

Select Committee on Health Care Workforce Innovation

Wednesday, March 19, 2014 11:30 AM - 1:30 PM Reed Hall (102 HOB)

Committee Meeting Notice HOUSE OF REPRESENTATIVES

Select Committee on Health Care Workforce Innovation

Start Date and Time:

Wednesday, March 19, 2014 11:30 am

End Date and Time:

Wednesday, March 19, 2014 01:30 pm

Location:

Reed Hall (102 HOB)

Duration:

2.00 hrs

Consideration of the following bill(s):

HB 1059 Nursing Education Programs by Pigman HB 1275 Physician Assistants by Ahern

Pursuant to rule 7.12, the deadline for amendments to bills on the agenda by non-appointed members is 6:00 p.m., Tuesday, March 18, 2014.

By request of the chair, all committee members are asked to have amendments to bills on the agenda submitted to staff by 6:00 p.m., Tuesday, March 18, 2014.

03/17/2014 9:34:05AM Leagis ® Page 1 of 1

HOUSE OF REPRESENTATIVES STAFF ANALYSIS

BILL #:

HB 1275

Physician Assistants

SPONSOR(S): Ahern and others

TIED BILLS:

IDEN./SIM. BILLS:

REFERENCE	ACTION	ANALYST	STAFF DIRECTOR or BUDGET/POLICY CHIEF		
Select Committee on Health Care Workforce Innovation		Dunn 📿	Calamas 🕊		
2) Health Care Appropriations Subcommittee					
3) Health & Human Services Committee					

SUMMARY ANALYSIS

A physician assistant (PA) is a person licensed to perform health care services, in the specialty areas in which he or she has been trained, delegated by a supervising physician. PAs are governed by the respective physician practice acts for medical doctors (MDs) and doctors of osteopathic medicine (DOs), because PAs may only practice under the supervision of a MD or DO.

A PA practices under the delegated authority of a supervising physician. A physician supervising a PA must be qualified in the medical area(s) in which the PA is to perform health care tasks, and is responsible and liable for the performance and acts and omissions of the PA.

A supervising physician may delegate to a PA the authority to prescribe or dispense any medicinal drug used in the supervisory physician's practice. To delegate prescribing authority, the supervising physician must notify the Department of Health of intent to delegate prescribing authority to a PA, and the PA must file with the department a signed affidavit that he or she has completed a minimum of 10 continuing medical education hours in the specialty practice area each renewal period.

This bill amends chapters 458 and 459, F.S., to streamline administrative procedures for PAs seeking prescribing authority and for PA applicants seeking licensure. Instead of requiring PAs to submit a signed affidavit to attest to the completion of required continuing education in order to obtain prescribing privileges, the bill requires PAs to certify to the completion of the continuing education. The requirement for PA applicants to give a sworn statement of prior felony convictions or previous license denials or revocations when applying for licensure is changed to require a statement of such actions. The bill removes the requirement that PA applicants submit two letters of recommendation to be eligible for licensure.

The bill does not have a fiscal impact on state government or local governments.

The bill provides an effective date of July 1, 2014.

This document does not reflect the intent or official position of the bill sponsor or House of Representatives. STORAGE NAME: h1275.SCHCWI.DOCX

FULL ANALYSIS

I. SUBSTANTIVE ANALYSIS

A. EFFECT OF PROPOSED CHANGES:

Background

Physician Assistants

A physician assistant (PA) is a person licensed to perform health care services, in the specialty areas in which he or she has been trained, delegated by a supervising physician. Currently, there are 5,874 instate, and 713 out-of-state, active licensed PAs in Florida.

PAs are governed by the respective physician practice acts for medical doctors (MDs) and doctors of osteopathic medicine (DOs), because PAs may only practice under the supervision of a MD or DO.³ Specifically, sections 458.347(7) and 459.022(7), F.S., govern the licensure of PAs. PAs are regulated by the Florida Council on Physician Assistants (Council) in conjunction with either the Board of Medicine for PAs licensed under ch. 458, F.S., or the Board of Osteopathic Medicine for PAs licensed under ch. 459, F.S.

An applicant for a PA license must apply to the Department of Health (department). The department must issue a license to a person certified by the Council as having met all of the following requirements:

- Is at least 18 years of age;
- Has satisfactorily passed a proficiency examination by an acceptable score established by the National Commission on Certification of Physician Assistants;⁴
- Has completed an application form and remitted an application fee not to exceed \$300 as set by the boards:
- Holds a certificate of completion of a PA training program, including certain course descriptions relating to pharmacotherapy if the PA applicant seeks prescribing authority;
- Provides a sworn statement of any prior felony convictions;
- Provides a sworn statement of any previous revocation or denial of licensure or certification in any state; and
- Provides two letters of recommendation.

A PA's license must be renewed biennially. Each renewal must include:

- A renewal fee not to exceed \$500 as set by the boards;
- A sworn statement of no felony convictions in the previous 2 years; and
- Proof of completion of 100 hours of continuing medical education within the biennial period or a current certificate issued by the National Commission on Certification of Physician Assistants.

Council on Physician Assistants

The Council was created in 1995 to recommend the licensure requirements (including educational and training requirements) for PAs, establish a formulary of drugs that PAs are prohibited to prescribe, and

STORAGE NAME: h1275.SCHCWI.DOCX DATE: 3/17/2014

¹ Section 458.347(1), F.S.

² E-mail from Florida Department of Health to the Health and Human Services Committee (Nov. 7, 2013) (on file with committee staff).

³ Chapters 458 and 459, F.S.

⁴ The proficiency measure for the exam is a scaled score; therefore, what is considered a passing score fluctuates with each administration. National Commission on Certification of Physician Assistants, *Exam Development and Scoring*, available at http://www.nccpa.net/Scoring (last visited Mar. 17, 2014)

develop rules to ensure that the continuity of a physician's supervision over a PA is maintained in each practice setting throughout the state.⁵ The Council does not discipline PAs. Disciplinary action is the responsibility of either the Board of Medicine or the Board of Osteopathic Medicine (boards).

Supervising Physician

A PA practices under the delegated authority of a supervising physician. A physician supervising a PA must be qualified in the medical area(s) in which the PA is to perform health care tasks and is responsible and liable for the performance and acts and omissions of the PA.⁶ A physician is not allowed to supervise more than four PAs at any one time.⁷

Supervision is responsible supervision and control that requires the easy availability or physical presence of the physician for consultation and direction of actions performed by a PA.⁸ Easy availability includes the ability to use telecommunication.

The respective board is delegated the authority to establish by rule what constitutes responsible supervision. Responsible supervision, defined by rule, is the ability of the supervising physician to responsibly exercise control and provide direction over the services or tasks performed by the PA.⁹ In providing supervision, the supervising physician is required to periodically review the PA's performance. In determining whether supervision is adequate, the following factors must be considered:¹⁰

- The complexity of the task;
- The risk to the patient;
- The background, training and skill of the PA;
- The adequacy of the direction in terms of its form;
- The setting in which the tasks are performed;
- The availability of the supervising physician;
- The necessity for immediate attention; and
- The number of other persons that the supervising physician must supervise.

The boards are authorized to adopt by rule the general principles that supervising physicians must use in developing the scope of practice of a PA under direct and indirect supervision. Direct supervision refers to the physical presence of the supervising physician on the premises so that the supervising physician is immediately available to the PA when needed; whereas, indirect supervision refers to the easy availability of the supervising physician, such that the supervising physician must be within reasonable physical proximity. 12

Under current regulations, the decision to allow the PA to perform a task or procedure under direct or indirect supervision is made by the supervising physician based on reasonable medical judgment regarding the probability of morbidity and mortality to the patient. Additionally, it is the responsibility of the supervising physician to be certain that the PA is knowledgeable and skilled in performing the tasks and procedures assigned.

⁵ Sections 458.347(9) and 459.022(9), F.S.

⁶ Section 458.347(3), F.S.; Fla. Admin. Code Ann. r. 64B8-30.012.

⁷ Id.

⁸ Section 458.347(1)(f), F.S.

⁹ Fla. Admin. Code Ann. r. 64B8-30.001.

¹⁰ *Id*.

¹¹ Sections 458.347(4)(a); section 459.022(4)(a), F.S.

¹² Fla. Admin. Code Ann. r. 64B8-30.012; Fla. Admin. Code Ann. r. 64B15-6.010.

¹³ *Id.* Fla. Admin. Code Ann. r. 64B8-30.012; Fla. Admin. Code Ann. r. 64B15-6.010.

Delegable Tasks

A supervisory physician may delegate to a PA the authority to:

- Prescribe or dispense any medicinal drug used in the supervisory physician's practice.
- Order medicinal drugs for a hospitalized patient of the supervising physician. 15
- Administer a medicinal drug under the direction and supervision of the physician.

Currently, PAs are prohibited from prescribing controlled substances (Schedules I-V under s. 893.03, F.S.); general, spinal, or epidural anesthetics; and radiographic contrast materials. 17 However, physicians may delegate to PAs the authority to order controlled substances in facilities licensed under ch. 395, F.S. (hospitals, ambulatory surgical centers, or mobile surgical facilities).

Determination of the final diagnosis must be performed by the supervising physician, and may not be delegated to a PA. 18 Per rule, the following tasks are not permitted to be performed under indirect supervision:19

- Routine insertion of chest tubes and removal of pacer wires or left atrial monitoring lines;
- Performance of cardiac stress testing;
- Routine insertion of central venous catheters:
- Injection of intrathecal medication without prior approval of the supervising physician;
- Interpretation of laboratory tests, X-ray studies and EKG's without the supervising physician interpretation and final review; and
- Administration of general, spinal, and epidural anesthetics; this may be performed under direct supervision only by PA who graduated from a board-approved anesthesiology assistants program.

Effect of Proposed Changes

This bill amends chapters 458 and 459, F.S., to streamline administrative procedures for PAs seeking prescribing authority and for PA applicants seeking licensure. Instead of requiring PAs to submit a signed affidavit to attest to the completion of required continuing education in order to obtain prescribing privileges, the bill requires PAs to certify to the completion of the continuing education. The requirement for PA applicants to give a sworn statement of prior felony convictions or previous license denials or revocations when applying for licensure is changed to require a statement of such actions. The bill removes the requirement that PA applicants submit two letters of recommendation to be eligible for licensure.

The bill provides an effective date of July 1, 2014.

B. SECTION DIRECTORY:

Section 1. Amends s. 458.347, F.S., relating to physician assistants.

Section 2. Amends s. 459.022, F.S., relating to physician assistants.

Section 3. Provides an effective date of July 1, 2014.

¹⁴ Sections 458.347(4)(e), F.S.; section 459.022(4)(e), F.S. The supervising physician must notify the department of intent to delegate prescribing authority, and the PA must file with the department a signed affidavit that he or she has completed a minimum of 10 continuing medical education hours in the specialty practice area each renewal period. Id. The PA must identify to the patient as a PA and inform the patient of the right to see the physician. Id. The PA must note the prescription or dispensing of medication in the appropriate medical record. *Id.* ¹⁵ Sections 459 347(4)(2)

Sections 458.347(4)(f); section 459.022(4)(f), F.S.

¹⁶ Fla. Admin. Code Ann. r. 64B8-30.008; Fla. Admin. Code Ann. r. 64B15-6.0038.

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¹⁸ *Id*.

¹⁹ *Id*.

II. FISCAL ANALYSIS & ECONOMIC IMPACT STATEMENT

A.	FISCAL IMPACT ON STATE GOVERNMENT:
	1. Revenues: None.
	2. Expenditures: None.
B.	FISCAL IMPACT ON LOCAL GOVERNMENTS:
	1. Revenues: None.
	2. Expenditures: None.
C.	DIRECT ECONOMIC IMPACT ON PRIVATE SECTOR: None.
D.	FISCAL COMMENTS:
	None.
	III. COMMENTS
A.	CONSTITUTIONAL ISSUES:
	Applicability of Municipality/County Mandates Provision: Not applicable. This bill does not appear to affect county or municipal governments.
	2. Other: None.
B.	RULE-MAKING AUTHORITY: None.
C.	DRAFTING ISSUES OR OTHER COMMENTS: None.
	IV. AMENDMENTS/ COMMITTEE SUBSTITUTE CHANGES

STORAGE NAME: h1275.SCHCWI.DOCX DATE: 3/17/2014

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A bill to be entitled

An act relating to physician assistants; amending ss. 458.347 and 459.022, F.S.; revising circumstances under which a physician assistant is authorized to prescribe or dispense medication; revising application requirements for licensure as a physician assistant and license renewal; providing an effective date.

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Be It Enacted by the Legislature of the State of Florida:

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Section 1. Paragraph (e) of subsection (4) and paragraphs (a) and (c) of subsection (7) of section 458.347, Florida Statutes, are amended to read:

458.347 Physician assistants.-

- (4) PERFORMANCE OF PHYSICIAN ASSISTANTS.
- (e) A supervisory physician may delegate to a fully licensed physician assistant the authority to prescribe or dispense any medication used in the supervisory physician's practice unless such medication is listed on the formulary created pursuant to paragraph (f). A fully licensed physician assistant may only prescribe or dispense such medication under the following circumstances:
- 1. A physician assistant must clearly identify to the patient that he or she is a physician assistant. Furthermore, the physician assistant must inform the patient that the patient has the right to see the physician prior to any prescription

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being prescribed or dispensed by the physician assistant.

- 2. The supervisory physician must notify the department of his or her intent to delegate, on a department-approved form, before delegating such authority and notify the department of any change in prescriptive privileges of the physician assistant. Authority to dispense may be delegated only by a supervising physician who is registered as a dispensing practitioner in compliance with s. 465.0276.
- 3. The physician assistant must certify to file with the department a signed affidavit that he or she has completed a minimum of 10 continuing medical education hours in the specialty practice in which the physician assistant has prescriptive privileges with each licensure renewal application.
- 4. The department may issue a prescriber number to the physician assistant granting authority for the prescribing of medicinal drugs authorized within this paragraph upon completion of the foregoing requirements. The physician assistant shall not be required to independently register pursuant to s. 465.0276.
- 5. The prescription must be written in a form that complies with chapter 499 and must contain, in addition to the supervisory physician's name, address, and telephone number, the physician assistant's prescriber number. Unless it is a drug or drug sample dispensed by the physician assistant, the prescription must be filled in a pharmacy permitted under chapter 465 and must be dispensed in that pharmacy by a pharmacist licensed under chapter 465. The appearance of the

Page 2 of 7

prescriber number creates a presumption that the physician assistant is authorized to prescribe the medicinal drug and the prescription is valid.

- 6. The physician assistant must note the prescription or dispensing of medication in the appropriate medical record.
 - (7) PHYSICIAN ASSISTANT LICENSURE.-

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- (a) Any person desiring to be licensed as a physician assistant must apply to the department. The department shall issue a license to any person certified by the council as having met the following requirements:
 - 1. Is at least 18 years of age.
- 2. Has satisfactorily passed a proficiency examination by an acceptable score established by the National Commission on Certification of Physician Assistants. If an applicant does not hold a current certificate issued by the National Commission on Certification of Physician Assistants and has not actively practiced as a physician assistant within the immediately preceding 4 years, the applicant must retake and successfully complete the entry-level examination of the National Commission on Certification of Physician Assistants to be eligible for licensure.
- 3. Has completed the application form and remitted an application fee not to exceed \$300 as set by the boards. An application for licensure made by a physician assistant must include:
 - a. A certificate of completion of a physician assistant Page 3 of 7

training program specified in subsection (6).

