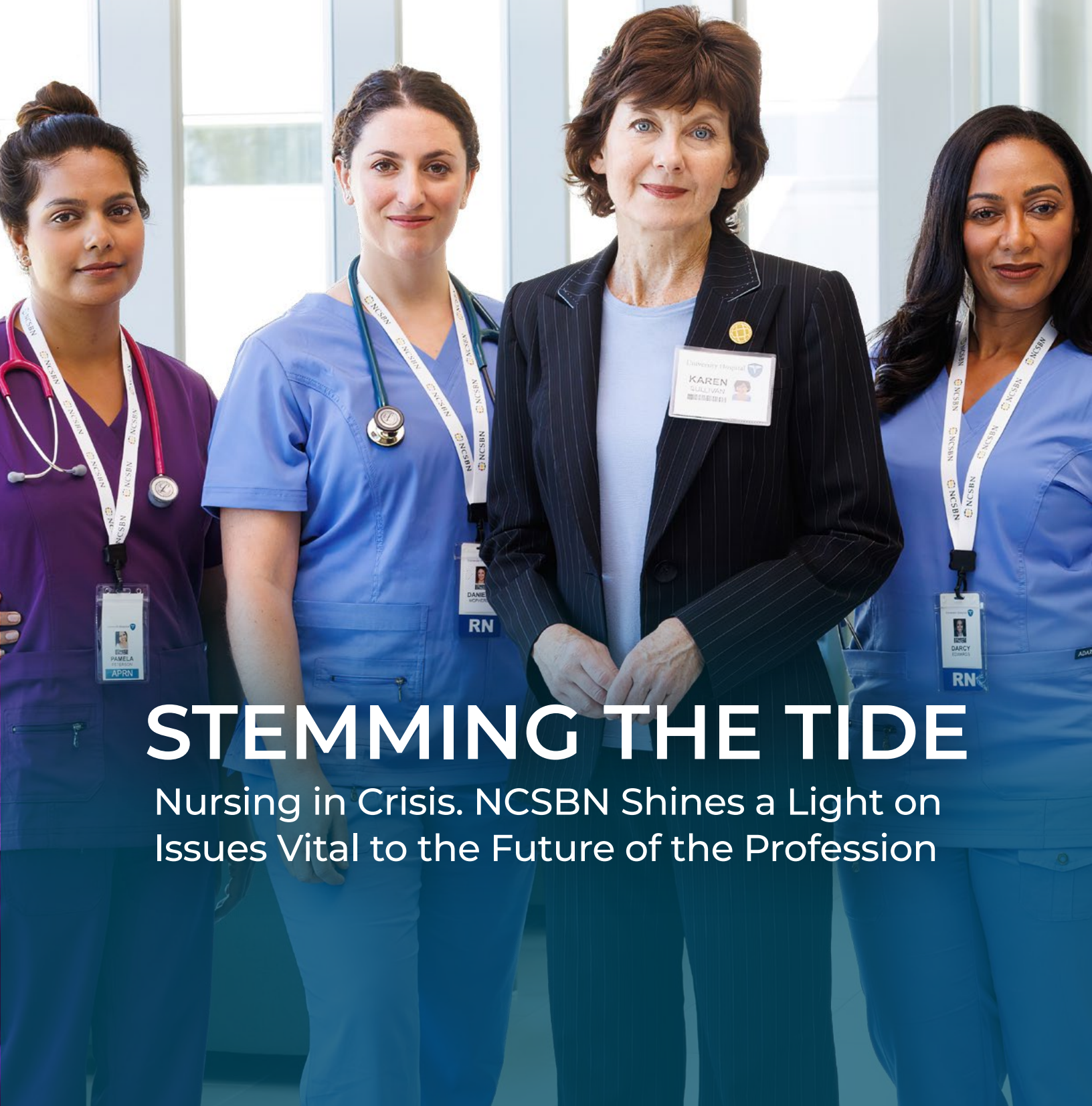


2024, Vol. 3

# IN FOCUS

A PUBLICATION OF  NCSBN



## STEMMING THE TIDE

Nursing in Crisis. NCSBN Shines a Light on Issues Vital to the Future of the Profession

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Founded March 15, 1978, as an independent not-for-profit organization, NCSBN was initially created to lessen the burdens of state governments and bring together nursing regulatory bodies (NRBs) to act and counsel together on matters of common interest. It has evolved into one of the leading voices of regulation across the world.

NCSBN's membership is comprised of the NRBs in the 50 states, the District of Columbia, and four U.S. territories — American Samoa, Guam, Northern Mariana Islands and the Virgin Islands. There are seven exam user members and 23 associate members that are either NRBs or empowered regulatory authorities from other countries or territories.

Mission: NCSBN empowers and supports nursing regulators in their mandate to protect the public.

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Motl

# My Journey to Nursing Leadership

By Patricia Motl, RN, Staff Nurse Representative, Nebraska Board of Nursing

My leadership journey started at home. I come from a large Irish Catholic family where we are either priests or in medicine. My family is sprinkled with doctors, nurses, pharmacists and numerous axillary medical professionals. This leads to an interesting dinner conversation, as my business-oriented husband has told me.

My interest in nursing leadership started in the 1990s. I was a charge nurse on an adolescent medical-surgical floor. All decisions were made *for* nursing, not *with* nursing. I was a diploma grad, and proud of, it but went back to school for my BSN due to the discussion of technical nurse vs. professional nurse. I never felt nonprofessional, but this designation was being defined by others. This perspective viewed nursing as having too many education types as a profession — LPN, AD, Diploma, BSN — and not one standard entry point for the profession as a whole.

I started looking at ways to promote the profession and ways for nurses to regain power over their profession. My grandmother, who graduated from nursing school in 1918, had more control over her role in the profession than I did.

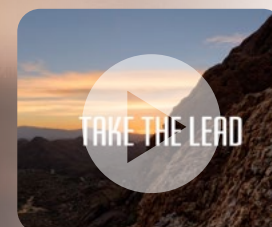
I applied for the board of nursing on a dare from my boss. She was applying for the radiology board

and we both thought that we could promote public safety and elevate our professions. While I got on the board, she did not; but she supported me throughout my board career.

