valentine, Chair or Nancy Sanders, Executive Administrator, Alaska Board of Nursing

ALASKA BOARD OF NURSING
FY 2014 ANNUAL REPORT
ANTICIPATED REGULATION CHANGES FOR FY 15

The Alaska Board of Nursing approved regulation changes that were put into effect in March 2014. The need for additional regulation changes have been identified and will be approved by the Board in FY 15. The practice of reviewing the regulations at each Board of Nursing meeting allows the regulations in 12 AAC 44 to be responsive to the changing health care arena. The regulations pertaining to nursing education programs that began to be revised in FY 14 will continue to be examined and updated.

Needed regulation changes already identified:

- Canada will begin taking the NCLEX, the nursing licensure examination used in the United States in 2015. Regulation changes will be required to allow acceptance of results from Canada.
- A “retired nurse status” was created in the FY 14 statute change requiring regulations to be written.
- The regulation regarding the administration of non-herbal nutritional supplements needs refinement.
- The regulations allowing the Executive Secretary to be called Executive Administrator can be repealed as the title in the statute was changed.
- Regulations related to “social media” and “boundary crossing” not of a sexual nature need to be initiated.
- Regulations related to delays in taking the licensure examination need to be written. Someone who graduated 20 years ago applied to take the NCLEX without taking a remedial course. The time limit needs to be discussed and regulations written

The Executive Administrator will complete the Proposed Regulation Recommendation Form and submit it with the motion from the Board of Nursing approving the proposed regulation changes.

**ALASKA STATE BOARD OF NURSING
FY 2014 ANNUAL REPORT
BOARD GOALS AND OBJECTIVES**

List the board's FY14 goals and objectives and how they were met:

MISSION STATEMENT

The mission of the Alaska Board of Nursing is to actively promote and protect the health of the citizens of Alaska through the safe and effective practice of nursing as defined by law.

VISION

- Evidence-based, best practices in regulation.
- Vigilant dedication to maintain and strengthen public safeguards.
- Eliminate or prevent unintended regulatory barriers to nursing practice in Alaska.
- Proactive anticipation of changes in the scope of nursing practice and the workforce.
- Ethical pursuit of excellence in regulation.

VALUES

The Alaska Board of Nursing endorses the following values for application within all Board activities and decisions, including those delegated to staff and themselves.

- Integrity: Doing the right thing for the right reason through informed, open and ethical debate.
- Accountability: Taking ownership and responsibility for board processes and outcomes.
- Quality: Pursuing excellence and continuous improvement in all aspects of board work.
- Vision: Using the power of imagination and creative thought to foresee potential future nursing practice innovations.
- Collaboration: Forging solutions through appropriate partnerships, examining all sides of issues.
- Leadership: Providing positive direction for safe nursing practice in Alaska.

FY 2014 GUIDING PRINCIPLES

Protection of the public

- Nursing regulation exists to protect the health, safety and welfare of the public as they receive nursing services.
- Involvement of nurses in collaboration with the public in nursing regulation is critical.
- Nursing education programs must meet statutory and regulatory requirements

Competence of all nurses and nurse aides regulated by the Alaska Board of Nursing

- Nursing regulations define licensure and certification requirements for all levels of nursing practice.
- Competence is validated at initial Alaska licensure/certification/authorization and biannually.

Due process and ethical decision-making

- Nursing regulation ensures due process rights for all entities regulated by the Board of Nursing.

- All entities regulated by the Alaska Board of Nursing are accountable for conduct based on legal, ethical and professional standards.

Shared accountability and collaboration

- The Board of Nursing collaborates with individuals and agencies in the interest of public protection, patient safety, and the education of nurses.

Evidence-based regulation

- Nursing regulation uses evidence-based standards of practice, advances in technology, and demographic and social research in its mission to protect the public.

Reponses to the marketplace and healthcare environment

- Nursing regulation requires timely and thoughtful responsiveness to the evolving marketplace and healthcare environment.
- Continuous updating of nursing regulations ensures clarity of scope of practice and congruence with evidence based nursing standards and the state’s changing needs for nursing care.

Response to globalization of nursing

- Nursing regulation requires fair and ethical practices and policies to address the social, political and fiscal challenges of globalization.

LICENSURE/CERTIFICATION GOAL: To license or certify qualified persons for the practice of nursing.

Licensure Objectives:

Objective	Performance Measure	Benchmarks	Responsibility Assigned	Timeframe
L.1. On-going responsibilities related to licensure by: <ul style="list-style-type: none"> • Exam • Endorsement • Reinstatement • Renewal • Courtesy • Retired 	1. Issuance of licenses/certifications to applicants who meet established criteria	<ol style="list-style-type: none"> 1. Assure Certified Nurse Aide education programs are in compliance with federal law 2. Update regulations related to all types of licensure/certification 	<ol style="list-style-type: none"> 1. Executive 2. Executive, Board 	<ol style="list-style-type: none"> 1. Ongoing work of contract employee/Board employee 2. Ongoing
L.2. Assessment of the continued competence of licensed nurses and certified nurse aides	1. Appropriate requirements for demonstrated continued competence as a condition of licensure/certification by endorsement, reinstatement and renewal.	<ol style="list-style-type: none"> 1. Literature review of best practices, standards set by preponderance of other state boards. 2. National Council of State Boards of Nursing best practices recommendations will be consulted. 3. Review recommendations 4. Promulgate regulations that are legally defensible 	1. Board Executive	Ongoing a. regulations mirroring ANP standards for CRNAs— completed in FY 15

