

Licensure							
Consequences of Not Funding this Program							
Public protection would be jeopardized if there were not licensure qualifications that all applicants must meet before a license was issued. The Board of Nursing checks applications to determine if the licensure qualifications have been met. Licensure is one component that helps establish competency of the nurse and mental health technician.							
<u>Statutory Basis</u>	<u>Mandatory vs. Discretionary</u>	<u>MOE/Match Rgt.</u>	<u>Priority Level</u>				
Specific	K.S.A 65-1115, 65-1116, 65-1130, 65-1152, 65-4203	Mandatory	No	1			
Program Goals							
A. Provide licenses and license renewals to eligible practical nurses, registered nurses, advanced practice registered nurses, registered nurse anesthetists, and mental health technicians.							
B. Issue a license to practice or authorization to practice within 3 business days after receipt of all required information 95% of the time.							
C. Enter information into the licensing software with 95% accuracy.							
Program History							
Licensure is required for all nurses (LPN, RN, APRN) and licensed mental health technicians to practice in Kansas. Authorization to practice is required for registered nurse anesthetists to practice in Kansas. The licensure of professional nurses (RNs) is required by K.S.A. 65-1115 (authorized in 1949). The licensure of practical nurses (LPNs) is required by K.S.A. 65-1116 (authorized in 1949). The licensure of advanced practice registered nurses is required by K.S.A. 65-1130 (authorized in 1983). The authorization for practice as a registered nurse anesthetist is required by K.S.A. 65-1152 (authorized in 1986). The authorization for licensure of mental health technicians is K.S.A.65- 4203 (authorized in 1973). This licensure program has always been with the Board of Nursing. Two major legislative changes have impacted the licensure program, the requirement of fingerprints for a criminal background report before licensure and the implementation of the Nurse Licensure Compact (NLC). K.S.A. 74-1112 authorizes the Board of Nursing to require an applicant to be fingerprinted and submit to a state and national criminal history record check before being licensed to practice in Kansas. This was authorized in 2008. We performed the fingerprints in our agency until March 2020 at which time we stopped because of the COVID-19 pandemic as we were unable to social distance and obtain fingerprints. Since that time, the equipment outdated and would require the purchase of new, costly equipment. The applicants can obtain fingerprints at the KBI or most law enforcement agencies and then submit the fingerprints to us. This change also assisted to increase the efficiency of our licensing division in processing applications and responding to applicants. The Board of Nursing receives the fingerprint cards and waives the applicants submit, processes them, and sends them to the KBI. We receive the criminal background report that is generated by the KBI and we process that report. The other major change for licensing was the implementation of the NLC on July 1, 2019. This change allowed LPN and RN applicants the option of another license type, a multistate license. This multistate license would allow the LPN or RN to work on this multistate license in another other jurisdiction that is part of the NLC (presently 37 other states and one U.S. territory). This change was authorized in 2018 and implemented on July 1, 2019. This multistate license increases the mobility of the nurses with a multistate license. This license has proven to be very beneficial during the pandemic.							