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- b. A sworn statement of any prior felony convictions.
- c. A sworn statement of any previous revocation or denial of licensure or certification in any state.

d. Two letters of recommendation.

- d.e. A copy of course transcripts and a copy of the course description from a physician assistant training program describing course content in pharmacotherapy, if the applicant wishes to apply for prescribing authority. These documents must meet the evidence requirements for prescribing authority.
- (c) The license must be renewed biennially. Each renewal must include:
 - 1. A renewal fee not to exceed \$500 as set by the boards.
- 2. A sworn statement of no felony convictions in the previous 2 years.
- Section 2. Paragraph (e) of subsection (4) and paragraphs (a) and (b) of subsection (7) of section 459.022, Florida Statutes, are amended to read:

459.022 Physician assistants.-

- (4) PERFORMANCE OF PHYSICIAN ASSISTANTS.-
- (e) A supervisory physician may delegate to a fully licensed physician assistant the authority to prescribe or dispense any medication used in the supervisory physician's practice unless such medication is listed on the formulary created pursuant to s. 458.347. A fully licensed physician assistant may only prescribe or dispense such medication under

Page 4 of 7

the following circumstances:

- 1. A physician assistant must clearly identify to the patient that she or he is a physician assistant. Furthermore, the physician assistant must inform the patient that the patient has the right to see the physician prior to any prescription being prescribed or dispensed by the physician assistant.
- 2. The supervisory physician must notify the department of her or his intent to delegate, on a department-approved form, before delegating such authority and notify the department of any change in prescriptive privileges of the physician assistant. Authority to dispense may be delegated only by a supervisory physician who is registered as a dispensing practitioner in compliance with s. 465.0276.
- 3. The physician assistant must certify to file with the department a signed affidavit that she or he has completed a minimum of 10 continuing medical education hours in the specialty practice in which the physician assistant has prescriptive privileges with each licensure renewal application.
- 4. The department may issue a prescriber number to the physician assistant granting authority for the prescribing of medicinal drugs authorized within this paragraph upon completion of the foregoing requirements. The physician assistant shall not be required to independently register pursuant to s. 465.0276.
- 5. The prescription must be written in a form that complies with chapter 499 and must contain, in addition to the supervisory physician's name, address, and telephone number, the

Page 5 of 7

131 physician assistant's prescriber number. Unless it is a drug or 132 drug sample dispensed by the physician assistant, the 133 prescription must be filled in a pharmacy permitted under 134 chapter 465, and must be dispensed in that pharmacy by a 135 pharmacist licensed under chapter 465. The appearance of the prescriber number creates a presumption that the physician 136 137 assistant is authorized to prescribe the medicinal drug and the 138 prescription is valid.

- 6. The physician assistant must note the prescription or dispensing of medication in the appropriate medical record.
 - (7) PHYSICIAN ASSISTANT LICENSURE.

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- (a) Any person desiring to be licensed as a physician assistant must apply to the department. The department shall issue a license to any person certified by the council as having met the following requirements:
 - 1. Is at least 18 years of age.
- 2. Has satisfactorily passed a proficiency examination by an acceptable score established by the National Commission on Certification of Physician Assistants. If an applicant does not hold a current certificate issued by the National Commission on Certification of Physician Assistants and has not actively practiced as a physician assistant within the immediately preceding 4 years, the applicant must retake and successfully complete the entry-level examination of the National Commission on Certification of Physician Assistants to be eligible for licensure.

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3. Has completed the application form and remitted an application fee not to exceed \$300 as set by the boards. An application for licensure made by a physician assistant must include:

- a. A certificate of completion of a physician assistant training program specified in subsection (6).
 - b. A sworn statement of any prior felony convictions.
- c. A sworn statement of any previous revocation or denial of licensure or certification in any state.

d. Two letters of recommendation.

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- <u>d.e.</u> A copy of course transcripts and a copy of the course description from a physician assistant training program describing course content in pharmacotherapy, if the applicant wishes to apply for prescribing authority. These documents must meet the evidence requirements for prescribing authority.
- (b) The licensure must be renewed biennially. Each renewal must include:
 - 1. A renewal fee not to exceed \$500 as set by the boards.
- 2. A sworn statement of no felony convictions in the previous 2 years.
 - Section 3. This act shall take effect July 1, 2014.

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COMMITTEE/SUBCOMMITTEE AMENDMENT Bill No. HB 1275 (2014)

Amendment No.

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COMMITTEE/SUBCOMMITTEE	ACTION
ADOPTED	(Y/N)
ADOPTED AS AMENDED	(Y/N)
ADOPTED W/O OBJECTION	(Y/N)
FAILED TO ADOPT	(Y/N)
WITHDRAWN	(Y/N)
OTHER	

Committee/Subcommittee hearing bill: Select Committee on Health Care Workforce Innovation

Representative Ahern offered the following:

Amendment (with title amendment)

Remove lines 11-14 and insert:

Section 1. Subsection (3), paragraph (e) of subsection (4), and paragraphs (a) and (c) of subsection (7) of section 458.347, Florida Statutes, are amended to read:

458.347 Physician assistants.-

or group of physicians supervising a licensed physician assistant must be qualified in the medical areas in which the physician assistant is to perform and shall be individually or collectively responsible and liable for the performance and the acts and omissions of the physician assistant. A physician may not supervise more than eight four currently licensed physician

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COMMITTEE/SUBCOMMITTEE AMENDMENT

Bill No. HB 1275 (2014)

Amendment No.

assistants at any one time. A physician supervising a physician assistant pursuant to this section may not be required to review and cosign charts or medical records prepared by such physician assistant.

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Remove lines 94-97 and insert:

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Section 2. Subsection (3), paragraph (e) of subsection (4), and paragraphs (a) and (b) of subsection (7) of section 459.022, Florida Statutes, are amended to read:

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459.022 Physician assistants.-

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(3) PERFORMANCE OF SUPERVISING PHYSICIAN.—Each physician or group of physicians supervising a licensed physician assistant must be qualified in the medical areas in which the physician assistant is to perform and shall be individually or collectively responsible and liable for the performance and the

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not supervise more than <u>eight</u> four currently licensed physician assistants at any one time. A physician supervising a physician

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assistant pursuant to this section may not be required to review and cosign charts or medical records prepared by such physician

acts and omissions of the physician assistant. A physician may

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assistant.

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TITLE AMENDMENT

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COMMITTEE/SUBCOMMITTEE AMENDMENT

Bill No. HB 1275 (2014)

Amendment No.

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	Ren	ove	line	3 ar	nd inse	ert:						
458.	347	and	459.	022,	F.S.;	increasing	g the	number	of	lic	cense	ed
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Published On: 3/18/2014 6:32:24 PM

HOUSE OF REPRESENTATIVES STAFF ANALYSIS

BILL #: HB 1059 Nursing Education Programs

SPONSOR(S): Pigman

TIED BILLS: IDEN./SIM. BILLS: SB 1036

REFERENCE	ACTION	ANALYST	STAFF DIRECTOR or BUDGET/POLICY CHIEF
Select Committee on Health Care Workforce Innovation		Dunn	Calamas
2) Health Care Appropriations Subcommittee			
3) Education Committee			

SUMMARY ANALYSIS

In 2009, the Legislature determined that the state had a growing nursing workforce shortage and that there was an insufficient number of nursing programs in the state due to strict program requirements established by the Board of Nursing. That year, the Legislature reformed regulation over nursing programs by removing the Board of Nursing's discretion to approve nursing programs and the board's rulemaking authority related to such programs. Instead, the Legislature codified the requirements for becoming an approved program. The law also included an accountability mechanism. Any program with two consecutive years of National Council Licensure Examination (NCLEX) passage rates 10 percent below the national average was required to be placed on probation. A nursing program's subsequent failure to meet or exceed that threshold in the next two years would result in termination of the program.

To monitor progress of the regulatory reform, the Office of Program Policy Analysis and Government Accountability was charged with conducting a five-year implementation study. The study found the changes to the nursing program approval process led to rapid increases in the number of approved programs and available seats for students. However, most of the programs approved after 2009 had NCLEX passages rates below 10 percent of the national average.

To hold nursing programs more accountable, this bill amends the Florida Nurse Practice Act to require nursing education programs that prepare students to be registered nurses (RNs) to be accredited by a nationally recognized nursing accrediting agency. The bill establishes a timeline within which certain programs must become accredited.

The bill authorizes the Board of Nursing to adopt rules relating to documenting the accreditation of nursing education programs. The bill removes the requirement that the Office of Program Policy Analysis and Government Accountability participate in an implementation study of the reformed regulation of the nursing programs.

In addition, the bill revises the definition of "clinical training" to include clinical simulation and removes the limit on clinical simulation training. The bill revises the definition of "practical nursing" to include teaching of general principles of health and wellness to the public and to students other than nursing students. The bill exempts nurses with specialty health care certification from continuing education required at biennial license renewal.

The bill has a fiscal impact on public colleges and universities that will have to obtain nursing program accreditation for their RN nursing programs. The bill has no fiscal impact on local governments.

The bill provides an effective date of July 1, 2014.

This document does not reflect the intent or official position of the bill sponsor or House of Representatives. STORAGE NAME: h1059.SCHCWI

FULL ANALYSIS

I. SUBSTANTIVE ANALYSIS

A. EFFECT OF PROPOSED CHANGES:

Background

Nursing Licensure

The Nurse Practice Act, chapter 464, F.S., governs the licensure and regulation of nurses in Florida. The Department of Health (DOH) is the licensing agency for nurses, and the Board of Nursing (BON) is the regularity authority. The BON is comprised of 13 members appointed by the Governor and confirmed by the Senate.¹

Applicants may apply to the DOH to be licensed as a registered nurse (RN) or a licensed practical nurse (LPN). RNs are licensed to practice "professional nursing;" whereas, LPNs are licensed to practice "practical nursing." After graduating from a BON approved nursing program or equivalent, applicants must submit an application, pay a fee, submit information for a criminal background check, and pass a licensure exam. For the exam requirement, the DOH uses the National Council Licensure Examination (NCLEX), developed by the National Council of State Boards of Nursing.

License renewal is required biennially.⁴ Each renewal period, an RN must document completion of one hour of continuing education for each calendar month of the licensure cycle.⁵ As part of the total hours required, all licensees must complete a two-hour course on the prevention of medical errors.⁶ Beginning with the biennium ending in 2015, each licensee shall complete a two hour course on the laws and rules that govern the practice of nursing in Florida.⁷

Nurse Specialty Certification

Specialty certification is a process by which a nongovernmental agency validates, based upon predetermined standards, an individual nurse's qualifications for practice in a defined functional or clinical area of nursing. Certifications are intended to raise nursing standards and are earned through an assessment process.

Periodic recertification is required in order to maintain a specialty certification. Recertification typically requires proof of a designated number of clinic hours in the specialty practice, testing, professional competency (continuing education), or some combination of the three.¹⁰

¹ Section 464.004, F.S. Board membership consists of seven registered nurses, three licensed practical nurses, and three lay persons without any connection to a health care facility. *Id.*

² Section 464.003, F.S. "Practice of professional nursing" means the performance of acts requiring substantial specialized knowledge, judgment, and nursing skill based upon applied principles of psychological, biological, physical, and social sciences. *Id.* "Practice of practical nursing" means the performance of selected acts and being responsible and accountable for making decisions that are based upon the individual's educational preparation and experience in nursing. *Id.*

³ Section 464.008, F.S. The state also has a licensure by endorsement provision for nurses currently licensed and practicing in another state. Section 464.009, F.S.

^⁴ Section 464.013, F.S.

⁵ Fla. Admin. Code Ann. r. 64B9-5.002 (2014).

⁶ Fla. Admin. Code Ann. r. 64B9-5.011.

⁷ Fla. Admin. Code Ann. r. 64B9-5.013.

⁸ American Association of Critical-Care Nurses, *What is Nurse Certification?*, available at http://www.aacn.org/wd/certifications/content/consumer-whatiscert.pcms?menu=certification (last visited Mar. 12, 2014).

⁹ *Id.*

¹⁰ See, e.g., American Nurses Credentialing Center, 2014 Certification Renewal Requirements, available at http://www.nursecredentialing.org/RenewalRequirements.aspx (last visited Mar. 12, 2014). STORAGE NAME: h1059.SCHCWI

The National Commission for Certifying Agencies accredits sixteen nursing certification programs, for example the American Nurses Credentialing Center.¹¹ The individual certification programs offer specialty certification in a wide range of areas, such as acute care, ambulatory care, and clinical care.¹²

In Florida, RNs are not required to obtain specialty certification.¹³ Nurses may voluntarily seek certification, or certification may be required by an employer.

Nursing Education Programs

Nursing programs in Florida are offered by: public school districts, Florida colleges, state universities, private institutions licensed by the Commission for Independent Education, private institutions that are members of the Independent Colleges and Universities of Florida (ICUF), and Pensacola Christian College, which is statutorily authorized by s. 1005.06(1)(e), F.S.¹⁴

An educational institution may apply to the DOH to establish a nursing program. The DOH reviews the applications for completeness. The application must document compliance with the following program standards: faculty qualifications, clinical training requirements, faculty-to-student ratios, signed agreements with clinical training sites in the curriculum plan, and curriculum and instruction requirements.¹⁵

Applications deemed complete are forwarded to the BON for approval. Within 90 days of receipt of the application from the DOH, the BON must approve the application or notify the applicant of the intent to deny the application. If noticed of the intent to deny, the applicant may request a hearing under chapter 120, F.S.¹⁶

Currently, 50 percent of an associate's degree professional nursing education program and 40 percent of a bachelor's degree professional nursing education program must consist of clinical training.¹⁷

Clinical simulation is the practice of recreating a clinical scenario in an artificial setting. Simulation training allows deliberate practice in a controlled environment and allows students to practice a procedure prior to performance on a live patient. Advances in technology have created the possibility of clinical simulation being used as a substitute for actual clinical experience.¹⁸ Under Florida law, no more than 25 percent of a program's clinical training may consist of clinical simulation.¹⁹

¹¹ Institute for Credentialing Excellence, *NCCA-Accredited Certification Programs*, available at http://www.credentialingexcellence.org/p/cm/ld/fid=121 (last visited Mar. 12, 2014).

¹³ Advanced Registered Nurse Practitioners are a special category of registered nurses. The Nurse Practice Act requires specialty certification in order to practice as an Advanced Registered Nurse Practitioner. See s. 464.012, F.S.

¹⁴ This section of law exempts schools from the Commission for Independent Education's licensure requirements if the institution: had been so exempted prior to 2001; is incorporated in this state; the institution's credits or degrees are accepted for credit by at least three colleges that are fully accredited by an agency recognized by the U.S. Department of Education; the institution was exempt under that category prior to July 1, 1982; and the institution does not enroll any students who receive state or federal financial aid. Section 1005.06(1)(e), F.S. Only two institutions in Florida, Pensacola Christian College and Landmark Baptist College, are subject to this exemption. Landmark Baptist College does not offer a nursing program.