<p>L.3. Licensure/certification standards that allow for responsiveness to changes in the healthcare environment</p>	<p>1. Assess alignment with Uniform Licensure Requirements (ULR) drafted by National Council of State Boards of Nursing.</p> <p>2. Key issues affecting nurse licensure are addressed by the Board as evidenced in meeting minutes, reports, and reflected in statute and regulation</p> <p>3. Continuous assessment of education and licensure issues</p>	<p>1. Conduct line-by-line comparison with ULR; implement appropriate changes.</p> <p>2. a. Generative discussion of issues at every Board meeting to review trends</p> <p>b. Review statutes and regulations for relevance, effectiveness, currency</p> <p>c. Pursue APRN Consensus Model in proposed statute change</p> <p>3. Update regulations to reflect current education and practice issues, i.e. online education programs, competency based education programs.</p>	<p>1. Board, Executive</p> <p>2. Board, Executive</p> <p>2c. D. Valentine N. Sanders L. Sarcone C. Logan</p> <p>3. Board, Executive</p>	<p>1. ULR review – FY 15 – due in October 2014</p> <p>2a. Ongoing</p> <p>2b. Ongoing</p> <p>2c. FY 15</p> <p>3. Ongoing surveillance of issues and update of education regulations</p>
<p>L.4. Licensee-focused processes for licensure:</p> <ul style="list-style-type: none"> • Timely issuance of license • Accessible applications • Transparent process 	<p>1. On-line renewal process for Certified Nurse Aides.</p> <p>2. Certified Registered Nurse Anesthetists renewals online</p> <p>3. Paperless licenses for CNAs</p> <p>4. Online access to status of applications</p>	<p>1. Consider and possibly implement regulation changes that would permit on-line renewals for Certified Nurse Aide</p> <p>2. Implement regulations changes that would permit on-line renewals for CRNAs</p> <p>3. Implement regulation changes that would create a paperless license system for CNAs; implement information outreach to licensees</p> <p>4. Implement online status of applications</p>	<p>1. Executive</p> <p>2. Board, Executive</p> <p>3. Board, Executive</p> <p>4. Board, Executive</p>	<p>1. To be completed by FY 2016 CNA renewals</p> <p>2. Regulation changes to be proposed FY 16</p> <p>3. FY 15</p> <p>4. FY 15 with new data management system.</p>

	5. Online access to name	5. Addresses will not be visible online	5. Board, Executive. Director Chambers	5.FY 15
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PRACTICE GOAL: To determine, communicate and enforce nursing practice and professional standards as established in statute and regulations.

Practice Objectives:

Objective	Performance Measure	Benchmarks	Responsibility Assigned	Timeframe
P.1. Promote the use of appropriate consent agreements in lieu of contested hearings.	<p>1. Review progress of nurses with encumbered licenses at each regularly scheduled quarterly Board meeting using reporting by exception.</p> <p>2. Promote timely review and resolution of all nurses' and nurse aides' cases being investigated and litigated.</p>	<p>1. Monitoring reports reviewed at each meeting</p> <p>2. a. Investigations are closed ASAP.</p> <p>2.b. Request and monitor investigation tracking data from Division of Investigations. Database tracks assignment of investigator to cases</p>	<p>1. Executive, Board</p> <p>2. Executive, Board Investigations</p>	<p>1. Ongoing</p> <p>2. a. Quarterly assessment</p> <p>2.b. Ongoing</p>
P.2. Investigative staff is knowledgeable regarding nursing practice.	<p>1. Ensure adequate investigative staff to expeditiously manage nursing disciplinary cases.</p> <p>2. Investigative staff is informed re: trends in nursing practice.</p> <p>3. Investigative staff is advised regarding the interpretation and general practice of nursing according to the Nurse Practice Act (Statute and Regulations)</p>	<p>1. Dialogue with Division Director to encourage adequate investigative staff</p> <p>2. Encourage Director to require investigator continuing education; employ a nurse investigator. Nurse investigator sent to NCSBN conference.</p> <p>3. Appropriate Consent Agreements presented to the Board</p>	<p>1. Board, Executive</p> <p>2. Executive, Board Chair</p> <p>3. Executive, Investigators</p>	<p>1. Ongoing dialogue with Division Director requesting additional investigators</p> <p>2. Investigations Chief is encouraging education</p> <p>3. Ongoing</p>

<p>P.3. Ensure a safe nursing workforce.</p>	<ol style="list-style-type: none"> 1. Routinely collect and submit Nurse Information System (NURSYS) data in accordance with the contract with the National Council of State Boards of Nursing. 2. Participate in & send TERCAP (Taxonomy of Error Root Cause and Practice-Responsibility) cases to NCSBN 3. Comprehensive data entry into NURSYS 4. RNs, ANPs, LPNs requesting an increase to their scope of practice and institutions offering courses to multiple licensees apply to the Board for approval. 	<ol style="list-style-type: none"> 1.Data continues to be uploaded 2. Investigator collects data on cases fitting the research protocol. Submit data to NCSBN 3. Consider NCSBN grant application for funding 4. Applications for expansion of scope of practice meet statutory definition of licensee's level of licensure 	<ol style="list-style-type: none"> 1.Executive 2.Investigator 3.Executive, Director 4. Board 	<ol style="list-style-type: none"> 1. Ongoing – license data to Nursys updated nightly 2.Ongoing 3. FY 15 4. Annually review written reports. Proposals for increased scope of practice reviewed and approved when presented.
<p>P.4. Ensure consistent, uniform disciplinary actions</p>	<ol style="list-style-type: none"> 1. Continue to utilize and maintain Discipline Historical Database so that Board decisions will be consistent over time, as required by AS 08.01.075(f). 2 Provide information re: discipline to the public 3. Publish discipline fine parameters on website 	<ol style="list-style-type: none"> 1.Review all CAs for consistent discipline 2.Discipline actions posted on the website 3.a. Investigators review and update b. Disciplinary matrix reviewed and adopted 	<ol style="list-style-type: none"> 1.Board 2.Executive 3.Executive, Board 	<ol style="list-style-type: none"> 1. Ongoing database management by Board member 2. Ongoing; names and disciplinary information are updated after each meeting. 3. Review biannually. b. FY 2014/continually review