Performance Measures							
<i>Outcome Measures</i>	<i>Goal</i>	<i>FY 2019</i>	<i>FY 2020</i>	<i>FY 2021</i>	<i>3- yr. Avg.</i>	<i>FY 2022</i>	<i>FY 2023</i>
1. Outcome Measure #1 Percentage of renewal licensure applications processed within 3 business days after receipt of required information	B	97%	98.80%	100%	98.60%	98%	98%
2. Outcome measure #2 Percentage of initial through examination licensure applications processed within 3 business days after receipt of required information	B	100%	100%	99.80%	99.93%	98%	98%
3. Outcome measure #3 Percentage of reinstatement licensure applications processed within 3 business days after receipt of required information	B	100%	89%	100.00%	96.30%	98%	98%
4. Outcome measure #4 Percentage of endorsement licensure applications processed within 3 business days after receipt of required information	B	98%	100%	100.00%	99.33%	98%	98%

5. Outcome measure #5 Percentage of advanced practice licensure applications processed within 3 business days after receipt of required information	B	100%	100%	100.00%	100.00%	98%	98%
6. Outcome measure #6 Percentage of licensure application information entered accurately into the licensing software	C	99%	93%	99.90%	97.33%	96%	96%
7. Cost per license	A	\$7.72	\$9.00	\$8.55	\$8.42	\$10.03	\$9.76
<i>Output Measures</i>							
1. Number of licensees	A	75,683	75,142	79,617	76,814	70,702	71,500
Funding							
<i>Funding Source</i>		<i>FY 2018</i>	<i>FY 2019</i>	<i>FY 2020</i>	<i>FY 2021</i>	<i>FY 2022</i>	<i>FY 2023</i>
State General Fund		\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Non-SGF State Funds		\$ 532,776	\$ 583,963	\$ 674,647	\$ 680,930	\$ 709,479	\$ 698,331
Federal Funds		\$ -	\$ -	\$ 1,752.00	\$ -	\$ -	\$ -
Total		\$ 532,776	\$ 583,963	\$ 676,399	\$ 680,930	\$ 709,479	\$ 698,331

Education							
Consequences of Not Funding this Program							
Public protection would be jeopardized as the Education division of the agency covers the approval of the 60 nursing programs, 151 continuing nursing education providers and 24 LPN IV therapy providers in the state. Our Nurse Practice Act includes regulations they must meet to be approved. One Nursing Education Compliance Officer surveys the nursing programs on a regular schedule to ensure they are meeting our regulations and one Education Specialist reviews reports submitted by the continuing nursing education providers and LPN IV therapy providers to ensure they are meeting our regulations. The nursing programs prepare their graduates to pass the licensure exam and be competent nurses and LMHTs as they enter the workforce. Our regulations require 30 hours of continuing nursing education for licensure renewal every two years (a renewal cycle). Approved CNE providers offer CNE offerings. LPNs in Kansas can function in an expanded role with IV therapy, if they have completed the education and competency assessment. The LPN IV therapy providers offer this education and examination.							
Statutory Basis	Mandatory vs. Discretionary	MOE/Match Rgt.	Priority Level				
Specific K.S.A. 65-1117, 65-1119, 65-1136	Mandatory	No	1				
Program Goals							
A. Review and approve continuing education providers and programs that meet the Board's rules and regulations							
B. Oversee the nursing programs, which includes surveying each nursing program once every 5 - 10 years							
C. Receive an annual report from each nursing program by June 30, 2021 (as per regulation)							
D. Receive an annual report from each continuing education provider by July 31, 2021 (as per regulation)							
E. Ensure continuing nursing providers submit five-year renewals as per schedule							
F. Review single nursing continuing education provider applications within 2 weeks of date received in agency							
Program History							
The authority to oversee the nursing programs in Kansas is in K.S.A. 65-1119 (authorized in 1945). The authority to oversee the mental health technician programs is in K.S.A. 65-4206 (authorized in 1973). Overseeing the programs includes reviewing faculty, curriculum and annual reports submitted by the program. Each program is surveyed every 5 - 10 years to verify the program is in compliance with our regulations for approval of the programs. The first-time licensure examination pass rates are monitored by the Board of Nursing and communicated to the Board and the programs. The Board of Nursing administers the mental health technician licensure examination. Education is provided to the program administrators. The authority to require continuing nursing education for our licensees is in K.S.A. 65-1117 (authorized in 1949) and 65-4205 (authorized in 1973). Annual reports and five-year renewal applications are received from the approved continuing nursing education providers. In the event a continuing nursing education provider wants to provide only one offering multiple times in a two year period, they apply for a single program provider. The authority for IV Therapy providers is in K.S.A. 65-1136 (authorized in 1994). They must submit course rosters, faculty and annual reports that must reviewed. COVID travel restrictions have impacted the ability to do all the nursing program surveys per schedule and we were able to work with the nursing programs and change most to a virtual survey.							