¹⁵ Section 464.019(1), F.S.

¹⁶ Section 464.019(2), F.S.

¹⁷ Section 464.019(1)(b), F.S.

¹⁸ Frank D. Hicks et al., The Effect of High-Fidelity Simulation on Nursing Students' Knowledge and Performance: A Pilot Study, 1, (2009), available at https://www.ncsbn.org/09_SimulationStudy_Vol40_web_with_cover.pdf (last visited Mar. 12, 2014).

¹⁹ Section 464.019(1)(c), F.S. **STORAGE NAME**: h1059.SCHCWI

Clinical Simulation

Clinical simulation is the practice of recreating a clinical scenario in an artificial setting. Simulation training allows deliberate practice in a controlled environment and allows students to practice a procedure prior to performance on a live patient. Advances in technology have created the opportunity for clinical simulation to be used as a substitute for actual clinical experience. The ability to substitute clinical simulation for clinical training is useful for nursing programs dealing with a limited number of clinical sites or clinical sites that have inadequate learning opportunities. Advantages of clinical simulation include:²¹

- No direct risk to patients;
- The opportunity for repetitive practice;
- Team training;
- Standardized curriculums;
- Reflective learning by facilitated debriefing of scenarios and video feedback; and
- The potential to decrease the number and effect of errors through crisis resource management training.

A disadvantage to clinical simulation is difficulty in replicating reality. Equipment is often unable to imitate actual physiological signs or symptoms. An artificial environment with mannequins and standardized patients has the potential to eliminate emotional stress that would be present in a real situation. Trainee perception of the simulation may cause students to react differently due to the lack of consequences on patient safety.²²

The body of literature on the effectiveness of clinical simulation is growing. A recent review of studies published between 1999 and January 2009, found that medium and/or high fidelity simulation using mannequins is an effective teaching and learning method when best practice guidelines are used.²³

Competition for clinical training spots in Florida has increased significantly.²⁴ A recent Miami Herald article reported that some nursing programs have begun paying for access to hospitals for clinical training slots for students.²⁵ On-site clinical training is limited by the number of available sites and the hours the sites are available, which makes training through clinical simulation a valuable alternative.

Nursing Education Program Reform

Prior to 2009, the BON had additional statutory authority over nursing program approval, including the ability to adopt rules related to educational objectives, faculty qualifications, curriculum guidelines, administrative procedures, and clinical training.²⁶

²⁰ Frank D. Hicks et al., *The Effect of High-Fidelity Simulation on Nursing Students' Knowledge and Performance: A Pilot Study*, 1, (2009), *available at* https://www.ncsbn.org/09_SimulationStudy_Vol40_web_with_cover.pdf (last visited Mar. 12, 2014).

²¹ *Id.* at 1-2.

²² *Id.* at 2-3.

²³ Robyn P. Cant & Simon J. Cooper, *Simulation-based Learning in Nurse Education: Systematic Review*, 66 J. ADVANCED NURSING 3, 3 (2009). See Denise Ellis et al., *Hospital, Simulation Center, and Teamwork Training for Eclampsia Management: A Randomized Controlled Trial*, 111 OBSTETRICS AND GYNECOLOGY 723, 723 (2008), for recent study of 132 students finding revealing no differences in clinical versus simulated training. *But cf.* Frank D. Hicks et al., *supra* note 20 (finding inconclusive results, with clinical students and simulation students having different strengths and weaknesses).

²⁴ Michael Vasquez, *Trend of Pay-to-play Medical Training Worries Critics*, March 8, 2014), *available at*http://www.miamiherald.com/2014/03/08/3983064/trend-of-pay-to-play-medical-training.html (last visited Mar. 12, 2014).

²⁶ Florida House of Representatives, Government Accountability Act Council, 2009 Legislative Bill Analysis at 5, CS/CS/HB 1209, April 2, 2009, on file with committee staff. STORAGE NAME: h1059.SCHCWI

However, in 2009, the Florida Legislature recognized that the state had a nursing shortage and that the shortage was projected to grow significantly. In 2007, demand for RNs exceeded supply by 10,850 RNs.²⁷ The Florida Center for Nursing predicted a statewide RN shortage of 52,209 nurses by 2020.²⁸ The Legislature identified a shortage of available seats in nursing programs for qualified applicants. For academic year 2007-2008, over 12,500 qualified applicants in Florida were turned away because schools were at capacity, and 68 percent of qualified RN applicants were turned away.

To address the issue of program seat capacity, the 2009 Legislature codified the requirements for becoming an approved nursing program, removing the discretion and rulemaking authority from the BON.³⁰ The new law removed BON oversight of faculty requirements, student to faculty ratios, clinical training and clinical simulation requirements, and curriculum and instruction requirements. The law added transparency provisions and a measure to hold programs accountable via NCLEX passage rates.

The new law increased transparency by requiring nursing programs to submit an annual report to the BON, which the BON was required to use to publish program data to its website. The BON was required to publish new programs' applications; program accreditation status, including the accrediting agency: program probationary status: each program's NCLEX passage rate: program's student retention rates; and the national average passage rate for the NCLEX.

The legislation also included a mechanism for holding accountable programs that consistently post poor national exam passage rates. The provision required that programs with two consecutive years of national exam passage rates 10 percent below the national average be placed on probation by the BON. If a program placed on probation pursuant to this provision did not achieve the required passage rate for any one calendar year during the two calendar years following its placement on probation, the BON would be required to terminate the program.³¹

The Legislature charged the Office of Program Policy Analysis and Government Accountability (OPPAGA) with conducting a five-year implementation study of the effects of the 2009 changes.³² OPPAGA issued a report in 2014, which found that the changes to the nursing program approval process led to rapid increases in the number of approved programs and available seats for students. Since 2009, 231 new programs have been approved, and over 29,500 seats have been added.³³ From academic years 2008-2009 to 2012-2013, the number of graduating students increased by 30 percent.³⁴ However, most of the programs approved after 2009 had poor passage rates on the NCLEX. Of the programs approved since 2009, 73 percent had exam passage rates 10 percent below the national average passing rate.35

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²⁷ Florida Center for Nursing. Forecasting Supply, Demand, and Shortage of RNs and LPNs in Florida, 2007-2020, 6 (July 2008), available at http://www.flcenterfornursing.org/DigitalLibrary.aspx?Command=Core Download&EntryId=193 (last viewed March 13, 2014)

²⁸ *Id.* at 6.

²⁹ Florida Center for Nursing. 2008 Nursing Education Program Annual Report and Workforce Survey, 16 (January 2009), available at http://www.flcenterfornursing.org/DigitalLibrary.aspx?Command=Core_Download&EntryId=8 (last viewed March 13, 2014).

³⁰ Ch. 2009-168, Laws of Fla.

³¹ Section 464.019(6), F.S.

³² Office of Program Policy and Government Accountability, Florida Legislature, Florida's Nursing Education Programs Continued to Expand in 2013, While Licensure Exams Passage Rates of New Programs Declined, Report No. 14-03 at 1, available at http://www.oppaga.state.fl.us/MonitorDocs/Reports/pdf/1403rpt.pdf (last visited Mar. 12, 2014).

³³ Id. at 3-4. Only 112 of the newly approved programs had graduates take the 2013 NCLEX. Id. at 7.

³⁴ *Id.* at 6.

³⁵ *Id.* at 7.

Nursing Education Program Accreditation

Accreditation is a voluntary process by which a non-governmental entity reviews and recognizes educational institutions or programs that meet or exceed standards for educational quality.³⁶ Accreditation is designed to distinguish schools adhering to a set of educational standards.³⁷ Nursing programs in Florida fall into one of the following accreditation categories:

- Programmatic accreditation;
- Broader institutional accreditation:
- Both programmatic accreditation and institutional accreditation; and
- Neither the program nor the institution is accredited.

The process for obtaining accreditation generally requires the following: an application, fees, a self-evaluation report, a peer review site visit, and a detailed analysis of materials and reviewer findings. Once accreditation is obtained, programs are subject to ongoing review, periodic site visits, and continuing accreditation fees.³⁸

The United States Secretary of Education recognizes two accrediting agencies for nursing program accreditation, the Accreditation Commission for Education in Nursing (ACEN) and the Commission on Collegiate Nursing Education (CCNE).³⁹ Obtaining initial accreditation is an involved process. CCNE requires nursing programs to have students enrolled at least one year before applying.⁴⁰ Both ACEN and CCNE require programs to complete the accreditation process within two years.⁴¹

CCNE charges the following fees:42

- \$3,500 new applicant fee per program;
- \$1,750 evaluation fee per evaluation team member (typically, 3 5 members); and
- \$2.468 annual fee to maintain accreditation.

ACEN charges the following fees:

- \$2,500 candidacy fee;
- \$1,000 review fee for initial or continuing accreditation (per program); and
- \$835 site visit fee per evaluator per day.

Institutional accreditation applies to the entire institution and is not program specific. For example, the Southern Association of Colleges and Schools Council on Accreditation and School Improvement accredits almost seventy institutions that provide nursing programs, including all of the schools in the Florida university system. ⁴³ At present, all schools that have nursing program accreditation also have

³⁶ Accreditation Commission for Education in Nursing, *Accreditation Manual*, 1, (July 31, 2013), *available at* http://www.acenursing.net/manuals/GeneralInformation.pdf (last visited Mar. 12, 2014).

³⁷ AdvancedEd, What Is Accreditation?, available at http://www.advanc-ed.org/what-accreditation (last visited Mar. 12, 2014).

³⁸ Accreditation Commission for Education in Nursing, *Accreditation Manual*, supra note 36 at 13.

³⁹ United States Department of Education, *Specialized Accrediting Agencies*, https://www2.ed.gov/admins/finaid/accred/accreditation_pg7.html (last visited Mar. 12, 2014).

⁴⁰ Commission on Collegiate Nursing Education, *Procedures for Accreditation of Baccalaureate and Graduate Degree Nursing Programs* at 7 (April 28, 2012), *available at http://www.aacn.nche.edu/ccne-accreditation/procedures.pdf* (last visited Mar. 12, 2014).

⁴¹ Id. at 6. Accreditation Commission for Education in Nursing, Accreditation Manual, supra note 36 at 13.

⁴² Commission on Collegiate Nursing Education, *CCNE Fee Structure Nursing Education Programs*, available at http://www.aacn.nche.edu/ccne-accreditation/FEESTR.pdf (last visited Mar. 12, 2014).

⁴³ Data retrieved from Florida Department of Health Commission of Commission of Commission of Commission of Commission on Collegiate Nursing Education Programs, available at http://www.aacn.nche.edu/ccne-accreditation/FEESTR.pdf (last visited Mar. 12, 2014).

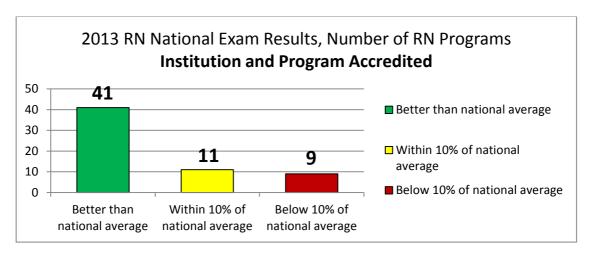
⁴³ Data retrieved from Florida Department of Health, *Compare Florida Prelicensure Nursing Education Programs*, available at http://ww2.doh.state.fl.us/MQANEPC/SearchCriteria.aspx (last visited Mar. 12, 2014). **STORAGE NAME**: h1059.SCHCWI

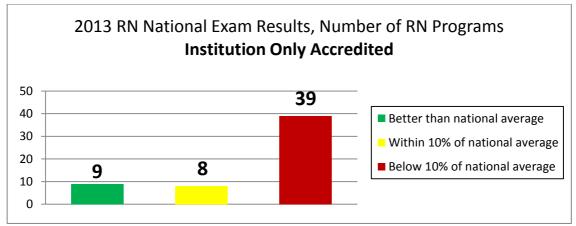
institutional accreditation. However, not all schools with institutional accreditation have nursing program accreditation. Fifty-six nursing programs with only institutional accreditation had students take the 2013 NCLEX.⁴⁴

There currently is no requirement to be accredited in order to become an approved nursing program. In 2013, eleven schools with neither nursing program accreditation nor institutional accreditation had students take the 2013 NCLEX.⁴⁵

2013 RN Education Programs National Exam Results by Accreditation Type

The charts below show by accreditation type the number of RN nursing programs that exceeded the NCLEX national average passage rate for first time test takers in 2013. The charts also illustrate the number of programs that were within or below 10 percent of the national passage rate.⁴⁶



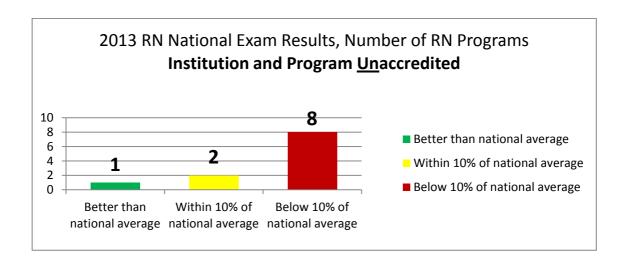


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⁴⁴ *Id.*

⁴⁵ *Id.*

⁴⁶ Charts created from data available from the DOH and the 2013 nursing education OPPAGA report. See Florida Department of Health, *Compare Florida Prelicensure Nursing Education Programs*, *supra* note 43; Office of Program Policy and Government Accountability, Florida Legislature, *Florida's Nursing Education Programs Continued to Expand in 2013, While Licensure Exams Passage Rates of New Programs Declined*, *supra* note 32. Charts only include schools with more than one test taker.



Effect of Proposed Changes

The bill amends s. 464.019, F.S., to require all nursing education programs that prepare students for the practice of professional nursing to be accredited by a specialized nursing accrediting agency that is nationally recognized by the United States Secretary of Education, with the exception of a nursing education program statutorily authorized by s. 1005.06(1)(e), F.S.⁴⁷ The bill establishes the following schedule for programs to become accredited:

- Programs approved before July 1, 2014, and that enrolled students before July 1, 2014, must obtain nursing program accreditation by July 1, 2019;
- Programs approved before July 1, 2014, but did not enroll students before that date, must obtain nursing program accreditation within 5 years after the date of enrolling the program's first students: and
- Programs approved after June 30, 2014, must obtain nursing program accreditation within 5 years after the date of enrolling the program's first students.

The bill revises the definition of "clinical training" to include clinical simulation and removes the limit on clinical simulation training. The bill revises the definition of "practical nursing" to include teaching of general principles of health and wellness to the public and to students other than nursing students.

The bill amends s. 464.013, F.S., to exempt nurses with specialty health care certification from a program accredited by the National Commission for Certifying Agencies from continuing education required at biennial license renewal.

The bill provides the Board of Nursing the authority to adopt rules relating to documenting the accreditation of nursing education programs. The bill removes the requirement that the Office of Program Policy Analysis and Government Accountability participate in an implementation study.