	4. Investigate alternative to discipline options for drug and alcohol cases	4. Identify pros and cons to: Board sponsored or Nurses' Association sponsored. Continued BON monitored discipline, Other options such as self referral, BON referral, etc.	4. Executive, Board	4. FY 15
P.5. Assure that complaints, investigations and Board actions are executed in a fair, timely manner, assuring public protection while protecting the property rights of licensees.	1. Quarterly review of investigation time frames, priority of cases 2. Respond to employers complaints in timely manner 3. Effectively protect the public	1. Request data at each Board meeting with investigative staff 2. Review CORE data from employers 3. Review CORE data from Licensees	1. Executive Board 2. Executive, Board 3. Executive, Board	1. Ongoing 2. Ongoing, 3. Ongoing, data
P.6. Scope of practice standards are articulated and current, issued by Advisory Opinions per AS 08.68.100(9)	1. Analyze practice standards, respond to questions from the public and licensees, and issue advisory opinions related to practice. 2. Licensees and employers understand scope of practice standards 3. Licensees and employers report timely responses to practice questions from the Board of Nursing. 4. Licensees and employers report knowledgeable Board of Nursing staff. 5. Board of Nursing is responsive to changes in practice.	1. Respond with evidence-based advisory opinions, posted in a timely manner on the Advisory Opinion database on the website. Executive Administrator will bring practice questions to the Board. 2. Make presentation and disseminate updated and timely information regarding issues of importance to nursing practice.	1. Board, Executive 2. Board, Executive 3. Board, Executive 4. Executive 5. Board, Executive	1-5. Ongoing in FY 15

EDUCATION GOAL: To approve, communicate, and enforce standards for the education of nurses and nurse aides for practice at all levels.

Education Objectives:

Objective	Performance Measure	Benchmarks	Responsibility Assigned	Timeframe
E.1. Nursing education programs meet adopted standards and criteria	1. Nursing education programs meet standards for national accreditation and Board review	1. Review annual reports in January from nursing education programs for continued approval, including NP graduate programs.	1. Board	1. Ongoing, annually in January
	2. Certified Nurse Aide education programs meet national standards	2. Appropriate review of Certified Nurse Aide programs	2. Program contractor/Exec. Admin./ Board	2. Ongoing as program reviews and reports are completed by contractor/Exec Regulations updated to comply with Federal regulations FY 2015
	3. Ongoing board updates on Doctorate of Nursing Practice proposal	3. Yearly update on DNP program development	3. Board	3. Annually, by UAA
	4. Board decisions related to approval of new or continuing nursing education programs are based on application of defined criteria	4. Board monitors new programs.	4. Board	4. Ongoing; Education program regulations Reviewed annually and FY 15
	5. Refresher courses will meet board established criteria	5. No refresher course is accepted without prior approval from the board	5. Board	5. Refresher courses reviewed for approval when submitted

<p>E.2. Education programs prepare graduates for safe practice at the entry level</p>	<p>1. Graduates of approved nursing programs demonstrate beginning-level competence as evidenced by NCLEX pass rates and advanced practice national certification.</p> <p>2. Graduates of approved Certified Nurse Aide programs demonstrate beginning-level competence as evidenced by the National Nurse Aide Assessment Program (NNAAP) pass rates.</p>	<p>1. Enforce pass rate standards for first-time test takers (12 AAC 44.055); Pass rates are evaluated on an annual basis in January; Education programs are informed if standards are not being met.</p> <p>2. Enforce pass rate standards for first-time test takers (12 AAC 44.858); Education programs are informed if standards are not being met.</p>	<p>1. Executive, Board</p> <p>2. Executive, Board</p>	<p>1. Annual pass rates are reviewed annually in January. Ongoing in FY 15 Enforcement – letters of concern sent per regulations. Plans for improvement submitted by programs.</p> <p>2. Annual pass rates reviewed annually in January. Enforcement – letters of concern or warning sent per regulations. Plans for improvement submitted by programs & approved by Board.</p>
<p>E.3. Standards for nursing education allow for responsiveness to changes in the practice environment</p>	<p>1. Key issues, such as simulation and distance education, are addressed by the Board as evidenced in meeting minutes, reports and as reflected in statute and regulations</p> <p>2. Regulations are updated to reflect standards for educational programs that meet the mission of the Board.</p>	<p>1.a. Search of literature, attend education consultant calls</p> <p>b. NCSBN completing research study focused on effectiveness of simulation in nursing education programs</p> <p>c. Attend NCSBN offerings related to topics</p> <p>2. Board revises regulations to meet mission. Public comments considered.</p>	<p>1.Board, Executive</p> <p>2.Board, Executive</p>	<p>1. Ongoing FY 15</p> <p>2. regulation projects on going in FY 2015</p>

	3. Review proposals by individuals or non-educational institutions for expanding nurses' scope of practice	3. Institute annual review	3. Board, Executive	3 Ongoing – FY 15 Annual reports in January as part of approval
E.4. Participate in development of a long-range plan for nursing education and workforce needs	1. Analyze competencies & workforce needs 2. Collaborate with employers and education programs	1. Survey data review collected from licensing renewals 2. a. Distribute survey data results to employers and education programs b. Attend workforce meetings to inform Board about issues	1. Board, Executive 2. Executive, Board 2.b. Executive, Board chair	1. Ongoing with renewals. 2 a. When analysis complete 2.b. Attend ASHNA workforce forums 2.c. Attend forums by the AK Health Workforce Coalition.

GOVERNANCE GOAL: To assure the governance framework and culture supports the accomplishment of the Board's Mission, Vision and Goals.

Governance Objectives

Objective	Performance Measure	Benchmarks	Responsibility Assigned	Timeframe
G.1. Board performance is consistent with the Board's adopted model of policy governance	1. Board meeting evaluation indicates effective communication and work. 2. Board self-assessment indicates that the Board incorporates principles of policy governance in accomplishment of Mission and Goals	1. Meeting evaluation done orally and written after each Board meeting 2. Annual board self-assessment at last meeting of the fiscal year	1. Board Chair 2. Board Chair	1. After each board meeting 2. Spring each year