Performance Measures							
<i>Outcome Measures</i>	<i>Goal</i>	<i>FY 2019</i>	<i>FY 2020</i>	<i>FY 2021</i>	<i>3- yr. Avg.</i>	<i>FY 2022</i>	<i>FY 2023</i>
1. Percentage of programs surveyed per schedule	B	100%	75%	87.50%	87.50%	100%	100%
2. Percentage of nursing programs submitting an annual report as per regulation	C	100%	100%	100%	100.00%	100%	100%
3. Percentage of continuing-nursing education providers submitting an annual report as per regulation	D	75%	76.40%	92%	81.13%	85%	90%
4. Percentage of continuing nursing education providers submitting a five-year renewal application as per schedule (started with this measure in FY 20)	E		64.70%	100%	82.35%	85%	90%
5. Percentage of applications for single continuing education provider reviewed within 2 weeks of receiving (started with this measure in FY 19)	F	100%	100.00%	100%	100.00%	100%	100%
6. Cost per approved programs (nursing, IV Therapy and CNE programs)	A	\$2,732	\$3,341	\$2,795	\$2,956	\$3,175	\$3,121
<i>Output Measures</i>							
1. Number of approved nursing & mental health technicians programs	A	60	60	60	60	59	59
2. Number of approved continuing education providers	A	120	114	151	128	140	140
3. Number of approved IV therapy providers	A	22	23	24	23	24	24
Funding							
<i>Funding Source</i>		<i>FY 2018</i>	<i>FY 2019</i>	<i>FY 2020</i>	<i>FY 2021</i>	<i>FY 2022</i>	<i>FY 2023</i>
State General Fund		None	None	None	None	None	None
Non-SGF State Funds		500,748	551,935	656,479	656,724	708,126	696,133
Federal Funds		None	None	1,752	None	None	None
Total		\$ 500,748	\$ 551,935	\$ 658,231	\$ 656,724	\$ 708,126	\$ 696,133

Investigations of Possible Violations of the Nurse Practice Act and Legal History on Applications								
Consequences of Not Funding this Program								
Public protection would be jeopardized if complaints received in the agency were not investigated and licensees who violated the Nurse Practice Act were not disciplined. All complaints received in the office must be reviewed and a priority assigned. Anyone submitting a complaint to the Board of Nursing has the expectation that a thorough investigation will occur and the licensee will be disciplined if a violation occurred. Applicants with a legal history on their criminal background report must be reviewed to determine if it is safe to issue a license to the applicant.								
Statutory Basis		Mandatory vs. Discretionary		MOE/Match Rqt.		Priority Level		
Specific	K.S.A. 74-1112, 65-1120, 65-1122	Mandatory		No		1		
Program Goals								
A. Review complaints received in the agency for possible violations of the Nurse Practice Act and assign a priority within 2 weeks of date received								
B. Review applications with legal history before license is granted								
C. Investigate possible violations of the nurse practice act in a timely manner and present to the Board								
Program History								
K.S.A. 65-1120 contains the grounds for disciplinary action against licensees that have a license with the Board of Nursing (authorized in 1949). It contains a provision that states the board may designate and authorize an employee or employees of the board to conduct an investigation on complaints filed with the board. The board has authorized the RN Practice Specialist, RN Investigators and Special Investigator to conduct the investigations. After the investigation is completed, a summary of the findings are presented to the Investigative Committee, a sub committee of the board, that consists of three Board members. The Investigative Committee determines if there has been a violation of the Nurse Practice Act by the licensee based on the findings of the investigation.								