I then needed to start to learn about NCSBN and how it could support our board as well as my role on the board. I love to learn and the courses offered by NCSBN's [International Center for Regulatory Scholarship \(ICRS\)](#) were a wonderful educational opportunity. I was the first person to sign up for the courses and was so glad I did. Being a graduate of the [ICRS Advanced Leadership Institute](#) was a great honor.

I was president of the [Nebraska Board of Nursing](#) for three years and as I termed out, I was able to become involved in NCSBN committees, first the NCLEX® Item Review Subcommittee and next with an appointment to the Leadership Succession Committee. I am excited about working on core competencies with this group of outstanding members.

I am grateful for the opportunity to promote public safety and the nursing profession through my leadership journey. This opportunity to guide the journeys of the next generation of nurse leaders gives me hope for the future. 🌟



*The members of NCSBN's Leadership Succession Committee endeavor to provide future, emerging and current leaders with an insider's look into the value of serving in an NCSBN leadership role. NCSBN members can pursue a variety of leadership paths to support their professional development. Getting involved with NCSBN benefits you both personally and professionally. Find out [how to apply](#) for a leadership position (member login required).*



# NLC Legislative Update: Building on Success



Livanos

By Nicole Livanos, JD, MPP, Director, State Affairs,  
Government Affairs, NCSBN

As the majority of state legislatures wind down their 2024 sessions, now is a great time to look at the progress made and lessons learned as plans already take shape for 2025. Interstate compacts for licensed professionals, the majority of them health professions, continued to be under consideration across the country. The Nurse Licensure Compact (NLC), the longest running health care licensure compact, had legislative action in nine states and the District of Columbia, and saw significant progress and one key enactment.

## 2023 Impacts on 2024 Efforts

The 2023 session brought enactments of NLC legislation in Rhode Island and Washington state, two significant legislative victories that influenced strategy and interest in the NLC in the remaining non-NLC jurisdictions. The enactments in both states were significant in part because both states have strong nursing unions who have historically opposed the NLC, a similar characteristic of many of the remaining jurisdictions. The enactment of the NLC in Washington marked a nearly 25-year effort to bring licensure mobility to registered nurses (RNs) and licensed practical/vocational nurses (LPNs/VNs) in the state. The NLC was considered among several pieces of nursing workforce-related legislation that neutralized the Washington State Nurses Association's opposition to the bill, along with additional provisions added to the NLC to address various concerns expressed by the union. Gov. Jay Inslee signed the bill into law in April 2023. While Rhode Island was part of the old NLC prior to the modernization of the compact in 2015, they had yet to join the current NLC and were the only member to not rejoin before the current NLC went into effect in January 2018. Important to the success in Rhode Island was the creation of a Special Legislative Commission tasked with studying and providing recommendations to the legislature about the NLC.

Included in the Commission were lawmakers, nursing stakeholders,

[continued on page 8](#)

## Take Action to Bring the NLC to Your State

If your state is not one of the 42 NLC members, send a letter to your legislators asking for their support of the NLC.

[Learn More](#)



employers, educators, and importantly, two nursing unions. After releasing their [report](#) recommending enactment of the NLC with additional provisions including a sunset, the bill soared through the legislature in its last few weeks of session, with final passage on the last day of session, and was [signed into law](#) by Gov. Daniel J. McKee.

Heading into the 2024 session, NLC legislative sponsors and stakeholders were confident the 2023 enactments would aid in the success of the measure in their states. Significant progress was made, and continues to be made, across several jurisdictions.

### 2024 Efforts

Connecticut Gov. Ned Lamont introduced the NLC in the 2024 session. Like neighboring Rhode Island, the Connecticut legislation contained a sunset provision to allow the state to reevaluate their participation in the compact in a few years to help ease concerns among opponents. The governor's office, key lawmakers, and stakeholders led discussions with opponents to the compact and importantly were able to remove opposition from the state's alternative to discipline program, HAVEN, through an amendment to the bill. In a coincidental pattern to their neighboring state of Rhode Island, [Connecticut also passed the NLC](#) on the final day of session, a nailbiter for supporting

lawmakers and advocates alike. Gov. Lamont signed the bill into law in May 2024, officially making Connecticut the 42nd member of the NLC.

In Alaska, the NLC advanced out of the House Labor and Commerce Committee and three attempts were made to amend the NLC onto moving legislation in the final days of the legislative session. While the NLC did not make it across the finish line, it progressed further than previous years and importantly, Alaska did enact its first two health care licensure compacts. With several similarities in structure and operations, movement on the compacts in Alaska will be influential to the NLC efforts in 2025. Additionally, the Alaska Board of Nursing and NCSBN conducted a survey to gauge the need and support for the NLC among licensees. The survey was completed in November 2023 and the [results](#) created needed momentum for lawmakers and advocates, with 92% of respondents expressing support for Alaska joining the NLC, and 64% of respondents stating they hold at least one additional nursing license—a financial and administrative burden the NLC can help alleviate.

Hawaii had several introductions of the NLC this session, including as part of the governor's legislative package. After numerous hearings across both chambers, House Bill 2415 advanced

out of both chambers and was assigned to a conference committee for final action. Despite significant support for the legislation throughout the legislative session, the conference committee did not recommend passage of the NLC. Considering the NLC had never advanced through a single legislative committee in Hawaii in years past, the success in the 2024 session created significant momentum for future efforts.

Lastly, progress continues in Massachusetts. Last fall, the Joint Committee on Health Care Financing [held a hearing](#) on the NLC, with a diverse group of stakeholders testifying in support, and the Massachusetts Nurses Association stood alone in their opposition. Shortly after the hearing, results were released on a survey conducted by NCSBN gauging the need and support for the NLC among Massachusetts RN and LPN licensees. More than 17,500 licensees completed the survey, and the results found that 90% of respondents are in

favor of the state joining the compact, and among surveyed union members, 88% support the NLC. The Boston Globe highlighted the survey results and called for the state to join the NLC in a [March 2024 editorial](#). With support growing for the state to join the NLC, Senate Finance Chairperson Cindy Friedman introduced the NLC as an amendment onto an omnibus economic development bill. The amendment was successfully adopted onto the economic development package, which passed the Senate later the same day, but ultimately the bill did not pass in the regular session.