The bill repeals obsolete language in s. 464.019, F.S., related to the status of certain programs during the transition to the new program approval process effective July 1, 2009.

The bill amends s. 456.014 F.S., to conform a cross-reference.

The bill provides an effective date of July 1, 2014.

Only Pensacola Christian College and Landmark Baptist College qualify for this exception. Pensacola Christian College has a professional nursing education program, but Landmark Baptist College does not offer a nursing program. STORAGE NAME: h1059.SCHCWI

B. SECTION DIRECTORY:

- **Section 1.** Amends s. 464.003, F.S., relating to nursing definitions.
- **Section 2.** Amends s. 464.013, F.S., relating to renewal of license or certificate.
- **Section 3.** Amends s. 464.019, F.S., relating to approval of nursing education programs.
- **Section 4.** Amends s. 456.014, F.S., relating to public inspection of information required from applicants; exceptions; examination hearing.
- Section 5. Provides an effective date of July 1, 2014.

II. FISCAL ANALYSIS & ECONOMIC IMPACT STATEMENT

A. FISCAL IMPACT ON STATE GOVERNMENT:

1. Revenues:

None.

2. Expenditures:

The DOH anticipates non-recurring costs for rule-making and workload to revise the nursing application, which can be absorbed by existing resources.⁴⁸

Public colleges and universities that do not currently have nursing program accreditation will incur the cost of becoming accredited and ongoing accreditation maintenance costs. ACEN charges an application fee of \$2,500, an initial accreditation or continuing accreditation review fee of \$1,000, and a site visit fee of \$835 per site visit. CCNE charges an application fee of \$3,500, an annual maintenance fee of \$2,468, and an evaluation fee of \$1,750 per evaluation team member (typically, 3 - 5 members). There are currently 9 public associate degree RN nursing programs that do not have nursing program accreditation.⁴⁹

B. FISCAL IMPACT ON LOCAL GOVERNMENTS:

1. Revenues:

None.

2. Expenditures:

None.

C. DIRECT ECONOMIC IMPACT ON PRIVATE SECTOR:

Private colleges and universities that do not currently have nursing program accreditation will incur the cost of becoming accredited and ongoing accreditation maintenance costs. There are currently 20 bachelor of science RN nursing programs and 122 associate degree RN nursing programs that do not have nursing program accreditation.⁵⁰

D. FISCAL COMMENTS:

None.

⁴⁸ Florida Department of Health, 2014 Agency Legislative Bill Analysis, HB 1059, March 10, 2014, on file with committee staff.

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⁴⁹ Data retrieved from Florida Department of Health, *Compare Florida Prelicensure Nursing Education Programs*, supra note 43.

⁵⁰ Data retrieved from Florida Department of Health, *Compare Florida Prelicensure Nursing Education Programs*, *supra*

III. COMMENTS

A. CONSTITUTIONAL ISSUES:

Applicability of Municipality/County Mandates Provision:
 Not applicable. This bill does not appear to affect county or municipal governments.

2. Other:

None.

B. RULE-MAKING AUTHORITY:

The bill provides the BON sufficient authority to adopt rules relating to documenting the accreditation of nursing education programs.

C. DRAFTING ISSUES OR OTHER COMMENTS:

None.

IV. AMENDMENTS/ COMMITTEE SUBSTITUTE CHANGES

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1 A bill to be entitled 2 An act relating to nursing education programs; 3 amending s. 464.003, F.S.; revising definitions of the 4 terms "clinical training" and "practice of practical 5 nursing"; conforming a cross-reference; amending s. 6 464.013, F.S.; exempting nurses who are certified by 7 certain accredited programs from continuing education 8 requirements; amending s. 464.019, F.S.; removing the 9 limitation on the percentage of clinical training that 10 may consist of clinical simulation; deleting obsolete 11 requirements; authorizing the Board of Nursing to 12 adopt certain rules relating to documenting the 13 accreditation of nursing education programs; deleting 14 the requirement that the Office of Program Policy 15 Analysis and Government Accountability participate in 16 an implementation study; requiring nursing education 17 programs that prepare students for the practice of 18 professional nursing to be accredited; providing an 19 exception; amending s. 456.014, F.S.; conforming a 20 cross-reference; providing an effective date. 21 22 Be It Enacted by the Legislature of the State of Florida: 23 24 Section 1. Subsections (10), (19), and (23) of section 25 464.003, Florida Statutes, are amended to read: 26 464.003 Definitions.—As used in this part, the term:

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(10) "Clinical training" means direct nursing care experiences with patients or clients, or clinical simulation of such experiences, which offer the student the opportunity to integrate, apply, and refine specific skills and abilities based on theoretical concepts and scientific principles.

- of selected acts, including the administration of treatments and medications, in the care of the ill, injured, or infirm; and the promotion of wellness, maintenance of health, and prevention of illness of others under the direction of a registered nurse, a licensed physician, a licensed osteopathic physician, a licensed podiatric physician, or a licensed dentist; and the teaching of general principles of health and wellness to the public and to students other than nursing students. A practical nurse is responsible and accountable for making decisions that are based upon the individual's educational preparation and experience in nursing.
- (23) "Required passage rate" means the graduate passage rate required for an approved program pursuant to s. $464.019(5)(a) \frac{464.019(6)(a)1}{464.019(6)(a)1}$.
- Section 2. Subsection (3) of section 464.013, Florida Statutes, is amended to read:
 - 464.013 Renewal of license or certificate.
- (3) The board shall by rule prescribe $\underline{\text{up to } 30 \text{ hours of}}$ continuing education $\underline{\text{not to exceed } 30 \text{ hours}}$ biennially as a condition for renewal of a license or certificate. $\underline{\text{A nurse who}}$

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is certified by a health care specialty program that is accredited by the National Commission for Certifying Agencies is exempt from the continuing education requirements. The criteria for programs shall be approved by the board.

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Section 3. Section 464.019, Florida Statutes, is amended to read:

464.019 Approval of nursing education programs.-

- institution that wishes to conduct a program in this state for the prelicensure education of professional or practical nurses must submit to the department a program application and review fee of \$1,000 for each prelicensure nursing education program to be offered at the institution's main campus, branch campus, or other instructional site. The Each program application must include the legal name of the educational institution, the legal name of the nursing education program, and, if such program is accredited by an accrediting agency other than an accrediting agency described in s. 464.003(1), the name of the accrediting agency. The application must also document that:
- (a)1. For a professional nursing education program, the program director and at least 50 percent of the program's faculty members are registered nurses who have a master's or higher degree in nursing or a bachelor's degree in nursing and a master's or higher degree in a field related to nursing.
- 2. For a practical nursing education program, the program director and at least 50 percent of the program's faculty

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members are registered nurses who have a bachelor's or higher degree in nursing.

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The educational degree requirements of this paragraph may be documented by an official transcript or by a written statement from the educational institution verifying that the institution conferred the degree.

- (b) The program's nursing major curriculum consists of at least:
- 1. Fifty percent clinical training for a practical nursing education program, an associate degree professional nursing education program, or a professional diploma nursing education program.
- 2. Forty percent clinical training for a bachelor's degree professional nursing education program.
- (c) No more than 25 percent of the program's clinical training consists of clinical simulation.
- (c)(d) The program has signed agreements with each agency, facility, and organization included in the curriculum plan as clinical training sites and community-based clinical experience sites.
- (d)(e) The program has written policies for faculty which include provisions for direct or indirect supervision by program faculty or clinical preceptors for students in clinical training consistent with the following standards:
 - 1. The number of program faculty members equals at least

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one faculty member directly supervising every 12 students unless the written agreement between the program and the agency, facility, or organization providing clinical training sites allows more students, not to exceed 18 students, to be directly supervised by one program faculty member.

- 2. For a hospital setting, indirect supervision may occur only if there is direct supervision by an assigned clinical preceptor, a supervising program faculty member is available by telephone, and such arrangement is approved by the clinical facility.
- 3. For community-based clinical experiences that involve student participation in invasive or complex nursing activities, students must be directly supervised by a program faculty member or clinical preceptor and such arrangement must be approved by the community-based clinical facility.
- 4. For community-based clinical experiences not subject to subparagraph 3., indirect supervision may occur only when a supervising program faculty member is available to the student by telephone.

A program's policies established under this paragraph must require that a clinical preceptor who is, if supervising students in a professional nursing education program, to be a registered nurse or, if supervising students in a practical nursing education program, to be a registered nurse or licensed practical nurse.

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(e)(f) The professional or practical nursing curriculum plan documents clinical experience and theoretical instruction in medical, surgical, obstetric, pediatric, and geriatric nursing: A professional nursing curriculum plan shall also document clinical experience and theoretical instruction in psychiatric nursing; and Each curriculum plan must document clinical training experience in appropriate settings that include, but are not limited to, acute care, long-term care, and community settings.

- (f)(g) The professional or practical nursing education program provides theoretical instruction and clinical application in personal, family, and community health concepts; nutrition; human growth and development throughout the life span; body structure and function; interpersonal relationship skills; mental health concepts; pharmacology and administration of medications; and legal aspects of practice. A professional nursing education program must shall also provide theoretical instruction and clinical application in interpersonal relationships and leadership skills; professional role and function; and health teaching and counseling skills.
 - (2) PROGRAM APPROVAL.-

(a) Upon receipt of a program application and review fee, the department shall examine the application to determine \underline{if} whether it is complete. If \underline{the} a program application is not complete, the department shall notify the educational institution in writing of any errors or omissions within 30 days

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after the department's receipt of the application. A program application is deemed complete upon the department's receipt of:

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- 1. The initial application, if the department does not notify the educational institution of any errors or omissions within the 30-day period; or
- 2. A revised application that corrects each error and omission of which the department notifies the educational institution within the 30-day period.
- (b) Within 90 days after the department's receipt of a complete program application, the board shall:
- 1. Approve the application if it documents compliance with subsection (1) $\frac{1}{2}$ or
- 2. Provide the educational institution with a notice of intent to deny the application if it does not document compliance with <u>subsection (1)</u> paragraphs (1)(a)-(g). The notice must <u>specify set forth</u> written reasons for the board's denial of the application. The board may not deny a program application because of an educational institution's failure to correct <u>an any</u> error or omission <u>that of which</u> the department <u>failed to provide notice of to does not notify</u> the institution within the 30-day notice period under paragraph (a). The educational institution may request a hearing on the notice of intent to deny the program application pursuant to chapter 120.
- (c) A program application is deemed approved if the board does not act within the 90-day review period provided under paragraph (b).

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(d) Upon the board's approval of a program application, the program becomes an approved program.
(3) STATUS OF CERTAIN PROGRAMS. A professional or

- (3) STATUS OF CERTAIN PROGRAMS.—A professional or practical nursing education program becomes an approved program if, as of June 30, 2009, the program:
- (a) Has full or provisional approval from the board or, except as provided in paragraph (b), is on probationary status.
- (b) Is on-probationary status because the program did not meet the board's requirement for graduate passage rates. Such program shall remain on probationary status until it achieves a graduate passage rate for calendar year 2009 or 2010 that equals or exceeds the required passage rate for the respective calendar year and must disclose its probationary status in writing to the program's students and applicants. If the program does not achieve the required passage rate, the board shall terminate the program pursuant to chapter 120.
- (3) (4) ANNUAL REPORT.—By November 1 of each year, each approved program that is not accredited shall submit to the board an annual report comprised of an affidavit certifying continued compliance with subsection (1) paragraphs (1)(a)-(g), a summary description of the program's compliance with subsection (1) paragraphs (1)(a)-(g), and documentation for the previous academic year that, to the extent applicable, describes sets forth:
- (a) The number of student applications received, qualified applicants, applicants accepted, accepted applicants who enroll

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in the program, students enrolled in the program, and program 209 graduates.

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- The program's retention rates for students tracked from program entry to graduation.
- The program's accreditation status, including identification of the accrediting agency if the program is accredited such agency is not an accrediting agency described in s. 464.003(1).
- (4) (5) INTERNET WEBSITE. By October 1, 2010, The board shall publish the following information on its Internet website:
- A list of each accredited program conducted in the state and the program's graduate passage rates for the most recent 2 calendar years, which the department shall determine through the following sources:
- 1. For a program's accreditation status, the specialized accrediting agencies that are nationally recognized by the United States Secretary of Education to accredit nursing education programs.
- For a program's graduate passage rates, the contract testing service of the National Council of State Boards of Nursing.
- The following data for each approved program, which includes shall include, to the extent applicable:
- All documentation provided by the program in its program application if submitted on or after July 1, 2009.
 - The summary description of the program's compliance

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235 submitted under subsection (3) (4).

- 3. The program's accreditation status, including identification of the accrediting agency if the program is accredited such agency is not an accrediting agency described in s. 464.003(1).
 - 4. The program's probationary status.
- 5. The program's graduate passage rates for the most recent 2 calendar years.
- 6. Each program's retention rates for students tracked from program entry to graduation.
- (c) The average passage rates for United States educated first-time test takers on the National Council of State Boards of Nursing Licensing Examination for the most recent 2 calendar years, as calculated by the contract testing service of the National Council of State Boards of Nursing. The average passage rates shall be published separately for each type of comparable degree program listed in subparagraph (5) (a) 1. sub-subparagraphs (6) (a) 1.a.-d.

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The information required to be published under this subsection shall be made available in a manner that allows interactive searches and comparisons of individual programs selected by the website user. The board shall update the Internet website at least quarterly with the available information.

- (5) (6) ACCOUNTABILITY.-
- (a)1. An approved program must achieve a graduate passage

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rate that is not <u>more lower</u> than 10 percentage points <u>lower less</u> than the average passage rate <u>during the same calendar year</u> for graduates of comparable degree programs who are United States educated, first-time test takers on the National Council of State Boards of Nursing Licensing Examination <u>during a calendar year</u>, as calculated by the contract testing service of the National Council of State Boards of Nursing. For purposes of this subparagraph, an approved program is comparable to all degree programs of the same program type from among the following program types:

- a. Professional nursing education programs that terminate in a bachelor's degree.
- b. Professional nursing education programs that terminate in an associate degree.
- c. Professional nursing education programs that terminate in a diploma.
 - d. Practical nursing education programs.
- 2. Beginning with graduate passage rates for calendar year 2010, if an approved program's graduate passage rates do not equal or exceed the required passage rates for 2 consecutive calendar years, the board shall place the program on probationary status pursuant to chapter 120 and the program director shall must appear before the board to present a plan for remediation. The program must shall remain on probationary status until it achieves a graduate passage rate that equals or exceeds the required passage rate for any 1 calendar year. The

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board shall deny a program application for a new prelicensure nursing education program submitted by an educational institution if the institution has an existing program that is already on probationary status.

- 3. Upon the program's achievement of a graduate passage rate that equals or exceeds the required passage rate, the board, at its next regularly scheduled meeting following release of the program's graduate passage rate by the National Council of State Boards of Nursing, shall remove the program's probationary status. However, if the program, during the 2 calendar years following its placement on probationary status, does not achieve the required passage rate for any 1 calendar year, the board shall terminate the program pursuant to chapter 120.
- (b) If an approved program fails to submit the annual report required in subsection (3) (4), the board shall notify the program director and president or chief executive officer of the educational institution in writing within 15 days after the due date of the annual report. The program director shall must appear before the board at the board's next regularly scheduled meeting to explain the reason for the delay. The board shall terminate the program pursuant to chapter 120 if it does not submit the annual report within 6 months after the due date.
- (c) An approved program on probationary status shall disclose its probationary status in writing to the program's students and applicants.