Performance Measures								
Outcome Measures		Goal	FY 2019	FY 2020	FY 2021	3- yr. Avg.	FY 2022	FY 2023
1. Percentage of complaints received in the agency and reviewed by Professional Staff within 2 weeks of date received. (new for FY 2020 - this process was changed in July 2021 and the percentage through the first two months of FY 22 is up to 86%)		A	-	36%	7%	22%	75%	75%
2. Percentage of investigations completed within 9 months of opening the case (this timeline is being researched for national benchmarks and will be discussed with our Board)		C	65%	66%	29%	53%	35%	40%
3. Cost per investigation (investigations opened and applications with legal history reviewed)		C	\$ 504	\$ 268	\$ 472	\$ 415	\$ 496	\$ 40
Output Measures								
1. Number of complaints received in the agency and reviewed by Professional Staff (new for FY 20)		C	-	685	419	552	500	550
2.. Number of applications with legal history reviewed		B	-	3,192	1,908	2,550	2,000	2,000
3. Number of investigations opened		C	2,198	1,197	597	1,331	550	600
4. Number of nurses practicing without a current nursing license (typically lapsed licenses)		C	86	91	44	74	45	45
5. Number of individuals presenting themselves as a nurse but no nursing license (imposter)		C	0	3	1	1	1	1
Funding								
Funding Source			FY 2018	FY 2019	FY 2020	FY 2021	FY 2022	FY 2023
State General Fund			None	None	None	None	None	None
Non-SGF State Funds			\$ 1,056,692	\$ 1,107,880	\$ 1,176,076	\$ 1,183,210	\$ 1,266,471	\$ 1,252,893
Federal Funds			None	None	\$ 1,752	None	None	None
Total			\$ 1,056,692	\$ 1,107,880	\$ 1,177,828	\$ 1,183,210	\$ 1,266,471	\$ 1,252,893

Discipline							
Consequences of Not Funding this Program							
Public protection would be jeopardized if licensees who violated the Nurse Practice Act were not disciplined. All complaints received in the office must be reviewed and a priority assigned. Anyone submitting a complaint to the Board of Nursing has the expectation that a thorough investigation will occur and the licensee will be disciplined if a violation occurred. Applicants with a legal history on their criminal background report must be reviewed to determine if it is safe to issue a license to the applicant. If the Investigative Committee (a sub committee of the Board) determines a violation has occurred, the case may be transferred to Disciplinary Counsel (an AAG assigned to the Board of Nursing) for further review and action.							
Statutory Basis		Mandatory vs. Mandatory		MOE/Match Rqt.		Priority Level	
Specific	K.S.A. 65-1120			No			1
Program Goals							
A. Discipline licensees who violate the Nurse Practice Act via initial orders, consent orders, evidentiary hearings, denied licenses, revoked licenses, limited and/or suspended licenses or diversion agreements							
Program History							
K.S.A. 65-1120 contains the grounds for disciplinary action against licensees that have a license with the Board of Nursing (authorized in 1949). It contains a provision that states the board may designate and authorize an employee or employees of the board to conduct an investigation on complains filed with the board. The board has authorized the RN Practice Specialist, RN Investigators and Special Investigator to conduct the investigations. After the investigation is completed, a summary of the findings are presented to the Investigative Committee, a sub committee of the board, that consists of three Board members. The Investigative Committee determines if there has been a violation of the Nurse Practice Act by the licensee based on the findings of the investigation. If the Investigative Committee (a sub committee of the Board) determines a violation has occurred, the case may be transferred to Disciplinary Counsel (an AAG assigned to the Board of Nursing) for further review and action.							
Performance Measures							
<i>Outcome Measures</i>	<i>Goal</i>	<i>FY 2019</i>	<i>FY 2020</i>	<i>FY 2021</i>	<i>3- yr. Avg.</i>	<i>FY 2022</i>	<i>FY 2023</i>
1. Number of initial orders, consent orders and evidentiary hearings (<i>new for FY 20</i>)	A		168	29	99	30	30
2. Number of denied licenses	A	21	12	6	13	10	10
3. Number of revoked licenses	A	14	21	8	14	10	10
4. Number of limited and/or suspended licenses	A	72	80	27	60	30	30
5. Number of Diversion agreements	A	61	52	20	44	30	30
6. Cost per discipline (includes #1 through 5 above)	A	\$3,203	\$1,928	\$7,268	\$4,133	\$6,663	\$6,557
<i>Output Measures</i>							
7. Total fines deposited in state general fund for violations of the Nurse Practice Act	A	\$54,390	\$33,384	\$17,546	\$35,107	\$40,000	\$40,000
Funding							
<i>Funding Source</i>		<i>FY 2018</i>	<i>FY 2019</i>	<i>FY 2020</i>	<i>FY 2021</i>	<i>FY 2022</i>	<i>FY 2023</i>
State General Fund		None	None	None	None	None	None
Non-SGF State Funds		486,912	538,099	640,370	654,145	733,028	721,336
Federal Funds		None	None	1,752	None	None	None
Total		\$ 486,912	\$ 538,099	\$ 642,122	\$ 654,145	\$ 733,028	\$ 721,336