### What's Ahead

While significant work continues in states with ongoing legislative sessions, the NCSBN State Affairs team is also leading planning discussions with lawmakers and advocates for 2025 legislation. Just as the 2023 legislative session influenced successes in 2024, so too will the 2024 legislative session for 2025 NLC initiatives. 🇺🇸



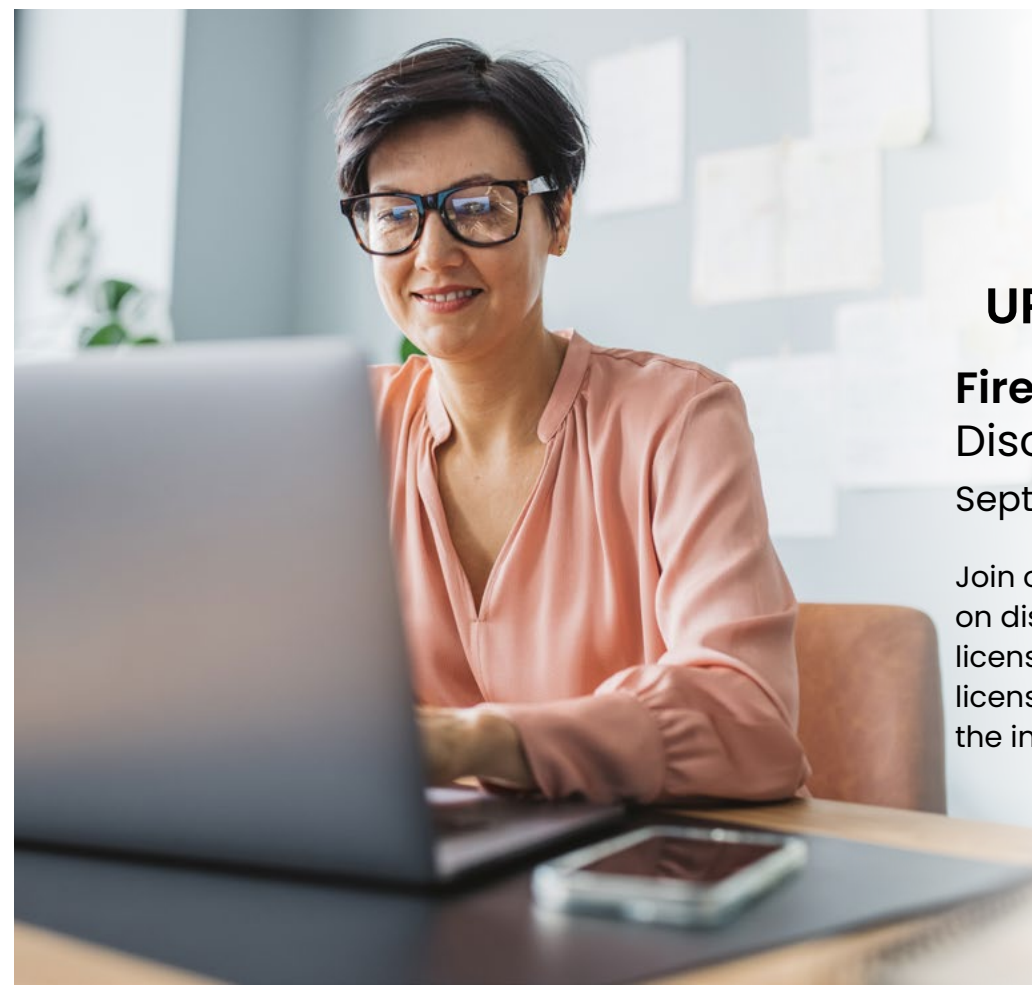
## UPCOMING WEBINAR

### Fireside Chat: Discipline & Eligibility

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Join our Fireside Chat for a discussion on discipline, eligibility for a multi-state license and disqualifiers to a multistate license. Fred Knight, JD, NLC Consultant, is the interview guest.

[Register Today](#)



# Stemming the Tide

Nursing in Crisis. NCSBN Shines a Light on Issues Vital to the Future of the Profession

When NCSBN published the results of the [2022 Nursing Workforce Study](#) that found that more than 100,000 nurses had already left the profession and almost 900,000 additional nurses had indicated an intent to leave, it confirmed what most health care CEOs and nursing administrators already knew: the system was hemorrhaging nurses.

This grim validation of what was actually being experienced was welcomed by many who hoped greater attention on the situation might bring answers to solve the ever-deepening crisis. The question remains, has the situation gotten any better in the two years since the survey was conducted? And, if so, what measures have been taken to stem the tide of nurses leaving the profession?

NCSBN is working on the answer to the first question. In the interest of providing data to researchers, policymakers, regulators, educators and hospital administrators to evaluate workforce needs, forecast future challenges and plan for the safe delivery of care, NCSBN and the National Forum of State Nursing Workforce Centers have conducted biennial nursing workforce studies since 2013.

[continued on page 12](#)





Martin

We are again in the field (until Sept. 2, 2024), gathering data for the [2024 National Nursing Workforce Survey](#). In the words of Brendan Martin, PhD, NCSBN Research, Director, “It is imperative that we continue this essential research. Ascertaining if nurses perceive that the health care ecosystem has improved, stayed the same or worsened in the last two years, is critical to inform ongoing retention strategies and support sustainable workforce planning.”

The results of this study will be released in April 2025.

Those unfamiliar with the nursing workforce may ask “how did things get so bad?” The short answer is that the COVID-19 pandemic set fire to an already simmering environment and the pandemic pushed nurses to the breaking point, and in some cases, out of the profession entirely. Cracks in the health care ecosystem were apparent prior to 2020 with the looming retirement of the baby boomer generation, higher acuity hospital patients requiring more complex care, an aging population living longer but with greater morbidity and the demand for nurses in certain areas outstripping supply.