	<ul style="list-style-type: none"> 3. Executive Administrator assessment reflects effective Board governance 4. Board members conduct themselves in an ethical manner 	<ul style="list-style-type: none"> 3. Annual Executive Administrator assessment at last meeting of the fiscal year 4. Ethics reporting complies with AS 39.52; annual ethics education is completed 	<ul style="list-style-type: none"> 3. Board Chair 4. Board Chair 	<ul style="list-style-type: none"> 3. Spring each year 4. Each board meeting
G.2. Board performance is consistent with the Vision, Mission, Values and Goals	<ul style="list-style-type: none"> 1. Strategic Plan is formulated and kept up-to-date 2. Board assessment indicates accomplishment of Mission, progress toward Vision, adherence to values and use of strategic thinking 3. Board decisions, when challenged, are upheld 	<ul style="list-style-type: none"> 1. Maintain Strategic Plan; revise yearly 2. Annual report to the Legislature reflects progress towards these markers 3. ALJ and Court cases uphold Board decisions 	<ul style="list-style-type: none"> 1. Board Chair, Executive 2. Board Chair/Executive 3. Board 	<ul style="list-style-type: none"> 1. Annually at spring meeting 2. Ongoing, completed by June 30th each year 3. Ongoing FY 15
G.3. Competent Board members	<ul style="list-style-type: none"> 1. Annual Board self-assessment indicates Board and Board member competence 2. Leadership training is ongoing 3. Board training is implemented as expected part of board service 4. Succession planning is implemented, as needed 5. Newly appointed Board members are oriented to the role and expectations. 	<ul style="list-style-type: none"> 1. Annual self-assessment 2. Plan annual board retreat for training 3. Ongoing board member training at each meeting 4. Vice Chair position will be included with Chair and Secretary 5. Orientation prior to the first Board meeting after appointment 	<ul style="list-style-type: none"> 1. Board chair 2. Board chair, Executive 3. Board chair 4. Board chair 5. Executive, Board Chair 	<ul style="list-style-type: none"> 1. Spring meeting 2. Ongoing 3. Ongoing 4. Ongoing 5. Ongoing

<p>G.4. Collaboration with stakeholders both in and outside of nursing</p>	<p>1. Board collaborates with stakeholders</p> <p>2. Board collaborate with licensees</p> <p>3. Board collaborates with employers</p>	<p>1. Attendance at nursing organization meetings: ANPA, APRN Alliance, Alaska Nursing Action Coalition</p> <p>2. Public testimony held with each Board meeting; advisory groups are convened on specific topics with licensee members</p> <p>3. Communicates re: workforce issues with stakeholders: ASHNHA, Workforce Coalition</p>	<p>1. Executive, Board</p> <p>2. Executive, Board</p> <p>3. Executive, Board</p>	<p>1. Ongoing FY 14</p> <p>2. Ongoing FY 15</p> <p>3. Ongoing; FY 15</p>
<p>G.5. Board responsiveness to state and national healthcare policy decisions</p>	<p>1. Active Board involvement in a variety of healthcare policy arenas</p> <p>2. Active Board participation in National Council of State Boards of Nursing</p>	<p>1. Board is informed on current issues, included in each Board meeting</p> <p>2.a. Implement innovation in regulation in conjunction with other states e.g. ULR compliance, APRN Model Act/Rules compliance</p> <p>2.b. Board members and Executive participate in appropriate committees and teleconferences with NCSBN</p>	<p>1. Board Chair, Executive</p> <p>2. Board Chair, Executive</p>	<p>1. Ongoing – Reports of NCSBN conferences and teleconference at every Board meeting</p> <p>2.a. Ongoing FY 15</p> <p>2.b. Ongoing Valentine – APRN; Farnstrom – policy; Hendrix – education; Executive - all</p>

INFORMATION EXCHANGE GOAL: To facilitate information exchange between the Board and its colleagues, constituent groups, the public, and other agencies in order to fulfill the Board’s Mission, Vision and Goals.

Information Exchange Objectives:

Objective	Performance Measure	Benchmarks	Responsibility Assigned	Timeframe
<p>I.1. Public awareness of Board Mission and role</p>	<p>1. Mission and role of the Board are presented to a diverse audience in a variety of formats</p>	<p>a. Website updated</p> <p>b. Listserve used regularly</p> <p>c. Executive or Board Chair speaks to public and licensees</p>	<p>1. Board, Executive</p>	<p>1. Ongoing</p>

	2. Licensees' understand the difference between the Board of Nursing and nurse professional organizations	d. Mission posted at every Board meeting 2. a. CORE data b. discussed with graduating nursing students	2. Board, Executive	2. Ongoing
I.2. Effective communication with the public, including licensees, employers, policy makers and consumers	1. Consider feedback related to communication with the Board when received: a. Inquiries to Board office b. Presentations by Board staff c. Website 2. Listserve used effectively 3. Quarterly articles in the Alaska Nurse & Alaska Nursing Today 4. Licensees and Employers understand obligation of reporting suspected violation of Nurse Practice Act	1. a. Inquiry to board office b. Presentation by Board staff c. Website 2. Listserve subscribers increased a. alerts posted regularly b. proposed regulation changes sent out on Listserve, as well as to individuals requesting a copy 3. Articles submitted by Executive &/or Board Chair 4a. Add statute requiring facility reporting to Board of Nursing 4b. Discuss during presentations to stakeholder groups	1. Board, Executive 2. Executive, Board Chair 3. Executive, Board Chair 4. Board	1. FY 14 - ongoing 2. Ongoing FY 14 a. announcement of each Board meeting b. as appropriate 3. Ongoing 4. a. statute change FY 14 4.b. FY 15

I.3. Accurate, comprehensive, accessible nurse licensure data	1. Information necessary for licensure verification and reporting in a timely manner 2. Nursing workforce research on website	1.a. primary verification licensure data on website 1.b. Move to online license verification – NURSYS utilized 2.a. Post 2012 & 14 RN renewal data to website 2.b. Post 2012 & 14 PN renewal data to website	1. Board, Executive 2. a, Executive 2.b. Executive	1.a. ongoing 1.b. ongoing FY15 2. When analysis available
I.4. Information provided to appropriate state and national entities for purposes of public protection	1. Required information is accurately and timely reported to NURSYS, and through NURSYS to NPDB	1. Accurate and timely data uploads – nightly 2. Disciplinary cases posted on NURSYS	1. Executive	1. Ongoing 2. After each board meeting
I.5. Collaborate with other healthcare stakeholders	1. Available to attend ASHNA, & AARP to discuss shared concerns	1. Board participates at least once per year in Alaska Workforce Coalition, ASHNA and through the Alaska Nursing Action Coalition with AARP	1. Executive, Board Chair	1. Ongoing FY 15

ORGANIZATIONAL GOAL: To assure the organizational infrastructure supports the Mission, Vision and Goals.