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(6) (7) DISCLOSURE OF GRADUATE PASSAGE RATE DATA.-

- (a) For each graduate of the program an approved program's or accredited program's graduates included in the calculation of the program's graduate passage rate, the department shall disclose to the program director, upon his or her written request, the name, examination date, and determination of whether each graduate passed or failed the National Council of for State Boards of Nursing Licensing Examination, if to the extent that such information is provided to the department by the contract testing service of the National Council of for State Boards of Nursing. The written request must specify the calendar years for which the information is requested.
- (b) A program director to whom confidential information exempt from public disclosure pursuant to s. 456.014 is disclosed under this subsection must maintain the confidentiality of the information and is subject to the same penalties provided in s. 456.082 for department employees who unlawfully disclose confidential information.

(7) PROGRAM CLOSURE.

(a) An educational institution conducting an approved program or accredited program in this state, at least 30 days before voluntarily closing the program, shall notify the board in writing of the institution's reason for closing the program, the intended closure date, the institution's plan to provide for or assist in the completion of training by the program's students, and the arrangements for storage of the program's

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- (b) An educational institution conducting a nursing education program that is terminated under subsection (5) or closed under subparagraph (9)(b)3. (10) (b)3.:
 - 1. May not accept or enroll new students.
- 2. Shall Must submit to the board within 30 days after the program is terminated or closed a written description of how the institution will assist in completing the completion of training of by the program's students and the institution's arrangements for storage of the program's permanent records.
- (c) If an educational institution does not comply with paragraph (a) or paragraph (b), the board shall provide a written notice explaining the institution's noncompliance to the following persons and entities:
- 1. The president or chief executive officer of the educational institution.
- 2. The Board of Governors, if the program is conducted by a state university.
- 3. The district school board, if the program is conducted by an educational institution operated by a school district.
- 4. The Commission for Independent Education, if the program is conducted by an educational institution licensed under chapter 1005.
- 5. The State Board of Education, if the program is conducted by an educational institution in the Florida College System or by an educational institution that is not subject to

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subparagraphs 2.-4.

- (8)(9) RULEMAKING.—The board does not have any rulemaking authority to administer this section, except that the board shall adopt rules a rule that prescribe prescribes the format for submitting program applications under subsection (1) and annual reports under subsection (3), and to administer the documentation of the accreditation of nursing education programs under subsection (11) (4). The board may not impose any condition or requirement on an educational institution submitting a program application, an approved program, or an accredited program, except as expressly provided in this section. The board shall repeal all rules, or portions thereof, in existence on July 1, 2009, that are inconsistent with this subsection.
 - (9) (10) APPLICABILITY TO ACCREDITED PROGRAMS.
- (a) Subsections (1)-(3) (1)-(4), paragraph (4) (b) (5) (b), and subsection (5) (6) do not apply to an accredited program. An accredited program on probationary status before July 1, 2010, ceases to be subject to the probationary status.
- (b) If an accredited program ceases to be accredited, the educational institution conducting the program:
- 1. Within 10 business days after the program ceases to be accredited, must provide written notice of the date that the program ceased to be accredited to the board, the program's students and applicants, and each entity providing clinical training sites or community-based clinical experience sites for

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the program. The educational institution must continue to provide the written notice to new students, applicants, and entities providing clinical training sites or community-based clinical experience sites for the program until the program becomes an approved program or is closed under subparagraph 3.

- 2. Within 30 days after the program ceases to be accredited, must submit an affidavit to the board, signed by the educational institution's president or chief executive officer which, that certifies the institution's compliance with subparagraph 1. The board shall notify the required persons and applicable entities listed in paragraph (7)(c) persons listed in subparagraph (8)(c)1. and the applicable entities listed in subparagraphs (8)(c)2.-5. if an educational institution does not submit the affidavit required by this subparagraph.
- 3. May apply to become an approved program under this section. If the educational institution:
- a. Within 30 days after the program ceases to be accredited, submits a program application and review fee to the department under subsection (1) and the affidavit required under subparagraph 2., the program shall be deemed an approved program from the date that the program ceased to be accredited until the date that the board approves or denies the program application. The program application must be denied by the board pursuant to chapter 120 if it does not contain the affidavit. If the board denies the program application under subsection (2) or if because the program application does not contain the affidavit,

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the program shall be closed and the educational institution conducting the program must comply with paragraph (7)(b).

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b. Does not apply to become an approved program pursuant to sub-subparagraph a., the program shall be deemed an approved program from the date that the program ceased to be accredited until the 31st day after that date. On the 31st day after the program ceased to be accredited, the program shall be closed and the educational institution conducting the program must comply with paragraph (7) (b) (8) (b).

(10) (11) IMPLEMENTATION STUDY.—The Florida Center for Nursing and the education policy area of the Office of Program Policy Analysis and Government Accountability shall study the 5year administration of this section and submit reports to the Governor, the President of the Senate, and the Speaker of the House of Representatives by January 30, 2011, and annually thereafter through January 30, 2015. The annual reports shall address the previous academic year; provide set forth data on the measures specified in paragraphs (a) and (b), as such data becomes available; and include an evaluation of such data for purposes of determining whether this section is increasing the availability of nursing education programs and the production of quality nurses. The department and each approved program or accredited program shall comply with requests for data from the Florida Center for Nursing and the education policy area of the Office of Program Policy Analysis and Government Accountability.

(a) The Florida Center for Nursing education policy area Page 17 of 20

of the Office of Program Policy Analysis and Government
Accountability shall evaluate program-specific data for each
approved program and accredited program conducted in the state,
including, but not limited to:

- 1. The number of programs and student slots available.
- 2. The number of student applications submitted, the number of qualified applicants, and the number of students accepted.
 - 3. The number of program graduates.

- 4. Program retention rates of students tracked from program entry to graduation.
- 5. Graduate passage rates on the National Council of State Boards of Nursing Licensing Examination.
- 6. The number of graduates who become employed as practical or professional nurses in the state.
- (b) The Florida Center for Nursing shall evaluate the board's implementation of the:
- 1. Program application approval process, including, but not limited to, the number of program applications submitted under subsection (1); the number of program applications approved and denied by the board under subsection (2); the number of denials of program applications reviewed under chapter 120; and a description of the outcomes of those reviews.
- 2. Accountability processes, including, but not limited to, the number of programs on probationary status, the number of approved programs for which the program director is required to

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appear before the board under subsection <u>(5)</u> (6), the number of approved programs terminated by the board, the number of terminations reviewed under chapter 120, and a description of the outcomes of those reviews.

- (c) For any state fiscal year in which the Florida Center for Nursing does not receive legislative appropriations, the education policy area of the Office of Program Policy Analysis and Government Accountability shall perform the duties assigned by this subsection to the Florida Center for Nursing.
 - (11) ACCREDITATION REQUIRED.-

- (a) A nursing education program that prepares students for the practice of professional nursing, that was approved under this section before July 1, 2014, and that enrolled students before July 1, 2014, must be accredited by an accrediting agency described in s. 464.003(1) by July 1, 2019.
- (b) A nursing education program that prepares students for the practice of professional nursing, that was approved under this section before July 1, 2014, but did not enroll students before that date, must become accredited by an accrediting agency described in s. 464.003(1) within 5 years after the date of enrolling the program's first students.
- (c) A nursing education program that prepares students for the practice of professional nursing and that is approved by the board after June 30, 2014, must become accredited by an accrediting agency described in s. 464.003(1) within 5 years after the date of enrolling the program's first students.

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(d) This subsection does not apply to a nursing education program provided by an institution that is exempted from licensure by the Commission for Independent Education under s. 1005.06(1)(e).

Section 4. Subsection (1) of section 456.014, Florida Statutes, is amended to read:

456.014 Public inspection of information required from applicants; exceptions; examination hearing.—

applicant shall be a public record and shall be open to public inspection pursuant to s. 119.07, except financial information, medical information, school transcripts, examination questions, answers, papers, grades, and grading keys, which are confidential and exempt from s. 119.07(1) and shall not be discussed with or made accessible to anyone except the program director of an approved program or accredited program as provided in s. 464.019(6) 464.019(7), members of the board, the department, and staff thereof, who have a bona fide need to know such information. Any information supplied to the department by any other agency which is exempt from the provisions of chapter 119 or is confidential shall remain exempt or confidential pursuant to applicable law while in the custody of the department or the agency.

Section 5. This act shall take effect July 1, 2014.

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	COMMITTEE/SUBCOMMITTEE ACTION									
	ADOPTED $\underline{\hspace{1cm}}$ (Y/N)									
	ADOPTED AS AMENDED (Y/N)									
	ADOPTED W/O OBJECTION (Y/N)									
	FAILED TO ADOPT (Y/N)									
	WITHDRAWN (Y/N)									
	OTHER									
1	Committee/Subcommittee hearing bill: Select Committee on Health									
2	Care Workforce Innovation									
3	Representative Pigman offered the following:									
4										
5	Amendment (with title amendment)									
6	Remove everything after the enacting clause and insert:									
7	Section 1. Subsections (10), (19), and (23) of section									
8	464.003, Florida Statutes, are amended to read:									
9	464.003 Definitions.—As used in this part, the term:									
10	(10) "Clinical training" means direct nursing care									
11	experiences with patients or clients, or clinical simulation of									
12	such experiences, which offer the student the opportunity to									
13	integrate, apply, and refine specific skills and abilities based									
14	on theoretical concepts and scientific principles.									
15	(19) "Practice of practical nursing" means the performance									
16	of selected acts, including the administration of treatments and									
17	medications, in the care of the ill, injured, or infirm; and the									

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promotion of wellness, maintenance of health, and prevention of illness of others under the direction of a registered nurse, a licensed physician, a licensed osteopathic physician, a licensed podiatric physician, or a licensed dentist; and the teaching of general principles of health and wellness to the public and to students other than nursing students. A practical nurse is responsible and accountable for making decisions that are based upon the individual's educational preparation and experience in nursing.

- (23) "Required passage rate" means the graduate passage rate required for an approved program pursuant to s. $464.019(5)(a) \frac{464.019(6)(a)1}{4}$.
- Section 2. Subsection (3) of section 464.013, Florida Statutes, is amended to read:
 - 464.013 Renewal of license or certificate.
- (3) The board shall by rule prescribe <u>up to 30 hours of</u> continuing education not to exceed 30 hours biennially as a condition for renewal of a license or certificate. A nurse who is certified by a health care specialty program accredited by the National Commission for Certifying Agencies or the Accreditation Board for Specialty Nursing Certification is exempt from continuing education requirements. The criteria for programs shall be approved by the board.
- Section 3. Section 464.019, Florida Statutes, is amended to read:
 - 464.019 Approval of nursing education programs.-

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- institution that wishes to conduct a program in this state for the prelicensure education of professional or practical nurses must submit to the department a program application and review fee of \$1,000 for each prelicensure nursing education program to be offered at the institution's main campus, branch campus, or other instructional site. The Each program application must include the legal name of the educational institution, the legal name of the nursing education program, and, if such institution program is accredited by an accrediting agency other than an accrediting agency described in s. 464.003(1), the name of the accrediting agency. The application must also document that:
- (a)1. For a professional nursing education program, the program director and at least 50 percent of the program's faculty members are registered nurses who have a master's or higher degree in nursing or a bachelor's degree in nursing and a master's or higher degree in a field related to nursing.
- 2. For a practical nursing education program, the program director and at least 50 percent of the program's faculty members are registered nurses who have a bachelor's or higher degree in nursing.

The educational degree requirements of this paragraph may be documented by an official transcript or by a written statement from the educational institution verifying that the institution conferred the degree.

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- (b) The program's nursing major curriculum consists of at least:
- 1. Fifty percent clinical training in the United States, the District of Columbia, or a possession or territory of the United States for a practical nursing education program, an associate degree professional nursing education program, or a professional diploma nursing education program.
- 2. Forty percent clinical training in the United States, the District of Columbia, or a possession or territory of the United States for a bachelor's degree professional nursing education program.
- (c) No more than $50 \ 25$ percent of the program's clinical training consists of clinical simulation.
- (d) The program has signed agreements with each agency, facility, and organization included in the curriculum plan as clinical training sites and community-based clinical experience sites.
- (e) The program has written policies for faculty which include provisions for direct or indirect supervision by program faculty or clinical preceptors for students in clinical training consistent with the following standards:
- 1. The number of program faculty members equals at least one faculty member directly supervising every 12 students unless the written agreement between the program and the agency, facility, or organization providing clinical training sites



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allows more students, not to exceed 18 students, to be directly supervised by one program faculty member.

- 2. For a hospital setting, indirect supervision may occur only if there is direct supervision by an assigned clinical preceptor, a supervising program faculty member is available by telephone, and such arrangement is approved by the clinical facility.
- 3. For community-based clinical experiences that involve student participation in invasive or complex nursing activities, students must be directly supervised by a program faculty member or clinical preceptor and such arrangement must be approved by the community-based clinical facility.
- 4. For community-based clinical experiences not subject to subparagraph 3., indirect supervision may occur only when a supervising program faculty member is available to the student by telephone.

A program's policies established under this paragraph must require that a clinical preceptor who is, if supervising students in a professional nursing education program, to be a registered nurse or, if supervising students in a practical nursing education program, to be a registered nurse or licensed practical nurse.

(f) The professional or practical nursing curriculum plan documents clinical experience and theoretical instruction in medical, surgical, obstetric, pediatric, and geriatric nursing.

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A professional nursing curriculum plan shall also document clinical experience and theoretical instruction in psychiatric nursing. Each curriculum plan must document clinical training experience in appropriate settings that include, but are not limited to, acute care, long-term care, and community settings.

- (g) The professional or practical nursing education program provides theoretical instruction and clinical application in personal, family, and community health concepts; nutrition; human growth and development throughout the life span; body structure and function; interpersonal relationship skills; mental health concepts; pharmacology and administration of medications; and legal aspects of practice. A professional nursing education program <u>must shall</u> also provide theoretical instruction and clinical application in interpersonal relationships and leadership skills; professional role and function; and health teaching and counseling skills.
 - (2) PROGRAM APPROVAL.-
- (a) Upon receipt of a program application and review fee, the department shall examine the application to determine <u>if</u> whether it is complete. If <u>the</u> a program application is not complete, the department shall notify the educational institution in writing of any errors or omissions within 30 days after the department's receipt of the application. A program application is deemed complete upon the department's receipt of:

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- 1. The initial application, if the department does not notify the educational institution of any errors or omissions within the 30-day period; or
- 2. A revised application that corrects each error and omission of which the department notifies the educational institution within the 30-day period.
- (b) Within 90 days after the department's receipt of a complete program application, the board shall:
- 1. Approve the application if it documents compliance with subsection (1) paragraphs (1)(a) (g); or
- 2. Provide the educational institution with a notice of intent to deny the application if it does not document compliance with <u>subsection (1)</u> paragraphs (1)(a) (g). The notice must <u>specify set forth</u> written reasons for the board's denial of the application. The board may not deny a program application because of an educational institution's failure to correct <u>an any</u> error or omission <u>that of which</u> the department <u>failed to provide notice of to does not notify</u> the institution within the 30-day notice period under paragraph (a). The educational institution may request a hearing on the notice of intent to deny the program application pursuant to chapter 120.
- (c) A program application is deemed approved if the board does not act within the 90-day review period provided under paragraph (b).
- (d) Upon the board's approval of a program application, the program becomes an approved program.