The dilemma facing CEOs and nursing administrators was how to stem the tide of nurse resignations and how to recruit and retain new nurses. The health care system is in the process of experimentation, trial and error and, in many cases, stepping out of the box in their endeavor to keep the nurses they have and attract and retain new ones to their facilities.

#### Addressing Mental Wellness

A previous *In Focus* cover story, “[Nursing Workforce Crisis: Healing the Healer Addressing Wellness and Mental Health](#),”

“ **Ascertaining if nurses perceive that the health care ecosystem has improved, stayed the same or worsened in the last two years, is critical to inform ongoing retention strategies and support sustainable workforce planning.** ”  
— Brendan Martin



### About the National Nursing Workforce Study

Every two years, NCSBN partners with The National Forum of State Nursing Workforce Centers to conduct the only national-level survey specifically focused on the U.S. nursing workforce. The National Nursing Workforce Survey generates information on the supply of nurses in the country, which is critical to workforce planning, and to ensure a safe and effective health care system.

[LEARN MORE](#)

addressed some of the issues facing nurses in safeguarding their own mental health.

Becoming more aware of the role of mental health — in not only delivering quality care to patients but also increasing nurse retention and job satisfaction — hospitals, health care systems and other nurse employers are beginning to take action to address environmental factors contributing to stress and burnout.

Aon, a leading global professional services firm, conducted the [2023 Benefits Survey of Hospitals](#) which queried 1,400 hospitals across the U.S. It found that 57% of reporting institutions are now offering enhanced behavioral health benefits (beyond traditional employee assistance programs or medical plans), which is up from 40% in 2022.

*Impact Wellbeing*, launched by the Centers for Disease Control and Prevention’s (CDC) National Institute for Occupational Safety and Health (NIOSH) in October 2023, provides “hospital leaders with evidence-informed resources to improve workplace policies and practices that reduce burnout, normalize help-seeking and strengthen professional wellbeing.”

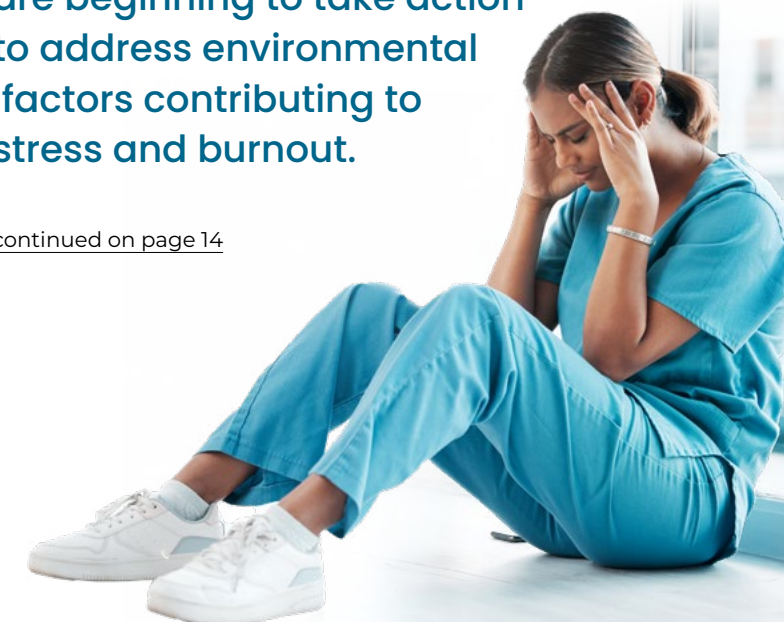
In a [press release](#) announcing *Impact Wellbeing*, John Howard, MD, Director of NIOSH, said, “Even before the pandemic, health care workers faced challenging working conditions that lead to burnout. This includes long work hours, risk for hazardous exposures, stressful work, and high administrative burdens,” said “Hospital leaders need support to implement organizational changes. Practical adjustments can reduce burnout and strengthen professional wellbeing within their hospitals.”

Health care institutions that make a commitment to wellness and mental health recognize that organizational culture must undergo a paradigm shift for significant and meaningful changes to take root.

At the [2023 NCSBN Symposium: Solutions Addressing Nursing Workforce Crisis](#), Lavonia Thomas, DNP, RN, NEA-BC, nursing informatics officer, at MD Anderson Cancer Center, described what they have done to try to recruit, retain and safeguard the mental wellness of nurses. “As a nurse for more than 35 years, what impacts my profession and my sisters and brothers in this profession certainly touched my soul,” she said. “At MD Anderson, we have put forth opportunities that we have harnessed from our monitoring of national and local trends, as well as the work we have done to establish contact ongoing through formal structures to tap into what our nurses are telling us they want us to do. As a result, we have launched nursing transformation efforts with at least eight different work streams to address the issues that our MD Anderson nurses are telling us that they want us to address. Largely, the message we are getting is they want holistic addressing of them as a whole person, not just when they come to work, but their needs above and beyond in this profession.”

**Becoming more aware of the role of mental health — in not only delivering quality care to patients but also increasing nurse retention and job satisfaction — hospitals, health care systems and other nurse employers are beginning to take action to address environmental factors contributing to stress and burnout.**

[continued on page 14](#)



Based on feedback from their nurses, MD Anderson focused on leadership training, specifically targeted on nurses hired during the pandemic to build their skills, and then to all nurses on staff, because they believe that nurses are leaders in whatever job that they hold.

A recent [HealthLeaders Media](#) article details how Pittsburgh-based Allegheny Health Network, a not-for-profit, 14-hospital academic medical system with facilities located in Western Pennsylvania and one hospital in Western New York, was ahead of the curve. In 2018, AHN made a pledge to improve the well-being of its health care providers and other staff. Some of the measures they instituted were at the most basic level, like making sure that staff actually took meal breaks and remained well hydrated.

During the pandemic they launched “decompression rooms,” a quiet area with massage chairs and resources that staffers can go to when they are stressed out. They created a 24/7 helpline for people in the emergency department and critical care. They also started a peer support program for physicians and nurses so they could get help when they were at the end of their rope. These measures have all become a permanent part of the system’s wellness program. Subsequently, their provider “burnout scores” are more than 10 percentage points below the national average.