Organizational Objectives:

Objective	Performance Measure	Benchmarks	Responsibility Assigned	Timeframe
O.1. Adequate Board resources to meet expenses, hire qualified staff and update technology	1. The board functions as self-supporting entity, with fair licensure fees	1. a. Monitor budget reports b. Participate in licensure fee review c. Suggest additional board infrastructure items d. Additional funding for Certified Nurse Aide education program reviewer contract, due to extensive site visit needs. Update state regulations to comply with Federal regulations.	1. Board, Executive, Administrator	1.a. Ongoing b. prior to renewal c. Ongoing; Meet with Director every Board meeting. d. Ongoing In FY 15- Discussed with Director at each Board meeting.

	2. Board meetings are paperless	2. a. Meet in locations with wireless internet, Board members utilize secure website b. Use of overhead projector at meetings to accomplish agenda work	2. Executive, Board Chair	2. a. Ongoing FY15 request (infrastructure) b. Ongoing;
O.2. Staff activities facilitate the Board's accomplishment of Mission and strategic goals	1. Positive annual Board self-assessment related to support by staff	1. Meeting materials provided to Board 2 weeks prior to meetings 2. All needed materials for Board decisions are available affirmed by board meeting evaluation	1. Executive 2. Executive	1. Ongoing FY 15 2. Ongoing FY 15
O.3. Expectations of the public, licensees, Legislature and Governor about the Board are adequately met	1. Positive feedback from public and licensees 2. Legislature extends Board of Nursing sunset review – Board approved until 2019	1. Public and licensees participate in public comment and forums 2. Sunset review is positive and authorization of the board is at least 8 years	1. Board, Executive 2. Board, Executive	1. Ongoing 2. Ongoing FY 15
O.4. Competent staff	1. Executive Administrator meets annual performance expectations for key job responsibilities, customer service and office function	1. Annual review of Executive Administrator, after board self-evaluation	1. Board	1. Annually in Spring
O.5. Office of the Board of Nursing supports the day-to-day operation of the organization	1. The office of the Board of Nursing, including physical location, space and furnishings, equipment and staff, support the day-to-day operation of the Board.	1. Continue to monitor office location and accommodations, and financial asset concerns for the best operation and public access.	1. Board, Executive, Director	1. Ongoing FY 15 Discussed with Director when appropriate at Board meeting.

	2. Privacy of conversations is maintained due to sensitive nature of topics and potential for HIPPA violations.	2. Executive Administrator will maintain an office with a door	2. Board	2. Discussion with Director
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List the board's **FY15 goals and objectives**. Include any strengths, weaknesses, opportunities, and threats, as well as any resources needed:

The goals and objectives remain essentially the same for FY 15. The Board of Nursing members have reviewed the updated the strategic plan and have approved it. Please note in the right hand column of the above document the new FY date.

- **LICENSURE/CERTIFICATION GOAL:** To license or certify qualified persons for the practice of nursing.
- **PRACTICE GOAL:** To determine, communicate and enforce nursing practice and professional standards as established in statute and regulations.
- **EDUCATION GOAL:** To approve, communicate, and enforce standards for the education of nurses and nurse aides for practice at all levels.
- **GOVERNANCE GOAL:** To assure the governance framework and culture supports the accomplishment of the Board's Mission, Vision and Goals.
- **INFORMATION EXCHANGE GOAL:** To facilitate information exchange between the Board and its colleagues, constituent groups, the public, and other agencies in order to fulfill the Board's mission, vision and goals.
- **ORGANIZATIONAL GOAL:** To assure the organizational infrastructure supports the mission, vision and goals.

ALASKA STATE BOARD OF NURSING

FY 2014 ANNUAL REPORT

SUNSET AUDIT RECOMMENDATIONS

Date of last Legislative Audit: September 30, 2010

Board sunset date: June 30, 2019

Audit Recommendation #1: BON should take steps to ensure all appropriate entities are notified when an ANP's authority to write prescriptions has been revoked or suspended.

Action taken:

When an ANP's authority to write prescriptions has been revoked or suspended by the BON, the Executive Administrator will:

- notify the DEA on the first work day after the BON meeting concludes.
- submit the ANP's name to the Board of Pharmacy on the first day after the BON meeting concludes. The Board of Pharmacy will be responsible for notifying the pharmacies.
- notify the employer (if appropriate) of an ANP on the first work day after the BON meeting concludes
- update the Disciplinary Data base found on the BON website within two weeks after the BON meeting has concluded.

Next Steps:

There has been no instance where an ANP's (or CRNA's) prescriptive authority has been revoked or suspended since the approval of the Legislative Audit. The licensing examiners are aware of the procedure to notify the DEA and Board of Pharmacy and are ready to comply.

Date completed:

April 2011

Audit Recommendation #2: The BON Chairperson should take steps to ensure that the required Nurse Aide training program reviews are being conducted.

Action taken:

This issue has been addressed with Directors Urion, Davis, Smith, Habeger, and Chambers, the five(5) CBPL Directors since March 2007. As found in the Sunset Audit, the position of Nurse Consultant 1 was vacant since 2002. The Board has recommended the full time position be filled but with a competitive salary to ensure an experienced qualified nurse candidate.

Beth Farnstrom, BON Chair, has been a dedicated advocate for the reinstatement of the Nurse Aide Nurse Consultant to administer the Nurse Aide Registry. The Board of Nursing continues to feel that the position is essential to fulfill the federal requirements for nurse aide programs and the RSA from the Department of Health and Social Services. Because there is no full time position, a RFP was executed and a contract employee, Cathy Winfree, RN, was selected to perform the Nurse Aide Program evaluations required in regulation. Ms. Winfree is unable to evaluate the programs of the University of Alaska which leaves those Nurse Aide programs for the Executive Administrator to evaluate.

Next Steps:

Continue to pursue the possibility of reclassifying a PCN to allow recruitment of a RN to fill the position.

Date completed:

On-going, although the use of a contract nurse to complete Nurse Aide Programs has been successful. Currently, there is a call for a Letter of Intent to bid on a RFP.

Audit Recommendation #3: The Division of Corporations, Business and Professional Licensing’s Chief Investigator should take steps to ensure timely investigation of complaints and cases.

Action taken:

The Chief Investigator is responsible for this recommendation. The number of cases from the Board of Nursing has not slowed as the BON continues to license or certify more and more applicants. There was also an influx of cases after the renewal cycles for LPNs and RNs in 2012. During FY 15, the same will probably be true.