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- (3) STATUS OF CERTAIN PROGRAMS.—A professional or practical nursing education program becomes an approved program if, as of June 30, 2009, the program:
- (a) Has full or provisional approval from the board or, except as provided in paragraph (b), is on probationary status.
- (b) Is on probationary status because the program did not meet the board's requirement for graduate passage rates. Such program shall remain on probationary status until it achieves a graduate passage rate for calendar year 2009 or 2010 that equals or exceeds the required passage rate for the respective calendar year and must disclose its probationary status in writing to the program's students and applicants. If the program does not achieve the required passage rate, the board shall terminate the program pursuant to chapter 120.
- (3)(4) ANNUAL REPORT.—By November 1 of each year, each approved program shall submit to the board an annual report comprised of an affidavit certifying continued compliance with subsection (1) paragraphs (1)(a) (g), a summary description of the program's compliance with subsection (1) paragraphs (1)(a) (g), and documentation for the previous academic year that, to the extent applicable, describes sets forth:
- (a) The number of student applications received, qualified applicants, applicants accepted, accepted applicants who enroll in the program, students enrolled in the program, and program graduates.

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	(b) :	The	progr	am'	s 1	retention	rates	for	students	tracked
from	progra	am e	entry	to	gra	aduation.				

- (c) The program's accreditation status, including identification of the accrediting agency if such agency is not an accrediting agency described in s. 464.003(1).
- (4)(5) INTERNET WEBSITE.—By October 1, 2010, The board shall publish the following information on its Internet website:
- (a) A list of each accredited program conducted in the state and the program's graduate passage rates for the most recent 2 calendar years, which the department shall determine through the following sources:
- 1. For a program's accreditation status, the specialized accrediting agencies that are nationally recognized by the United States Secretary of Education to accredit nursing education programs.
- 2. For a program's graduate passage rates, the contract testing service of the National Council of State Boards of Nursing.
- (b) The following data for each approved program, which includes shall include, to the extent applicable:
- 1. All documentation provided by the program in its program application if submitted on or after July 1, 2009.
- 2. The summary description of the program's compliance submitted under subsection (3) $\frac{4}{1}$.

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- 3. The program's accreditation status, including identification of the accrediting agency if such agency is not an accrediting agency described in s. 464.003(1).
 - 4. The program's probationary status.
- 5. The program's graduate passage rates for the most recent 2 calendar years.
- 6. Each program's retention rates for students tracked from program entry to graduation.
- (c) The average passage rates for United States educated first-time test takers on the National Council of State Boards of Nursing Licensing Examination for the most recent 2 calendar years, as calculated by the contract testing service of the National Council of State Boards of Nursing. The average passage rates shall be published separately for each type of comparable degree program listed in subparagraph (5)(a)1. sub-subparagraphs (6)(a)1.a.-d.

The information required to be published under this subsection shall be made available in a manner that allows interactive searches and comparisons of individual programs selected by the website user. The board shall update the Internet website at least quarterly with the available information.

(5) (6) ACCOUNTABILITY.—

(a)1. An approved program must achieve a graduate passage rate that is not $\underline{\text{more lower}}$ than 10 percentage points $\underline{\text{lower less}}$ than the average passage rate $\underline{\text{during the same calendar year}}$ for

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graduates of comparable degree programs who are United States educated, first-time test takers on the National Council of State Boards of Nursing Licensing Examination during a calendar year, as calculated by the contract testing service of the National Council of State Boards of Nursing. For purposes of this subparagraph, an approved program is comparable to all degree programs of the same program type from among the following program types:

- a. Professional nursing education programs that terminate in a bachelor's degree.
- b. Professional nursing education programs that terminate in an associate degree.
- c. Professional nursing education programs that terminate in a diploma.
 - d. Practical nursing education programs.
- 2. Beginning with graduate passage rates for calendar year 2010, if an approved program's graduate passage rates do not equal or exceed the required passage rates for 2 consecutive calendar years, the board shall place the program on probationary status pursuant to chapter 120 and the program director shall must appear before the board to present a plan for remediation. The program must shall remain on probationary status until it achieves a graduate passage rate that equals or exceeds the required passage rate for any 1 calendar year. The board shall deny a program application for a new prelicensure nursing education program submitted by an educational

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institution if the institution has an existing program that is already on probationary status.

- 3. Upon the program's achievement of a graduate passage rate that equals or exceeds the required passage rate, the board, at its next regularly scheduled meeting following release of the program's graduate passage rate by the National Council of State Boards of Nursing, shall remove the program's probationary status. However, if the program, during the 2 calendar years following its placement on probationary status, does not achieve the required passage rate for any 1 calendar year, the board shall terminate the program pursuant to chapter 120.
- (b) If an approved program fails to submit the annual report required in subsection (3) (4), the board shall notify the program director and president or chief executive officer of the educational institution in writing within 15 days after the due date of the annual report. The program director shall must appear before the board at the board's next regularly scheduled meeting to explain the reason for the delay. The board shall terminate the program pursuant to chapter 120 if it does not submit the annual report within 6 months after the due date.
- (c) An approved program on probationary status shall disclose its probationary status in writing to the program's students and applicants.
 - (6) (7) DISCLOSURE OF GRADUATE PASSAGE RATE DATA.—

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- (a) For each graduate of the program an approved program's or accredited program's graduates included in the calculation of the program's graduate passage rate, the department shall disclose to the program director, upon his or her written request, the name, examination date, and determination of whether each graduate passed or failed the National Council of for State Boards of Nursing Licensing Examination, if to the extent that such information is provided to the department by the contract testing service of the National Council of for State Boards of Nursing. The written request must specify the calendar years for which the information is requested.
- (b) A program director to whom confidential information exempt from public disclosure pursuant to s. 456.014 is disclosed under this subsection must maintain the confidentiality of the information and is subject to the same penalties provided in s. 456.082 for department employees who unlawfully disclose confidential information.
 - (7) (8) PROGRAM CLOSURE.—
- (a) An educational institution conducting an approved program or accredited program in this state, at least 30 days before voluntarily closing the program, shall notify the board in writing of the institution's reason for closing the program, the intended closure date, the institution's plan to provide for or assist in the completion of training by the program's students, and the arrangements for storage of the program's permanent records.

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- (b) An educational institution conducting a nursing education program that is terminated under subsection (5) (6) or closed under subparagraph (9)(b)3. (10)(b)3.:
 - 1. May not accept or enroll new students.
- 2. <u>Shall Must</u> submit to the board within 30 days after the program is terminated or closed a written description of how the institution will assist in <u>completing</u> the <u>completion of</u> training <u>of by</u> the program's students and the institution's arrangements for storage of the program's permanent records.
- (c) If an educational institution does not comply with paragraph (a) or paragraph (b), the board shall provide a written notice explaining the institution's noncompliance to the following persons and entities:
- 1. The president or chief executive officer of the educational institution.
- 2. The Board of Governors, if the program is conducted by a state university.
- 3. The district school board, if the program is conducted by an educational institution operated by a school district.
- 4. The Commission for Independent Education, if the program is conducted by an educational institution licensed under chapter 1005.
- 5. The State Board of Education, if the program is conducted by an educational institution in the Florida College System or by an educational institution that is not subject to subparagraphs 2.-4.

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(8) (9) RULEMAKING.—The board does not have any rulemaking								
authority to administer this section, except that the board								
shall adopt <u>rules</u> a <u>rule</u> that <u>prescribe</u> prescribes the format								
for submitting program applications under subsection (1) and								
annual reports under subsection (3), and to administer the								
documentation of the accreditation of nursing education programs								
under subsection (11) (4). The board may not impose any								
condition or requirement on an educational institution								
submitting a program application, an approved program, or an								
accredited program, except as expressly provided in this								
section. The board shall repeal all rules, or portions thereof,								
in existence on July 1, 2009, that are inconsistent with this								
subsection.								

- (9) (10) APPLICABILITY TO ACCREDITED PROGRAMS.
- (a) Subsections (1)-(3) (1)-(4), paragraph (4)(b) (5)(b), and subsection (5) (6) do not apply to an accredited program. An accredited program on probationary status before July 1, 2010, ceases to be subject to the probationary status.
- (b) If an accredited program ceases to be accredited, the educational institution conducting the program:
- 1. Within 10 business days after the program ceases to be accredited, must provide written notice of the date that the program ceased to be accredited to the board, the program's students and applicants, and each entity providing clinical training sites or community-based clinical experience sites for the program. The educational institution must continue to

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provide the written notice to new students, applicants, and entities providing clinical training sites or community-based clinical experience sites for the program until the program becomes an approved program or is closed under subparagraph 3.

- 2. Within 30 days after the program ceases to be accredited, must submit an affidavit to the board, signed by the educational institution's president or chief executive officer which, that certifies the institution's compliance with subparagraph 1. The board shall notify the persons and applicable entities listed in paragraph (7)(c) subparagraph (8)(c)1. and the applicable entities listed in subparagraphs (8)(c)2.5. if an educational institution does not submit the affidavit required by this subparagraph.
- 3. May apply to become an approved program under this section. If the educational institution:
- a. Within 30 days after the program ceases to be accredited, submits a program application and review fee to the department under subsection (1) and the affidavit required under subparagraph 2., the program shall be deemed an approved program from the date that the program ceased to be accredited until the date that the board approves or denies the program application. The program application must be denied by the board pursuant to chapter 120 if it does not contain the affidavit. If the board denies the program application under subsection (2) or if because the program application does not contain the affidavit,

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the program shall be closed and the educational institution conducting the program must comply with paragraph (7) (b) (8) (b).

b. Does not apply to become an approved program pursuant to sub-subparagraph a., the program shall be deemed an approved program from the date that the program ceased to be accredited until the 31st day after that date. On the 31st day after the program ceased to be accredited, the program shall be closed and the educational institution conducting the program must comply with paragraph (7) (b) (8) (b).

(10) (11) IMPLEMENTATION STUDY.—The Florida Center for Nursing and the education policy area of the Office of Program Policy Analysis and Government Accountability shall study the 5year administration of this section and submit reports to the Governor, the President of the Senate, and the Speaker of the House of Representatives annually by January 30, 2011, and annually thereafter through January 30, 2020 2015. The annual reports shall address the previous academic year; provide set forth data on the measures specified in paragraphs (a) and (b), as such data becomes available; and include an evaluation of such data for purposes of determining whether this section is increasing the availability of nursing education programs and the production of quality nurses. The department and each approved program or accredited program shall comply with requests for data from the Florida Center for Nursing and the education policy area of the Office of Program Policy Analysis and Government Accountability.

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- (a) The education policy area of the Office of Program

 Policy Analysis and Government Accountability shall evaluate

 program-specific data for each approved program and accredited

 program conducted in the state, including, but not limited to:
 - 1. The number of programs and student slots available.
- 2. The number of student applications submitted, the number of qualified applicants, and the number of students accepted.
 - 3. The number of program graduates.
- 4. Program retention rates of students tracked from program entry to graduation.
- 5. Graduate passage rates on the National Council of State Boards of Nursing Licensing Examination.
- 6. The number of graduates who become employed as practical or professional nurses in the state.
- (b) The Florida Center for Nursing shall evaluate the board's implementation of the:
- 1. Program application approval process, including, but not limited to, the number of program applications submitted under subsection (1); the number of program applications approved and denied by the board under subsection (2); the number of denials of program applications reviewed under chapter 120; and a description of the outcomes of those reviews.
- 2. Accountability processes, including, but not limited to, the number of programs on probationary status, the number of approved programs for which the program director is required to

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appear before the board under subsection (5) (6), the number of approved programs terminated by the board, the number of terminations reviewed under chapter 120, and a description of the outcomes of those reviews.

- (c) For any state fiscal year in which the Florida Center for Nursing does not receive legislative appropriations, the education policy area of the Office of Program Policy Analysis and Government Accountability shall perform the duties assigned by this subsection to the Florida Center for Nursing.
 - (11) ACCREDITATION REQUIRED.—
- (a) A nursing education program that prepares students for the practice of professional nursing, that was approved under this section before July 1, 2014, and that enrolled students before July 1, 2014, must become an accredited program by July 1, 2019.
- (b) A nursing education program that prepares students for the practice of professional nursing, that was approved under this section before July 1, 2014, but did not enroll students before that date, must become an accredited program within 5 years after the date of enrolling the program's first students.
- (c) A nursing education program that prepares students for the practice of professional nursing and that is approved by the board after June 30, 2014, must become an accredited program within 5 years after the date of enrolling the program's first students.

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<u>(d</u>) Th	is s	ubsec	tion	does	not	apply	y to	a nu	ırsing	educat	cior
program	prov	ided	by a	n ins	titut	cion	that	is	exemr	ted f	rom	
licensu	re by	the	Comm	issio	n for	Inc	depend	dent	Educ	cation	under	s.
1005.06	(1) (e	.).										

Subsection (1) of section 456.014, Florida Statutes, is amended to read:

456.014 Public inspection of information required from applicants; exceptions; examination hearing.-

(1) All information required by the department of any applicant shall be a public record and shall be open to public inspection pursuant to s. 119.07, except financial information, medical information, school transcripts, examination questions, answers, papers, grades, and grading keys, which are confidential and exempt from s. 119.07(1) and shall not be discussed with or made accessible to anyone except the program director of an approved program or accredited program as provided in s. 464.019(6) $\frac{464.019(7)}{7}$, members of the board, the department, and staff thereof, who have a bona fide need to know such information. Any information supplied to the department by any other agency which is exempt from the provisions of chapter 119 or is confidential shall remain exempt or confidential pursuant to applicable law while in the custody of the department or the agency.

This act shall take effect July 1, 2014. Section 5.

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TITLE AMENDMENT

Remove everything before the enacting clause and insert: An act relating to nursing education programs; amending s. 464.003, F.S.; revising definitions; conforming a cross-reference; amending s. 464.013, F.S.; exempting nurses who are certified by an accredited program from continuing education requirements; amending s. 464.019, F.S.; specifying the location of clinical training; revising the limitation on the percentage of clinical training that may consist of clinical simulation; deleting obsolete requirements; authorizing the Board of Nursing to adopt certain rules relating to documenting the accreditation of nursing education programs; deleting the requirement that the Office of Program Policy Analysis and Government Accountability participate in an implementation study and revising the terms of the study; requiring nursing education programs that prepare students for the practice of professional nursing to be accredited; providing an exception; amending s. 456.014, F.S.; conforming a crossreference; providing an effective date.