### Reinventing Nursing Units

Mercy, one of the largest health systems in the U.S., launched a [Nursing Innovation unit](#) at their St.



**Health care institutions that make a commitment to wellness and mental health recognize that organizational culture must undergo a paradigm shift for significant and meaningful changes to take root.**

Louis hospital last fall. The new unit was designed to be a testing ground “for new optimization ideas and aims to solve current and future nursing challenges and ultimately improve patient care.”

The unit is made up of full-time nurses recruited from Mercy’s own ranks. They are chosen because they are tech savvy, quick learners and fully embrace change with the intention of having them — along with liaisons for patient experience, nursing informatics, Mercy Technology Services, Epic (powering Mercy’s electronic health records) and nursing optimization — drive innovation for how care is provided to patients.

The innovation unit uses the [Plan-Do-Study-Act](#) method, known as PDSA. PDSA breaks down tasks into steps, evaluates the outcome, improves upon the outcome and tests it again.

All projects reside under the four Mercy nursing strategies for improvement: workforce, workflows, work environment and patient experience.

The plan is to eventually roll out these units across Mercy’s 45 hospitals.

In addition to the innovation units, Mercy is also focused on improving the workforce, work environment and workflows. They recognized the friction occurring at the front lines and the resultant increasing workload for their nurses.

Describing the success of Mercy’s Nursing Innovation Unit and its other initiatives in a [HealthLeaders Media](#) interview, Betty Jo Rocchio, DNP, CRNA, CENP, Mercy senior vice president,

chief nurse executive, said “One of the things that we’re pretty passionate about at Mercy is our nurses’ experience or joy in practice.”

She noted that during the COVID-19 pandemic their turnover rate was approximately 28%, in line with the national average. The system stands at 14% now. They improved their turnover rate by “focusing on getting enough workforce and then reducing that friction in their day.”

### Thinking Outside of the Box

A [Healthcare Innovation](#) article focused on how the 12-hospital, Mishawaka, Ind.-based Franciscan Health system tackled their nurse staffing challenges by moving away from reliance on external staffing agencies and instead created their own, in-house travel program.

They recruited local nurses into this program with the caveat that they had to be willing to travel between facilities in that particular region. The flexible program provides higher pay with no benefits but the freedom to choose the shift, the type of assignment and the length of assignment. The system was surprised and pleased by the number of experienced nurses that applied, when other ways of recruiting these nurses did not work. While the program does not allow current employees to transfer into the program, they have had some travel nurses take regular positions in their hospitals.

Since Franciscan launched its travel nurse program in the summer of 2022, external nurse spending has decreased by 22% year-over-year.

[Becker’s Hospital Review](#) highlighted Philadelphia-based Jefferson Health, which launched the SEAL Team program (which stands for service, excellence, advocacy and leadership), “as a way to deliver on nurses’ flexibility demands and foster more consistency in staffing levels across units.”

Participating nurses are “deployed to various acute care locations based on anticipated staffing needs for medical/surgical, telemetry, progressive care

and intensive care units.” Nurses have the choice to work across multiple divisions, states or within the entire Jefferson 17-hospital system.

The program has grown to 150 full-time nurses supporting medical-surgical, critical care and emergency department units from the original 25-member group that was formed in 2022.

Andrew Thum, DNP, director of nursing workforce operations at Jefferson Health, said, “Throughout the expansion of the program, [SEAL team nurses] have cited that they really like the flexibility and the difference in their work from a shift-to-shift basis.”

Engagement and satisfaction levels for bedside staff who are not part of the SEAL Team have also increased because the SEAL Team is sent to units with the greatest need.

Since its launch, Jefferson health has seen its open RN positions drop from a high of more than a 1,000 to less than 300. The SEAL team is not the only component being utilized to improve recruitment and retention, but it is playing a vital role.

### Revolutionizing Bedside Care: Virtual Nursing

Virtual nursing is an outgrowth of telehealth, which has been in place for decades. It uses technology to deliver nursing services remotely and supports nursing staff working at the bedside. Virtual nurses can assist with patient check-ins, admissions and discharge paperwork, patient education and coordination of care teams. Additionally, they can monitor high-risk patients and survey patients in real time. Their work frees up the bedside nurse to manage the physical needs of patients. Virtual nursing is a powerful mechanism that can help improve patient satisfaction and reduce the length of a patient’s stay. Similarly, it benefits bedside nursing by redistributing patient care tasks to help alleviate nurse burnout and increase clinical team efficiency.

MD Anderson introduced a virtual nursing platform, to layer on an RN with experience, to the care team to support those who are delivering hands-



## Virtual nursing is a powerful mechanism that can help improve patient satisfaction and reduce the length of a patient's stay.



on patient care, using a sprint methodology to for admission and discharge support for front-line nurses.

Thomas said, “The feedback the nurses have had, includes comments like, ‘I don’t know how we’d get through some of my busiest days without my virtual nurse, and it has enabled me to spend time with my patient and do a more thorough assessment with having the virtual nurses on board.’”

MD Anderson has seen turnover stabilize. Thomas commented, “We want nurses to come to MD Anderson and retire from MD Anderson, and to do that, we need to support all of their needs, not just what they come to work to do but also their wellness.”

Hospitals like [Lawrence + Memorial Hospital](#), part of Yale New Haven Health, have experimented with a team of two virtual nurses. In the first six months of the team’s existence, they have “overseen 898 discharges, 466 admissions and reduced the average length of stay for patients in the medical/ surgical unit by nearly half a day.” Based on the success of this initiative, the hospital plans to add two more teams this year.

On the other end of the spectrum, the largest health system and the largest employer of nurses in the country, HCA Healthcare, is utilizing remotely located virtual nurses who perform their duties from their own homes. This is a step away from the centralized command centers that many other health systems are using.

HCA Chief Nursing Informatics Officer Sherri Hess, RN, told *Becker’s Hospital Review*, “I think the future is working at home.”

The nurses HCA has hired for these 40 new positions have either “moved away from their hospitals or needed more flexibility for family reasons (they don’t have to work the typical 12-hour nursing shifts).” Nurses working from home are required to do so in a locked room for privacy.