The Board of Nursing has as an objective that all complaints regarding licensee’s practice are investigated in a timely manner. Several investigators are assigned to the BON to work on the backlog of complaints and cases.

- The average length of time most cases are open is 3 months to one year if they do not involve the following: litigation, the attorney general being involved, and expert review. Of course, more complex cases involving legal counsel and such do not fit these time frames.
- Cases are prioritized. The system is a 1-4 system with 1 being the highest priority which would be cases of great potential for public harm and 4 being cases with low potential such as falsified applications.

Next Steps:

Prioritize cases where there is the possibility of patient harm. Continue to make the BON cases a priority by assigning available resources to the complaints and cases

Date completed:

On-going

Audit Recommendation #4: The Director of Boards and Commissions, Office of the Governor, should fill the LPN position with an LPN currently involved in institutional nursing services.

Action taken:

Recruiting and retaining an LPN member of the Board of Nursing has been an on-going challenge. There were two (3) LPNs appointed to the Board who, for a variety of reasons, resigned immediately or within a few meetings of appointment. The Board of Nursing currently has an LPN member who has been very active in her role and the meetings. The LPN position on the Board of Nursing was again vacant because the LPN licensed as an RN. A new appointment of a LPN was made in January 2014. She has attended one meeting.

Next Steps:

The statute was changed to remove the requirement for the LPN member to be involved in “institutional nursing services”.

Date completed:

January 2014.

FISCAL YEAR 20____ STATISTICAL OVERVIEW

Program: _____

AS 08. _____

12 AAC _____

Name of Individual Completing Report: _____

Date: _____

FY14 LICENSEES	NEW-ISSUED FY 20____	TOTAL AS OF 6/30/____

A. Current Active Licenses, Endorsements, Permits

List type and if issued by examination or credential, as applicable.

LICENSE TYPE & PROGRAM CODE	Lic. Type Code	Status Code	NEW-ISSUED FY 20____	TOTAL AS OF 6/30/____	LICENSURE BASIS
Example: Civil Engineer - AEL	C	AA	10	250	Exam: 6 Credentials: 4
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.					
12.					
13.					
TOTAL					

B. Temporary Licenses

LICENSE TYPE & PROGRAM CODE	Lic. Type Code	Status Code	NEW-ISSUED FY 20____	TOTAL AS OF 6/30/____	NOTES
Example: Physical Therapist - PHY	R	AA	4	24	
1.					
2.					
3.					
4.					
TOTAL					

C. Current Licenses Issued as Inactive (not lapsed licenses)
 (Only Medical, Chiropractic, CPA, and Real Estate)

LICENSE TYPE & PROGRAM CODE	Lic. Type Code	Status Code	TOTAL AS OF 6/30/____
Example: Salesperson - REC	S	II	64
1.			
2.			
3.			
4.			
TOTAL			

D. Retired Licenses

CATEGORY & PROGRAM CODE	Lic. Type Code	Status Code	RETIRED DURING FY 20____	TOTAL AS OF 6/30/____	NOTES
Example: Osteopath - MED	O	RR	1	8	
1.					
2.					
3.					
TOTAL					

E. Examination Detail

(List each examination administration separately. Write "See Attached" and attach a separate sheet if necessary.)

EXAM TYPE	LOCATION	DATE	CANDIDATES	NO. PASSED	NO. FAILED
Number of Postponed Exams					
Number of Exam Reviews					

F. Miscellaneous Program Activity

List all instances of fee-related work performed under Centralized Regulations per 12 AAC 02.105 (tracked by each program's fee ticker)

DESCRIPTION	TOTAL
Example: License Verification	62

G. Miscellaneous Program Activity

List all instances of fee-related work performed under the licensing program's regulations that is not included above

DECSRIPTION	TOTAL
Example: Course Approval	16

H. Board Meetings and Teleconferences

DATE	LOCATION (<i>indicate if teleconference</i>)

FISCAL YEAR 20____ STATISTICAL OVERVIEW

Program: _____

AS 08. _____

12 AAC _____

Name of Individual Completing Report: _____

Date: _____

FY14 LICENSEES	NEW-ISSUED FY 20____	TOTAL AS OF 6/30/____

A. Current Active Licenses, Endorsements, Permits

List type and if issued by examination or credential, as applicable.

LICENSE TYPE & PROGRAM CODE	Lic. Type Code	Status Code	NEW-ISSUED FY 20____	TOTAL AS OF 6/30/____	LICENSURE BASIS
Example: Civil Engineer - AEL	C	AA	10	250	Exam: 6 Credentials: 4
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
11.					
12.					
13.					
TOTAL					

B. Temporary Licenses

LICENSE TYPE & PROGRAM CODE	Lic. Type Code	Status Code	NEW-ISSUED FY 20____	TOTAL AS OF 6/30/____	NOTES
Example: Physical Therapist - PHY	R	AA	4	24	
1.					
2.					
3.					
4.					
TOTAL					

C. Current Licenses Issued as Inactive (not lapsed licenses)
 (Only Medical, Chiropractic, CPA, and Real Estate)

LICENSE TYPE & PROGRAM CODE	Lic. Type Code	Status Code	TOTAL AS OF 6/30/____
Example: Salesperson - REC	S	II	64
1.			
2.			
3.			
4.			
TOTAL			

D. Retired Licenses

CATEGORY & PROGRAM CODE	Lic. Type Code	Status Code	RETIRED DURING FY 20____	TOTAL AS OF 6/30/____	NOTES
Example: Osteopath - MED	O	RR	1	8	
1.					
2.					
3.					
TOTAL					

E. Examination Detail

(List each examination administration separately. Write "See Attached" and attach a separate sheet if necessary.)