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THE FLORIDA LEGISLATURE

OPPAGA



OFFICE OF PROGRAM POLICY ANALYSIS & GOVERNMENT ACCOUNTABILITY

January 2014 Report No. 14-03

Florida's Nursing Education Programs Continued to Expand in 2013, While Licensure Exams Passage Rates of New Programs Declined

at a glance

To address the nursing shortage in Florida, the 2009 Legislature modified how the Board of Nursing oversees nursing education programs. The intent of the modifications was to increase the number of nursing programs and qualified nurses in Florida. Since the legislation took effect in July 2009,

- the Board of Nursing has approved 231 new nursing education programs, which has increased the total number of programs by 139%;
- the number of nursing student seats has increased by 180%;
- enrollment in nursing programs has increased by 58%, with the greatest increase occurring in nursing bridge programs;
- the number of students graduating from nursing programs has increased by 30%;
- the licensure exam passage rates of the nursing programs created since 2009 that had graduates who took the licensure exam declined approximately 73% had exam passage rates that were more than 10% below the national average for the 2013 calendar year;
- 73% of practical nursing program graduates that received their initial license in 2011 are employed in a nursing-related field; and
- 90% of associate and bachelor's degree in nursing program graduates that received their initial registered nurse license in 2011 are employed in a nursing-related field.

Also, when comparing the two most recent academic years (2011-12 and 2012-13), nursing program retention rates decreased by 2%.

Scope

The 2009 Legislature directed OPPAGA to conduct a series of five annual reviews of the Board of Nursing's administration of the program approval and accountability processes for nursing programs.¹ This is the fourth report that addresses how nursing programs' capacity, enrollment, and student outcomes have changed since the 2009 law took effect.² OPPAGA will issue one more report on the program approval process and outcomes in 2015.

Background-

To ensure quality nursing practice, Ch. 464, *Florida Statutes*, establishes the Florida Board of Nursing and grants the board authority to adopt rules, discipline nurses who violate regulations, and approve and monitor nursing education programs.³ In 2009, the Legislature modified the

¹ Chapters <u>2009-168</u> and <u>2010-37</u>, Laws of Florida.

² The prior OPPAGA reports are Board of Nursing Addressed Statutory Changes; Nursing Program Capacity Expanded in 2009-10, OPPAGA Report No. 11-06, January 2011; Florida's Nursing Education Programs Continued to Expand in 2011 with Significant Increases in Student Enrollment and Graduates, OPPAGA Report No. 12-04, January 2012; and Florida's Nursing Education Programs Continued to Expand in 2012 with Increases in Program Capacity, Student Enrollment, and Graduates, OPPAGA Report 13-03, January 2013.

³ New programs submit an application, fees, and supporting documents to the board office, which then reviews the application for any errors or deficiencies. Upon the receipt of a complete application, board staff places the program's application on the Board of Nursing's agenda for approval. The board monitors approved nursing programs by reviewing their students' scores on the National Council of State Boards of Nursing's National Council Licensure Examination (NCLEX).

process for approving new nursing education programs by removing rulemaking authority from the Board of Nursing and specifying the nursing education program approval process in Our 2010 report identified several issues with the board's implementation of the 2009 law and made recommendations to the Legislature and the Board of Nursing.⁵ The 2010 Legislature modified statutes to address issues consistent with those raised in our report and by stakeholders.⁶ Our 2011 report determined that the board has implemented the revised processes and addressed other issues identified.⁷ Our 2012 and 2013 reports found that student enrollment and the number of graduates was increasing.8

As shown in Exhibit 1, 294 nursing education programs in Florida had students enrolled during the 2012-13 academic year. 9, 10 These

included 133 programs that offered a licensed practical nursing certificate, 128 programs that offered an associate degree in nursing, and 33 programs that offered a bachelor's degree in nursing. Many of these programs offered both a generic curriculum (also called a track) for students with no medical experience and a bridge curriculum, which is an expedited program for students with nursing licenses or previous medical experience.¹¹

These nursing programs are offered by public school districts, Florida colleges, state universities, private institutions licensed by the Commission for Independent Education, and private institutions that are members of the Independent Colleges and Universities of Florida (ICUF). In addition, state law authorizes Pensacola Christian College to offer a bachelor of science in nursing degree. ^{12, 13}

Governors University have distance learning nursing programs that award a bachelor of science in nursing degree. At Indiana State University students must have a practical nursing certificate to be admitted. These programs are not included in this total.

Exhibit 1 During Academic Year 2012-13, 294 Nursing Education Programs in Florida Had Students Enrolled¹

Licensed Practical Nurse (LPN) 133 Total Programs Offered²

- Offered 127 Generic Tracks
- Offered 11 Bridge Tracks

Associate Degree in Nursing (RN)

128 Total Programs Offered³

- Offered 128 Generic Tracks
- Offered 75 Bridge Tracks

Bachelor of Science in Nursing (BSN)

- 33 Total Programs Offered⁴
- Offered 31 Generic Tracks
- Offered 12 2nd Degree Tracks

Source: OPPAGA survey of nursing education programs and analysis.

⁴ Chapter 2009-168, Laws of Florida.

⁵ Since Implementing Statutory Changes, the State Board of Nursing Has Approved More Nursing Programs; the Legislature Should Address Implementation Issues, OPPAGA Report No. 10-14, January 2010.

⁶ Chapter 2010-37, Laws of Florida.

⁷ Board of Nursing Addressed Statutory Changes; Nursing Program Capacity Expanded in 2009-10, OPPAGA Report No. 11-06, January 2011.

⁸ Florida's Nursing Education Programs Continued to Expand in 2011 with Significant Increases in Student Enrollment and Graduates, OPPAGA Report No. 12-04, January 2012; and Florida's Nursing Education Programs Continued to Expand in 2012 with Increases in Program Capacity, Student Enrollment, and Graduates, OPPAGA Report 13-03, January 2013.

⁹ Two institutions in other states offer two of Florida's nursing education programs. Indiana State University and Western

¹⁰ In addition, 52 programs were approved by the Board of Nursing but did not have students enrolled during the 2012-13 academic year.

¹¹ Section <u>464.019</u>, F.S., does not differentiate between bridge and generic curriculum tracks. In addition, the Florida Board of Nursing does not make a distinction between generic, bridge, or accelerated tracks.

¹² Section 1005.06 (1) (e), F.S.

¹³ Nursing education programs in Florida that hold specialized nursing accreditation by the National League for Nursing Accrediting Commission (NLNAC) or by the Collegiate Commission on Nursing Education (CCNE) are not regulated by the Florida Board of Nursing.

¹ The total includes all curriculum tracks for programs, including 70 programs with multiple tracks.

² Five licensed practical nurse programs have both a generic and a bridge curriculum track and six have a bridge-only track.

³ Sixty-three associate degree programs have both a generic and a bridge curriculum track and 12 have a bridge-only track.

⁴ Two bachelor's degree programs have both a generic curriculum track and a second degree curriculum track and 10 programs only have a second degree track. In addition, Indiana State University and Western Governors University are not included in these totals but have distance bachelor's degree programs that admit Florida students.

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Findings -

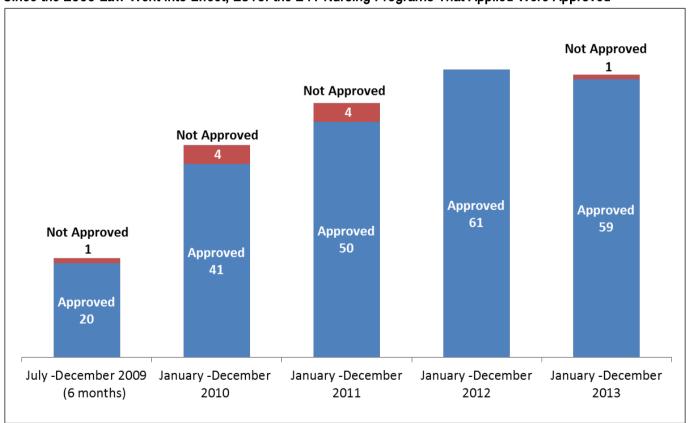
How many new nursing programs did the board approve, and how is the board monitoring programs?

The 2009 law changed how nursing education programs are approved and monitored by the Board of Nursing. Since the law took effect, the number of new nursing programs has increased significantly. In addition, the 2009 law specified the criteria the board should follow for placing nursing programs on probationary status.

Overall, the number of new nursing programs has increased by 139% since the 2009 law went into effect. Of the 370 nursing programs statewide, 231 were approved since the statutory changes took effect in July 2009 (a 139%)

increase). As shown in Exhibit 2, all but 10 of the programs that applied since the law took effect have been approved. During calendar year 2013, the board considered 60 and approved 59 applications for new nursing programs offered by private institutions licensed by the Commission for Independent Education.

Exhibit 2
Since the 2009 Law Went Into Effect, 231of the 241 Nursing Programs That Applied Were Approved



Source: OPPAGA analysis of Florida Board of Nursing data.

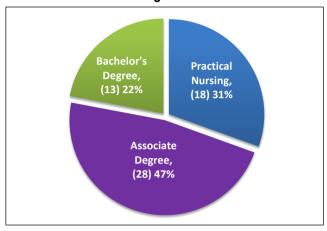
¹⁴ Nineteen programs closed in 2013 and 52 programs were approved by the Board of Nursing but did not have students enrolled during the 2012-13 academic year. Five programs did not respond to the survey and were not included in our analysis.

¹⁵ Prior to the law taking effect, 17 of 18 nursing program applications were approved from January 2008 through June 2009.

¹⁶ This is an unduplicated count of program applications and board approvals from January through December 2013. Programs may waive the committee's review of their application or their application may be denied. Also, the one program that was denied is in the application process to be reconsidered at the next board meeting.

As shown in Exhibit 3, 47% of the 59 new programs approved in 2013 award associate degrees and 31% award practical nursing certificates. The remaining programs (22%) award bachelor's degrees; this is an increase of 11 bachelor's degree programs since last year.

Exhibit 3 Almost Half of the Nursing Programs Approved in 2013 Offer Associate Degrees



Source: OPPAGA analysis of Florida Board of Nursing data.

In 2013, 24 (6%) of the 370 nursing programs in Florida were on probation. The 2009 law requires nursing programs to have a minimum average graduate licensure exam passage rate and to submit an annual report. If a program's average falls below 10% of the national average for two consecutive calendar years, it is placed on probation, must submit a corrective action plan, and must increase its average passage rate within two years. ^{17, 18}

How have nursing programs' capacity, enrollment, and student outcomes changed since the 2009 law took effect?

Legislative changes to nursing program accountability processes were intended to increase the number and quality of nursing graduates in Florida by expanding the capacity of existing programs and creating new programs.

The number of seats available in nursing education programs for qualified students continued to increase in academic year 2012-13. while other capacity measures declined. As shown in Exhibit 4, the number of seats available for qualified students increased from 16,420 to 45,942 from 2008-09 to 2012-13 for an overall increase of 180% since the law was enacted. This increase in available seats is the result of the approval of new programs and the expansion of existing programs. The revised law allows existing programs to increase capacity without board approval. In addition, the number of students admitted to nursing programs also increased by 60% from 2008-09 to However, when comparing 2011-12 and 2012-13, other capacity measures declined. For instance, there was a 9% decline in the number of student applications received, a 4% decline in the number of qualified applicants, and a 1% decline in the number of students approved for admission who actually enrolled in nursing programs.

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During 2013, the board placed 18 nursing programs on probation and 6 remained on probation from the prior year because their average graduate licensure exam passage rates were below the required rate for two consecutive years.¹⁹

¹⁷ Section 464.019, F.S., specifies that the first calendar year of scores the board could use was 2010. As a result, 2012 was the first year the board could place programs on probation using the criteria in law, based on calendar years 2010 and 2011.

 $^{^{\}rm 18}$ Fifteen practical nursing and nine associate degree in nursing programs were on probation.

¹⁹ In 2012, there were 11 programs on probation; in 2013, 4 of these programs were closed, 1 increased its average passage rate and was removed from probation, and 6 remained on probation.

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Exhibit 4
The Number of Seats Available in Nursing Programs Continued to Increase Under the New Law^{1, 2}

						Percentag	je Change
Capacity Measure	2008-09³	2009-10	2010-11	2011-12	2012-13	2011-12 to 2012-13	2008-09 to 2012-13
Seats ⁴	16,420	20,021	24,284	29,477	45,942	56%	180%
Applications Received	47,104	70,556	65,816	70,542	63,866	-9%	36%
Qualified Applicants	30,760	41,391	40,410	42,806	41,158	-4%	34%
Students Admitted	17,339	19,815	22,920	26,848	27,689	3%	60%
Students Admitted Who Enrolled	15,691	18,414	21,296	24,171	24,017	-1%	53%

¹ Eighteen programs did not respond to the survey in 2013 but did respond in 2012. For these programs, we used the data reported for 2011-12. Five programs did not respond in 2013 and did not have data for the prior year; therefore, we did not include these programs in our analysis.

Source: OPPAGA survey of nursing education programs.

Total student enrollment also continued to increase in 2012-13. As shown by Exhibit 5, overall student enrollment in nursing programs grew by 58% from 2008-09 to 2012-13. Enrollment increased in almost all types of curriculum during this four-year period, with the largest percentage increases in nursing bridge curriculum programs. In addition, the associate degree in nursing (generic curriculum) programs experienced a 73%

increase in enrollment due to the addition of 28 new programs and the expansion of existing programs. Enrollment in bachelor's in nursing (second degree) programs decreased 19%. However, when comparing the two most recent academic years (2011-12 and 2012-13), student enrollment in all types of nursing programs increased by 3.6% (from 35,831 to 37,127).

Exhibit 5
Student Enrollment Continued to Increase Across Most Types of Nursing Programs

			Enrollment ¹			Percentaç	ge Change
Curriculum Type	2008-09²	2009-10	2010-11	2011-12	2012-13	2011-12 to 2012-13	2008-09 to 2012-13
Practical Nursing (LPN) – Generic	6,534	7,705	9,021	9,555	8,239	-13.8%	26%
Practical Nursing (LPN) – Bridge	30	33	219	176	302	71.6%	907%³
Associate Degree in Nursing – Generic	9,825	10,676	13,826	15,118	16,970	12.3%	73%
Associate Degree in Nursing – Bridge	1,935	2,212	3,356	4,371	4,856	11.1%	151%
Bachelor's Degree in Nursing – Generic	4,081	4,342	4,854	5,600	5,835	4.2%	43%
Bachelor's Degree in Nursing – 2nd Degree	1,142	1,225	1,012	1,011	925	-8.5%	-19%
Total	23,547	26,193	32,288	35,831	37,127	3.6%	58%

¹ Eighteen programs did not respond to the survey in 2013 but did respond in 2012. For these programs, we used the data reported for 2011-12. Five programs did not respond in 2013 and did not have data for the prior year; therefore, we did not include these programs in our analysis.

Source: OPPAGA survey of nursing education programs.

² This data does not include practical nursing (bridge curriculum) programs.

³ The 2008-09 data is prior to the law taking effect.

⁴ Nursing programs reported a large increase in the seats available in 2012-13 compared to prior years. This increase may be attributed to programs that were ramping up, expanding, or had underreported seats in prior years. We contacted programs with large changes in the number of seats reported to resolve potential inaccuracies.