In still another variation on the virtual nursing model, University Hospitals in Cleveland uses a [hybrid program](#) whereby designated nurses spend several days at the bedside and the remainder of their schedule at a remote care hub as a virtual nurse.

Their model includes 23 staff nurses working in five units.

In many instances, nurses working remotely are often caring for the same patients with whom they established a rapport during a bedside shift at the hospital.

Nurse and patient satisfaction ratings have led them to expand the hybrid model to night shifts and introduce remote access for other health care team members.

### Useful Tools and Benefits

Many hospitals and health systems are making sweeping changes aimed at improving the work life balance of their nurses. Some changes, such as allowing self-scheduling, are smaller tools

but still valuable in that they provide nurses with more autonomy and greater flexibility. While self-scheduling was more prevalent in the past, the advent of electronic scheduling systems has made the process easier to manage, reducing the administrative burden for the hospital.

Jennifer Mensik Kennedy, PhD, RN, president of the American Nurses Association, commented to *Becker’s Hospital Review* that, “Nurses are more satisfied when they self-schedule — period. It gives them a voice and freedom to make their own decisions. It increases their own control and flexibility.”

Ultimately, self-scheduling is a win for both nurses and management. Nurses have flexibility and control over their own schedules, and management has the opportunity to do more mentoring and rounding. Absenteeism is also often decreased.

To address the challenges of recruitment and retention, the [Aon Survey](#) also found that 70% of hospitals and health systems have “implemented or bolstered sign-on bonuses, 59% percent have increased new hire pay, 54% have increased their minimum wage scales and 52% increased or added referral bonus programs.” Additionally, many facilities have added benefits that exceed city, state and federal mandates. These additional benefits include:

- 45% offer paid parental leave beyond state and city mandates.
- 44% offer student loan repayment plans, with an additional 37% considering this option next year.
- 43% offer a subsidy for adoption.

- 34% percent offer back-up childcare.
- 38% offer expanded fertility coverage beyond the medical plan.
- 28% offer on-site daycare.
- 25% offer subsidies for back-up elder care.

### Artificial Intelligence (AI) and Beyond

AI and its potential is one of the most hotly debated topics in health care today. It holds the promise of being yet another tool that will assist nurses, but its actual application and implementation is still in its infancy.

NCSBN is mindful that there are regulatory considerations for the use of AI. While AI can be partnered with nursing, nurses should remain empowered to detect issues that can occur when AI systems use data sets with errors.

Current NCSBN CEO Philip Dickison, PhD, RN, embraces the full potential of AI to enhance nursing education, nursing practice and administration. At NCSBN, he has plans to implement AI tools to ease organizational workload. Dickison has noted previously that “AI can free people from the mundane



“ AI can free people from the mundane to allow them to become more creative, imaginative and expand new avenues of productivity. ”

— Phil Dickison

to allow them to become more creative, imaginative, innovative and expand new avenues of productivity.”

NCSBN remains committed to issues surrounding the nursing workforce and that is why we are keeping the dialogue on staffing, wellness and the prevention of workforce violence open. These issues are vital to the future of nursing and should remain top of the mind, now and in the future. We will continue to provide research and evidence-based information upon which health care leaders can springboard their own changes. 🌍



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## JOURNAL OF NURSING REGULATION

### Call for Papers

**JNR Special Issue:** Technology and the Nursing Needs of Tomorrow: Innovation and Regulation

**Publication Date:** October 2025

**Manuscript Submission Deadline:** July 1, 2025



The proliferation of telehealth and virtual nursing services continues well beyond the COVID-19 pandemic. As both are integrated into nursing practice, the implications will be widespread. From workforce and patient care to licensing and education, technology is reshaping the nursing profession from every perspective.

This special issue of the *Journal of Nursing Regulation* (Volume 16, Issue 3) will examine how telehealth, virtual nursing, AI, robotics and other innovative technologies currently impact nursing regulation and the nursing profession, as well as what awaits us in the near future.

We welcome original quantitative or qualitative research manuscripts, literature reviews, and other academic analyses, as well as case studies that provide strategies and solutions in the context of telehealth, virtual nursing, AI, robotics and other innovative technologies.

For submission guidelines, visit [journalofnursingregulation.com](http://journalofnursingregulation.com) and review the “For Authors” section. For questions, please contact JNR’s acquisitions editor, Marilea Fried, at [jnr@ncsbn.org](mailto:jnr@ncsbn.org).



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Kansas State Board of Nursing representatives at the 2023 NCSBN Annual Meeting with their award. Front row (left to right): Licensing Supervisor Rae Ann Byrd, Executive Administrator Carol Moreland, Board President Julianna Rieschick. Back row: Director of Operations Adrian Guerrero, Executive Assistant Jill Simmons, Nursing Education Compliance Officer Janelle Martin, Practice Specialist Linda Davies.

# It Brought What We do to Light

Kansas State Board of Nursing Honored with NCSBN's 2023 Regulatory Achievement Award



Moreland

On the morning [Kansas State Board of Nursing \(KSBN\)](#) Executive Administrator Carol Moreland, MSN, RN, CPM, learned that KSBN would be honored with NCSBN's [2023 Regulatory Achievement Award](#), Kansas Gov.

Laura Kelly happened to be visiting their office for Public Service Employee Week.

“Gov. Kelly is very committed to state employees,” says Moreland. “During that week, she chooses a few agencies to visit and talk with the staff. We were one of two non-cabinet agencies, the smaller agencies, that were chosen. So we really made a big thing that she was coming. I hadn’t said anything yet to our staff about the award. They heard it when I told Gov. Kelly about it. She told me to let her know when we received the award, and said she was so proud of us, how dedicated we are to the mission of protecting the public. The governor has always been very supportive of nursing. She pushed for the [Nurse Licensure Compact \(NLC\)](#) when she was a legislator, before she became governor, and she championed full practice authority – she was so happy when she was able to sign that bill. She does a proclamation with us every year for Nurses Week. So, the board thought it was pretty neat that she was one of the first people to hear about our award.”