EXAM TYPE	LOCATION	DATE	CANDIDATES	NO. PASSED	NO. FAILED
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G. Miscellaneous Program Activity

List all instances of fee-related work performed under the licensing program's regulations that is not included above

DECSRIPTION	TOTAL
Example: Course Approval	16

H. Board Meetings and Teleconferences

DATE	LOCATION (<i>indicate if teleconference</i>)

Anchorage

Year-End Report July 2013 – June 2014

DATE	CANDIDATES	PASS	FAIL
07/13/2013	39	27	9 skills only, 2 written only, 1 both
7/20/13	13	7	5 skills only, 1 both
8/24/13	39	28	7 skills only, 2 written only, 2 both
9/21/13	33	16	17 14 skills, 4 written
10/19/13	19	12	7 5 skills, 2 both
11/16/13	30	23	7 all skills only
12/7/13	23	16	7 6 skills, 1 both
1/25/14	34	24	10 4 skills, 2 written, 4 both
2/15/14	26	14	12 9 skills, 4 written, 1 both
3/22/14	37	26	6 skills, 4 written, 1 both
4/19/14	24	19	5 4 skills, 1 both
5/24/14	22	18	4 3 skills, 1 both
6/21/14	25	19	6 4 skills, 1 written, 1 both
TOTAL:	364	249	102

Bethel

Year-End Report July 2013 – June 2014

DATE	CANDIDATES	PASS	FAIL
10/25/13	4	3	1 written only; skills to be re-administered
11/29/13	2	2	Skills only from above – 0 fail
3/8/14	5	3	1 Skills, 1 Both
5/19/14	9	7	2 skills
TOTAL:	18	13	

Cordova

Year-End Report July 2013 – June 2014

DATE	CANDIDATES	PASS	FAIL
5/31/14	6	5	1 skills
TOTAL:	6	5	1

Fairbanks

Year-End Report July 2013 – June 2014

DATE	CANDIDATES	PASS	FAIL
7/11/13	17	17	0
8/5/13	6	3	3 – All Skills
9/17/13	2	2	0
10/25/13	12	10	2 – All Skills
11/12/13	11	10	1 - skills
12/9/13	20	20	0
12/16/13	15	14	1 FAILED SKILLS
12/19/13	3	2	1 FAILED SKILLS
1/27/14	3	3	0
2/21/14	5	4	1 Failed Skills
3/10/14	18	17	1 Failed Skills
4/25/14	7	5	2 failed skills
4/28/14	12	10	1 written, 1 skills
5/6/14	10	10	0
5/22/14	16	10	6 skills
5/23/14	14	11	3 skills
6/17/14	8	6	2 skills
Total	179	154	25

Homer-KBCC

Year-End Report July 2013 – June 2014

DATE	CANDIDATES	PASS	FAIL
1/7/14	7	3	4 – all skills
1/31/14	5	5	0
5/5/14	9	9	0
TOTAL:	21	17	4

Juneau

Year-End Report July 2013 – June 2014

DATE	CANDIDATES	PASS	FAIL
8/19/13	10	10	0
12/20/13	5	5	0
5/20/14	15	14	1 written
TOTAL:	30	29	1

Ketchikan

Year-End Report July 2013 – June 2014

DATE	CANDIDATES	PASS	FAIL
9/23/13	10	7	2 skills, 1 written
11/26/13	7	4	3 written
4/18/14	10	10	0
TOTAL:	27	21	6

Kodiak

Year-End Report July 2013 – June 2014

DATE	CANDIDATES	PASS	FAIL
5/20/14	10	10	0
TOTAL	10	10	0

Kotzebue

Year-End Report July 2013 – June 2014

DATE	CANDIDATES	PASS	FAIL
7/16/13	5	4	1 skills
2/4/14	3	3	0
4/28/14	1	1	0
6/12/14	3	3	0
TOTAL:	12	11	1

Nome

Year-End Report July 2013 – June 2014

DATE	CANDIDATES	PASS	FAIL
6/13/14	6	5	1 skills
TOTAL	6	5	1

Sitka

Year-End Report July 2013 – June 2014

DATE	CANDIDATES	PASS	FAIL
7/20/13	3	3	0
12/21/13	7	6	1 - skills
4/30/14	13	10	3 all skills
TOTAL:	23	19	4

Soldotna

Year-End Report July 2013 – June 2014

DATE	CANDIDATES	PASS	FAIL
8/31/13	11	11	0
10/25/13	3	3	0
12/14/13	3	3	0
1/8/14	6	4	2 both skills
2/20/14	16	8	7 failed skills, 1 failed written
3/18/14	8	7	1 failed both
5/20/14	10	9	1 failed skills
6/23/14	10	9	1 failed skills
TOTAL	67	54	13

Wrangell

Year-End Report July 2013 – June 2014

DATE	CANDIDATES	PASS	FAIL
9/30/13	4	2	1 skills, 1 both
11/7/13	4	2	1 skills, 1 written
1/28/14	2	2	0
TOTAL:	10	6	4

**NURSING EDUCATION PROGRAMS IN ALASKA
FY 2014**

MASTER'S DEGREE PROGRAM (MS)

University of Alaska Anchorage School of Nursing
3221 Providence Drive
Anchorage, AK 99508
Telephone: (907) 786-4550
Director: Barb Berner, EdD, RN
Continuously approved by Alaska Board of Nursing since 1981

BACCALAUREATE DEGREE PROGRAM (BS)

University of Alaska Anchorage School of Nursing
3221 Providence Drive
Anchorage, AK 99508
Telephone: (907) 786-4550
Director: Barb Berner, EdD, RN
Established: 1968 at Alaska Methodist University
Continuously approved by Alaska Board of Nursing since 1973

ASSOCIATE OF APPLIED SCIENCE PROGRAMS (AAS)

University of Alaska Anchorage School of Nursing
3221 Providence Drive
Anchorage, AK 99508
Telephone: (907) 786-4550
Director: Barb Berner, EdD, RN
Established: 1970
Continuously approved by Alaska Board of Nursing since 1973

Alaska Vocational Technical Center (AVTEC)
1251 Muldoon Road
Anchorage, AK 99508
Telephone: (907) 334-2231
Department Head: Alexis Klapproth, MS, RN
Provisionally approved by Alaska Board of Nursing in January 2012.

Charter College
2221 E. Northern Lights Blvd, Suite 120
Anchorage, AK 99508
Telephone: (907) 277-1000
Director of Nursing: Jennifer Lemert, MS, RN
Provisionally approved by Alaska Board of Nursing in January 2012. Beginning to offer program in August 2013.