Shortly after KSBN received the award at the 2023 NCSBN Annual Meeting, Moreland did notify Gov. Kelly. “We showed her pictures from the awards

ceremony,” she recalls. “And she congratulated us on social media. It meant a lot to us when she said, ‘This national award speaks volumes about the quality and character of our Kansas nurses.’ That was a big compliment.”



NCSBN's Regulatory Achievement Award is given to a board of nursing that has made an identifiable, significant contribution to the mission and vision of NCSBN in promoting public policy related to the safe and effective practice of nursing in the interest of public welfare. KSBN has been instrumental in leading regulatory excellence and has been an active participant in NCSBN activities.

KSBN was the first board of nursing to implement real-time online license renewals in 2001. For their progressive actions, they received the Centers for Digital Government (CDG) National Award. CDG noted KSBN's online license renewal system was considered best of-breed and was a model for regulatory agencies looking to implement online licensure. KSBN shared best practices and lessons learned from creating their automated nurse

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“ With NCSBN awards, there’s a recognition that this is hard work, and it is rewarding work. ”

— Julianna Rieschick



KSBN receives the NCSBN Regulatory Achievement Award at the NCSBN 2023 Annual Meeting Award Ceremony.



Watch Julianna Rieschick speak about the Regulatory Achievement Award (above).

Rieschick accepts the award from NCSBN BOD President Jay Douglas (right).



licensure information system with NCSBN during the development of Nursys® e-Notify.

In 2018 KSBN was instrumental in working to secure Senate and House sponsors for the enhanced NLC and worked tirelessly throughout the session to ensure that the NLC was successfully implemented in 2019.

In 2022 KSBN passed legislation to authorize advanced practice registered nurses (APRN) to practice at the full extent of their education, training and licensure. This pinnacle legislation was spearheaded in collaboration with a multitude of strategic partners, professional organizations and legislative leaders. This legislative achievement tipped the scales across the country, with Kansas becoming the 27th state to allow full practice authority for APRNs. This legislation is important to patient safety as it now allows APRNs to use their full scope of knowledge, skills and abilities to provide high-quality, patient-centered care without unnecessary restrictions.

KSBN has also modeled leadership, with two individuals having served in a leadership capacity on the NCSBN Board of Directors, including one who served as NCSBN Treasurer. These individuals have shaped the future of nursing regulation and played a vital role in developing

policies and standards that guide NCSBN and the practice of nursing. KSBN staff have also served on numerous committees, task forces and in other leadership positions, and have presented at NCSBN conferences.

“I felt like it brought what we do to light. I was very proud,” says Moreland. “I saw it as an opportunity to show everything Kansas has done. We don’t toot our horn enough. We made a lot out of it when we joined the compact. We made a lot out of it when we got full practice authority. But other than that, it seems like we’re constantly doing something to get ahead and get things done. I don’t think we take the time to really look back. When I did, and I saw all our accomplishments, I thought, ‘wow, these are some really big things that have happened.’ It also means there has been great teamwork between board members, and between staff. Because everybody played into this. Everybody did.”



Rieschick

KSBN Board President Julianna Rieschick, MSN, RN, NEA-BC, says receiving an NCSBN award has special meaning. “There are agencies and groups that do awards and recognition, and sometimes it feels more like it’s more about the agency than the recipient,” she

says. “I don’t feel that way about this award. With NCSBN awards, there’s a recognition that this is hard work, and it is rewarding work.”

Rieschick elaborates, “Our licensing team doesn’t measure their goals in weeks or months. They truly measure it in hours. This is hugely impactful to employers throughout the state that need nurses to be operational in clinical settings almost immediately. So that’s how we’re taking care of the state. We are also proud that we are holding nurses accountable, and that we have high standards for those who graduate from Kansas schools. It’s not easy to be a nursing school in Kansas. And I think the agency takes their job very seriously. They know their business and their work so well. Until I started attending NCSBN meetings, I don’t know that I fully realized the success of our team. You start talking to others and hearing about their trials and tribulations, and you think about all of the work KSBN staff have done. I’m hoping that the night of the awards dinner and celebration is still felt by our staff. I think it is. There’s recognition now, for the time and efforts they’ve invested and continue to invest.”

Rieschick was joined on stage with Moreland and members of the KSBN leadership team. “I felt very strongly that I wanted to take some of the staff

to Chicago for the ceremony,” recalls Moreland. “I chose the leadership team because I rely heavily on them. I hoped the staff would feel there was a little bit more involvement if the leadership team got to go. I didn’t want it to be just Julianna and me up there accepting this award. It was very important to me. Some of these people don’t get much light shined on them, but they really contribute to a lot of the work done in this agency. They still comment about how special it was to them to be included.”

Moreland observes that receiving the award has helped motivate the staff by putting their performance metrics into perspective. “It’s hard work, and they usually hear from a small number of our licensees who are either unhappy or they don’t think we’re doing what we’re supposed to do,” she explains. “It can be easy to get discouraged because the applications are always coming in. Since receiving this award, we tend to look back a little bit and say, ‘Okay, let’s see how far we’ve come here.’ Instead of just constantly saying, ‘we have to get this done.’ It’s a reflection time, and we do that every month in our staff meeting. Because it became clear to me that we probably didn’t praise the staff as much as we should have. So, I always go back to them with their

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Board and staff with the award in the KSBN office.

performance metrics, and they have made so much improvement. I don't think they see it anymore as being pushed to always do more, but how can we improve our service? I see that as our biggest accomplishment because I see day by day how well they're doing and how dedicated they are to what they do. They feel very strongly invested in public protection."

Moreland nominated KNBN for this award and she encourages other boards of nursing leaders to do the same. "I think it's tough for people to nominate themselves. I could understand why someone might feel uncomfortable doing that. But when I go to NCSBN meetings and I look around, I'm just in awe. I know publicly what these people have done, but there's so much they've done in their past that I don't know anything about because I hear very little about it. They have to take some time to reflect, because people have accomplished a lot more than they remember. I'm not a person who dwells on the past, but when this was in the works, I thought, 'my gosh, look at everything Kansas has done, and we've been so quiet.'

KSBN's award plaque is not in the lobby on display. It's in back with the staff. "It was interesting when we found out we were getting the award," says

Moreland. "Initially the staff didn't really know what it was and why it was such a big deal. So, we really built upon its importance. We helped them understand that the leadership team was going to go with us to Chicago, not just Julianna and me. The day I returned from the Annual Meeting, they were disappointed I didn't have it with me, and asked, 'when are we getting it?' I was working remotely the day I was notified it would be delivered. I told our person at the front desk to let me know when it arrived, and I'd come to open it and show everyone. When I got there, they had already opened it and walked it around the office! They were so happy. It's not back here in my office. We thought about putting it in the lobby, hanging on the wall or something, but we really wanted it with the staff. It's out there so that they can see it."

Rieschick expresses that the recognition of the award helps solidify a culture that's being built at KSBN. "It's a continuous work in progress, but Carol's done a great job of building a positive culture. Being that leader who submits a team for this level of recognition really brings that to a higher level than just saying, 'good job' on an annual evaluation. This really brings a positive culture together." 🌟

# NCSBN AWARDS

**In the world of nursing regulation, *Every Moment Matters*. Your countless moments of dedication, innovation and excellence protect the public, ensure the highest standards of care and advance our profession. Someone you know is setting an example for others. This is your opportunity to celebrate their outstanding achievements! Your nominations do more than celebrate and inspire regulatory excellence, they help us realize lasting impact.**

**Visit the [Awards Program webpage](#) (NCSBN member login required) for information about the Awards Program, and watch videos of previous awardees.**

**Congratulations to all of the 2024 awardees!**

[Read More](#)

# News & Notes



## Thomas Recognized with Leaders and Legends Award

In May 2024, Kathy Thomas, MN, RN, FAAN, former executive director for the [Texas Board of Nursing](#), (TXBON) received the Leaders and Legends Award

presented by the Texas Nurses Association (TNA). The award is given to nurses whose volunteer service to the association significantly contributed to TNA and health transformation locally, state-wide and nationally. Thomas' illustrious 40-year nursing career as a registered nurse, pediatric nurse practitioner, nursing educator and regulator with the TXBON, has demonstrated outstanding leadership, advocacy and commitment to the advancement of nursing in Texas. Thomas is currently serving as an inaugural member of the [Texas Higher Education Coordinating Board Healthcare Workforce Task Force](#), which will address health care workforce shortages in Texas to meet the demands of this growing state and provide students with the skills they need to succeed.



## Hawkins-Garcia Completes Master of Science in Bioethics from Harvard Medical School's Center for Bioethics

Carol Kay Hawkins-Garcia, MSc, RN, clinical educator at South

Texas Spine & Surgical Hospital and South Texas Spine & Surgical Outpatient Center and board member, [Texas Board of Nursing](#), recently obtained her Master of Science in Bioethics from Harvard Medical School's Center for Bioethics. A capstone project Hawkins-Garcia completed while pursuing her degree, entitled "Creating Bioethical Awareness Among Nurses: The Value of the Clinical Ethics Consultation in Every Clinical Practice Setting," aims to increase nurses'

awareness of the benefits of a clinical ethics consultation by providing an electronic educational brochure accessible on states' board of nursing websites and the NCSBN website. [View a poster summary](#) of her capstone project.



## Castillo Inducted as Fellow of the American Association of Nurse Anesthesiology

Jose Delfin D. Castillo III, PhD, MS, CRNA, APRN, a tenured associate professor at Texas Wesleyan University and Area III

Director at NCSBN, was inducted as a Fellow of the American Association of Nurse Anesthesiology (AANA) Aug. 3, 2024.

Castillo's career is distinguished by his commitment to advancing the field of nurse anesthesia through education, research and leadership. At Texas Wesleyan University, he has significantly contributed to nurse anesthesia students' academic and professional growth. His roles as Area III Director at NCSBN and as APRN seat on the [Florida Board of Nursing](#) highlight his dedication to improving regulatory standards and practices in nursing.

The AANA Fellowship recognizes individuals who have substantially contributed to the nurse anesthesia profession. Castillo's induction is a testament to his exceptional achievements and influence in the field. This honor reflects his unwavering dedication to excellence in nurse anesthesia education and practice. 🌟



News & Notes highlights NCSBN member achievements and updates as well as individual leadership and staff accomplishments.

### Have news to share?

Send your *News & Notes* submissions via [email](#).



## Grant Funding for Your Work



The NCSBN Grant Program awards up to \$300,000 for research projects that advance nursing policy and regulation.

## Submission Deadlines:

Oct. 4, 2024 & April 4, 2025

[Learn More](#)

## Speed Round

Get to know NCSBN staff:



## Jenifer Kohl

Manager, Nursing Regulation

### What do you do at NCSBN?

My role as the manager within NCSBN's Nursing Regulation Division encompasses many things. My work consists of anything from answering queries from staff or members, to creating PowerPoint presentations, managing the NCSBN Grant Program, scheduling meetings to compiling board reports. I work directly for NCSBN Chief Nursing Officer Maryann Alexander, PhD, RN, FAAN, and as a general rule of thumb, if she's working on something, I've worked on it in one way or another.

### What are the best and most challenging aspects of your job?

Everyday there is something new to work on. We have many projects running at all points of the year so that answer is to both portions of the question! I enjoy the variety of work that comes my way, but it can be challenging keeping everything on track and all of the details in order.

### If you weren't working at NCSBN, what would your dream job be?

My dream is to not have to work! Don't get me wrong, I enjoy staying active and having things to accomplish, but the necessity of it in today's world is what gives me the reality check of not trying to become a full-time self-employed seamstress. My current hobby is sewing clothing for myself and in a perfect world that's where I'd be working. At home, keeping my own hours and only sewing projects that I wanted to work on. 🌟

# SAVE THE DATE

## 2025 NCSBN Annual Meeting

Aug. 13–15, 2025 | Chicago

For more information about  
upcoming events, visit  
[ncsbn.org/events](https://ncsbn.org/events)

[VIEW UPCOMING EVENTS](#)