Alaska Career College
1415 E. Tudor Road
Anchorage, AK 99507-1033
Telephone: (907) 563-7575
Director of Nursing:
Provisionally approved by Alaska Board of Nursing in April 2011 – will need to reapply to being offering their program.

PRACTICAL NURSING PROGRAM

Alaska Vocational Technical Center (AVTEC)

1251 Muldoon Road

Anchorage, AK 99508

Telephone: (907) 334-2231

Department Head: Alexis Klapproth, MS, RN

Established: Continuously approved by Alaska Board of Nursing since 2002.

State of Alaska Nurse Aide Training Programs

About the Training Programs:

The following is the most current list of State of Alaska approved Nurse Aide training programs. For specific information about the programs, locations, availability, dates, times and fees, please contact the program representatives directly.

Alaska Job Corps

17 ½-24 year olds

Corinne Gaither

gaither.corrinne@jobcorps.org

Becky Oviatt

oviatt.becky@jobcorps.org

800 E. Lynn Martin Dr.

Palmer, AK 99654

Phone: (907) 861-8779

Fax: (907) 831-8782

Alaska Technical Center

Cindy Lincoln

clincoln@nwarctic.org

PO Box 51

Kotzebue, AK 99752

Phone: (907) 442-3733 X32

Fax: (907) 442-2764

AVTEC Alaska Institute of Technology

Lisa Wilke

wilke.lisa@alaska.gov

Kathi Honeycutt

kathi.honeycutt@avtec.edu

1251 Muldoon Rd. #103

Anchorage, AK 99508

Phone: (907) 334-2230 or 334 -2231

Fax: (907) 334-2237

Anchorage School District

2 LOCATIONS, HIGH SCHOOL STUDENTS ONLY

Emelyn Hudson

hudson_emelyn@asdk12.org

c/o Laura Murray

murray_laura@asdk12.org

King Career Center

2650 E. Northern Lights Blvd.

Anchorage, AK 99508

Phone: (907) 742-4136 or 742-8901

Fax: (907) 742-8907

Emelyn Hudson

hudson_emelyn@asdk12.org

c/o Panna Jarussi

jarussi_panna@asdk12.org

Service High School

5577 Abbott Rd.

Anchorage, AK 99507

Phone: (907) 742-8101

Fax: (907) 742-6599

Bethel CNA Program

Patricia Moulton

patricia_moulton@ykhc.org

PO Box 869

Bethel, AK 99559

Phone: (907) 543-6000

Caregiver Training Academy

Cheryl Milline

ctaanchorage@alaska.net

203 West 15th Ave. #104

Anchorage, AK 99501

Phone: (907) 258-0535

Fairbanks North Star Borough School District

HIGH SCHOOL STUDENTS ONLY

Cathleen Winfree

cmwinfree@alaska.edu

604 Barnette St., Rm. 401

Fairbanks, AK 99701

Phone: (907) 455-2876

Heritage Place

Ruth Ann Truesdell

rtruesdell@cpgh.org

232 Rockwell

Soldotna, AK 99669

Phone: (907) 252-7337

Fax: (907) 714-5000

Kenai Peninsula College/Kenai Peninsula Borough School District

Val Wedler

valwedler@hotmail.com

Velinda Albrecht-East RNC

Kenai UAA

nursep5008@att.net

156 College Road

Soldotna, AK 99669

Phone: (907) 260-4496

Kodiak College

Megan Kouremetis

meganalice02@gmail.com

117 Benny Benson Dr.

Kodiak, AK 99615

Phone: (907) 486-1266

Fax: (907) 486-9061

State of Alaska Nurse Aide Training Programs

About the Training Programs:

The following is the most current list of State of Alaska approved Nurse Aide training programs. For specific information about the programs, locations, availability, dates, times and fees, please contact the program representatives directly.

Mat-Su Career & Tech High School ***HIGH SCHOOL STUDENTS ONLY***

Shawnie Glenn
shawn.glenn@matsuk12.us
2472 Seward Meridian
Wasilla, AK 99654
Phone: (907) 352-0426
Fax: (907) 352-0480

Petersburg General Hospital

Nichole Mattingly
nicholemattingly@yahoo.com
PO Box 589
Petersburg, AK 99833
Phone: (907) 772-4291
Fax: (907) 235-0377

PWSCC-Valdez

Sally Byrne Flores
Sally.byrneflores@providence.org
PO Box 97
Valdez, AK 99686
Phone: (907) 835-8774

Providence Extended Care ***Not currently accepting new students***

Belle Cunningham
belle.cunningham@providence.org
920 Compassion Circle
Anchorage, AK 99504
Phone: (907) 212-0268
Fax: (907) 762-0263

PWSCC-Cordova

Heather Gora
hgora@cdvcmc.com
PO Box 160
Cordova, AK 99574
Phone: (907) 424-8246 or 424-7598
Fax: (907) 424-8398

Kachemak Bay Community College

Lee Owens
533 E. Pioneer Ave.
Homer, AK 99603
Phone: (907) 235-7743
Fax: (907) 235-0377
Bsylee2005@yahoo.com

UAF Community Technical College

Cathleen Winfree
cmwinfree@alaska.edu
604 Barnette St., Rm. 401
Fairbanks, AK 99701
Phone: (907) 456-2876
Fax: (907) 455-2865

UAF/Norton Sound Health Corporation

Cathleen Winfree
cmwinfree@alaska.edu
1100 Greg Kruschek Ave.
Nome, AK 99762
455-2876
455-2865

UAS Juneau

Suzanne Malter
Phone: (907) 796-6131
Fax: (907) 796-6577
smalter@uas.alaska.net

Christine Urata
Phone: (907) 796-6125
Fax: (907) 796-6577
cjurata@uas.alaska.edu

11120 Glacier Hwy
Juneau, AK 99801

UAS Ketchikan

Melissa Withers
mwither@bellsouth.net
2600 7th Avenue
Ketchikan, AK 99901
P: 225-19633624

UAS Sitka

Rebecca Austin
raustin10@uas.alaska.edu
1332 Seward Ave.
Sitka, AK 99835
Phone: (907) 747-9476
Fax: (907) 747-1755

Wrangell Medical Center

Rosa Linda Mergenthal
Relm865@hotmail.com
PO Box 1081
Wrangell, AK 99929
Phone: (907) 874-7000