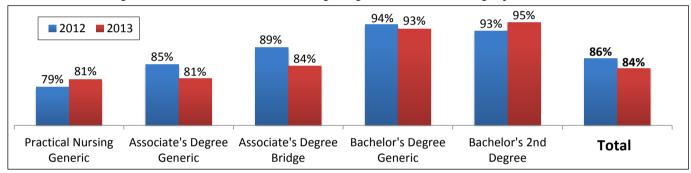
² The 2008-09 data is prior to the law taking effect.

³ Since the law took effect, practical nursing (bridge curriculum) programs have grown from two programs in 2008-09 with enrollment to nine programs with enrollment in 2012-13, which accounts for the large percentage increase in graduates from 2008-09 to 2012-13.

The total percentage of students retained in nursing programs has decreased slightly. Retention rates measure whether students persist in or complete their educational program a year later. We assessed retention in each type of nursing program using the cohort of students who entered the programs from 2008 to 2012. To calculate retention, we added the number of graduates and the number of students still enrolled and divided by the number of newly enrolled students for each cohort.²⁰

The resulting retention rates varied slightly among program types and curriculum tracks, with an overall decrease from 2011-12 to 2012-13 of two percentage points (from 86% to 84%). As shown in Exhibit 6, the one-year retention rates decreased for most curriculum types, with the largest percentage point decrease in associate degree bridge curriculum programs from 89% to 84%. Two curriculum tracks had improved retention rates. The practical nursing programs retention rate increased from 79% to 81%, and the retention rate for bachelor's degree in nursing second degree programs increased from 93% to 95%. Appendix A, Exhibit A-1 provides additional details on the retention rates for nursing programs.

Exhibit 6
The Total Percentage of Students Retained in Nursing Programs Decreased Slightly in 2013^{1, 2}



¹ Eighteen programs did not respond to the survey in 2013 but did respond in 2012. For these programs, we used the data reported for 2011-12. Five programs did not respond in 2013 and did not have data for the prior year; therefore, we did not include these programs in our analysis.

Source: OPPAGA survey of nursing education programs.

Overall, the number of students graduating from nursing programs continued to increase in **2012-13**. Lengths of time for completing nursing programs generally range from one to four years, depending on curriculum. For example, a licensed practical nursing program is a one-year program, while the associate degree in nursing is a two-year program, and the bachelor's degree in nursing is a four-year program. As a result, students who enrolled in new programs or programs that experienced increased capacity as a result of the new law began to graduate during the 2010-11 academic year. As shown in Exhibit 7, overall, the number of students graduating from nursing programs increased by 30% from 2008-09 to 2012-13. However, when comparing the two most recent academic years (2011-12 and 2012-13), the percentage increase of nursing graduates in all types of nursing programs was only 1.4% (from 14,923 to 15,128). The percentage change in graduates varied among the types of programs. The bridge curriculum programs experienced the largest increases, 74.3% in the number of practical nursing bridge graduates and 17.1% in the number of associate degree bridge curriculum graduates. In contrast, the number of practical nursing generic curriculum graduates decreased by 18.6% from 2011-12 to 2012-13. Graduates from bachelor's degree in nursing programs also declined slightly during this time period.

²⁰ Nursing programs admit students throughout the year, with several programs admitting students multiple times per year. We requested each nursing program to select a cohort of students for 2008 through 2012 and report to us the outcomes of these students over a one-year period.

² This data includes graduates and students enrolled and does not include the practical nursing (bridge curriculum) programs.

²¹ Other factors may affect the graduation rate of students. Factors for which OPPAGA could not control include students' economic stability, cost of programs, and curriculum changes.

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Exhibit 7
The Overall Number of Students Graduating from Nursing Programs Continued to Increase Slightly in 2012-13

			Graduates ¹			Percentag	e Change
Curriculum Type	2008-09 ²	2009-10	2010-11	2011-12	2012-13	2011-12 to 2012-13	2008-09 to 2012-13
Practical Nursing (LPN) – Generic	3,944	3,801	4,591	5,035	4,101	-18.6%	4%
Practical Nursing (LPN) – Bridge	23	19	93	101	176	74.3%	665%³
Associate Degree in Nursing – Generic	4,774	4,685	4,920	5,477	6,351	16.0%	33%
Associate Degree in Nursing – Bridge	873	1,014	1,330	1,787	2,092	17.1%	140%
Bachelor's Degree in Nursing – Generic	1,623	1,757	1,750	2,008	1,900	-5.4%	17%
Bachelor's Degree in Nursing – 2nd Degree	407	432	508	515	508	-1.4%	25%
Total	11,644	11,708	13,192	14,923	15,128	1.4%	30%

¹ Eighteen programs did not respond to the survey in 2013 but did respond in 2012. For these programs, we used the data reported for 2011-12. Five programs did not respond in 2013 and did not have data for the prior year; therefore, we did not include these programs in our analysis.

Source: OPPAGA survey of nursing education programs.

The licensure exam passage rates of the nursing programs created since 2009 that had graduates who took the licensure declined-approximately 73% had passage rates that were more than 10% below the national average for the 2013 calendar year. Since the statutory changes took effect in July 2009, 112 of the 231 newly-approved programs had graduates who took the National Council of State Boards of Nursing Licensure Examination (NCLEX) in calendar year 2013. Approximately 73% of these programs (82 of the 112) had exam passage rates that were more than 10% below the national average.²² During 2013, 24 of the 82 programs were on probation; if the remaining programs continue to have licensure passage rates 10% below the national average for another consecutive calendar year, Florida law requires the Board of Nursing to place these programs on probation.²³ Of the remaining 30 programs that had graduates who took the licensure exam, 10 had passage rates that were slightly below the national average, while the remaining 20

The overall licensure exam passage rate in Florida for associate degree in nursing programs was 74%, for licensed practical nursing programs was 75%, and for bachelor's degree in nursing programs was 88%; these rates were a decline from 2012. In addition, the overall number of students who passed the exam decreased compared to 2012. Appendix B lists the passage rates for each nursing program in Florida.

Most practical nursing program graduates (73%) that received their initial license in 2011 were likely employed in a nursing-related field. As the curriculum length for practical nursing programs is typically one year, data was available to determine if practical nursing students who graduated since the passage of the 2009 law were

² The 2008-09 data is prior to the law taking effect.

³ Since the law took effect, practical nursing (bridge curriculum) programs have grown from two programs in 2008-09 with enrollment to nine programs with enrollment in 2012-13, which accounts for the large percentage increase in graduates from 2008-09 to 2012-13.

programs met or exceeded the national average for the 2013 calendar year. 24, 25

 $^{^{22}\,\}mbox{All}$ of these programs were private institutions licensed by the Commission for Independent Education.

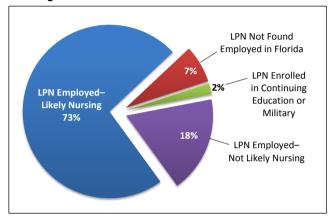
²³ These guidelines do not apply to programs that are accredited by a specialized nursing accrediting agency in accordance with s. 464.003(1), *F.S.*

²⁴ The national average exam passage rates for each program type vary from 85.18% for a bachelor's degree program, 81.43% for an associate degree program, and 84.63% for a practical nursing program.

²⁵ In calendar year 2012, 158 new bachelor's degrees in nursing program graduates took the NCLEX exam, while 2,555 new associate degree in nursing program graduates and 753 new practical nursing program graduates took the exam.

likely employed in a nursing-related field.²⁶ As of 2012, 73% of the practical nursing program graduates that received their initial license in 2011 were likely employed in a nursing-related field.²⁷ (See Exhibit 8.)

Exhibit 8
Most Graduates of Practical Nursing (LPN)
Programs Who Received Their Initial Nursing
Licenses in 2011 Were Likely Employed in
Nursing-Related Fields¹



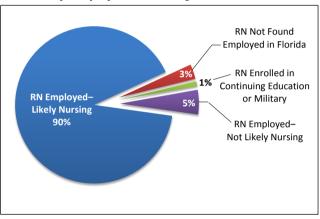
¹ The FETPIP data used in this analysis shows whether nurses were employed in a nursing-related industry, but it did not indicate that they were employed as nurses.

Source: OPPAGA analysis of licensure data from the Department of Health and unemployment insurance data from the Florida Education and Training Placement Information Program (FETPIP).

Most nursing program graduates (90%) that received their initial registered nurse license in 2011 were likely employed in a nursing-related field. Registered nurses (RNs) may be graduates of associate degree and bachelor's degree nursing

programs.²⁸ As of 2012, 90% of the associate or bachelor's nursing program graduates that received their initial RN license in 2011 were likely employed in a nursing-related field. (See Exhibit 9.) Appendix C shows the percentages of Florida nursing program graduates (practical, associate degree, and bachelor's degree) who received their licenses in 2007 through 2011 and were likely employed in a nursing-related field as of 2012.

Exhibit 9
Most Graduates of Nursing Programs Who Received
Their Initial Registered Nursing (RN) Licenses in 2011
Were Likely Employed in Nursing-Related Fields¹²



¹ The FETPIP data used in this analysis shows whether nurses were employed in a nursing-related industry, but it did not indicate that they were employed as nurses.

²⁶ This analysis is based on licensure data from the Department of Health and unemployment insurance data from the Florida Education and Training Placement Information Program (FETPIP). This data includes any nurses who received their licenses by passing the licensure exam in 2011 and may include students who graduated in prior years. The FETPIP data shows whether nurses are employed in a nursing-related industry but it does not indicate that they are employed as nurses. Nursing-related industries include hospitals, doctors' offices, assisted living facilities, nursing homes, and other patient care facilities. Nursing-related industries may also include educational programs that teach health care or health care insurance industries.

²⁷ This is consistent with the previous findings: in 2011, 72% of the practical nursing program graduates that received their initial license in 2010 were employed in a nursing-related field, while 21% of these graduates were not employed in a nursing-related field.

² Percentages do not add exactly to 100% due to rounding.Source: OPPAGA analysis of licensure data from the Department of Health and unemployment insurance data from the Florida Education and Training Placement Information Program (FETPIP).

This analysis is based on licensure data from the Department of Health and unemployment insurance data from the Florida Education and Training Placement Information Program (FETPIP). This data includes any nurses who received their licenses by passing the licensure exam in 2011 and may include students who graduated in prior years. The FETPIP data shows whether nurses are employed in a nursing-related industry, but it does not indicate that they are employed as nurses. Nursing-related industries include hospitals, doctors' offices, assisted living facilities, nursing homes, and other patient care facilities. Nursing-related industries may also include educational programs that teach health care or health care insurance industries.

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Appendix A

Retention of Florida Nursing Education Programs

Nursing Program Student Retention

Exhibit A-1 shows the number of new students enrolled in each type of nursing program who entered the programs in 2010, 2011, and 2012 and the percentage of students retained (i.e., still enrolled in the programs). Retention rates provide information on whether students persist in or complete their educational program a year later. We assessed retention in each type of nursing program using the cohort of students who entered the programs in 2010, 2011, and 2012. To calculate retention for each cohort, we added the number of graduates and the number of students still enrolled and divided by the number of newly enrolled students. Overall, the retention rate for students who entered in 2012 was slightly lower than the rates for those who entered in 2011.

The Percentage of Students Retained in Nursing Programs Decreased in 2013¹

	Students Entering in 2010 (Status as of 2011)	ing in 2010 of 2011)	Students Entering in 2011 (Status as of 2012)	ing in 2011 of 2012)	Students Entering in 2012 ² (Status as of 2013)	ing in 2012² of 2013)
Curriculum Type	Total New Students Enrolled	Percentage Retained	Total New Students Enrolled	Percentage Retained	Total New Students Enrolled	Percentage Retained
Practical Nursing (LPN) – Generic	2,947	%62	2,494	%62	2,954	81%
Associate's Degree in Nursing – Generic	4,605	85%	4,472	82%	6,305	81%
Associate's Degree in Nursing – Bridge	1,173	83%	1,440	%68	2,299	84%
Bachelor's Degree in Nursing – Generic	1,478	85%	2,023	94%	1,665	%86
Bachelor's Degree in Nursing – 2nd Degree	538	%28	459	%86	929	%56
Total	10,741	84%	10,888	86%	13,799	84%

Nursing programs admit students throughout the year, with several programs admitting students multiple times per year. We requested each nursing program to select a cohort of students for 2010, 2011, and 2012 and report to us the outcomes of these students over a one-year period.

Source: OPPAGA survey of nursing education programs

² Eighteen programs did not respond to the survey in 2013 but did respond in 2012. For these programs, we used the data reported for 2011-12. For these programs, we used the data reported for 2011-12. Five programs did not respond in 2013 and did not have data for the prior year; therefore, we did not include these programs in our analysis.

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Appendix B

Licensed Practical Nurse Program Graduate Exam Scores

Exhibit B-1 shows for each institution the passage rates for licensed practical nurse program graduates who took the National Council of State Boards of Nursing's National Council Licensure Examination (NCLEX) during calendar years 2011 through 2013.1,2 The percentage of exam takers who passed the exam continued to decline from 2012 to 2013 (77% to 75%). Programs approved since the 2009 law are highlighted in yellow.

Exhibit B-1 Passage Rates for Licensed Practical Nurse Program Graduates¹

	ממממנים								
	2	2011 Calendar Year	ır Year	5(2012 Calendar Year	. Year	2	2013 Calendar Year	Year
NCLEX	Exam	Number	Percentage	Exam	Number	Percentage	Exam	Number	Percentage
Code School	Takers	Passed	Passed	Takers	Passed	Passed	Takers	Passed	Passed
70-201 Academy for Nursing and Health Occupations	149	116	%82	114	92	81%	63	22	%28
70–240 American Health Institute							4	2	20%
70-138 American Medical Academy				9	2	83%	0	0	
70–152 Azure College – Boca Raton							-	-	100%
70-117 Azure College - Miami Gardens				20	4	20%	26	11	20%
70-147 Azure College - Sebring							24	18	75%
70-107 Bradford-Union Area Vocational Technical Center	17	16	94%	15	15	100%	19	17	%68
70–172 Brevard Community College	38	56	%89	32	28	%88	30	25	83%
70–133 Brewster Technical Center	17	15	%88	15	13	%28	21	19	%06
70–186 Broward Atlantic Technical Center	88	82	%96	88	84	82%	93	98	95%
70-210 Broward Blanche Ely High School	6	8	%68	18	17	94%	10	7	%02
70-202 Broward McFatter Technical Center	126	105	83%	122	105	%98	122	104	85%
70-205 Broward Sheridan Technical Center	104	91	88%	101	83	82%	120	93	%82
70–127 Cambridge Institute of Allied Health and Technology – Altamonte Springs	16	9	38%	12	7	28%	32	24	75%

¹ This includes both licensed practical nurse (generic program) students as well as licensed practical nurse (bridge program) students.

² This data includes only first-time test takers.

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	2	2011 Calendar Year	r Year	20	2012 Calendar Year	Year	20	2013 Calendar Year	Year
NCLEX Code School	Exam Takers	Number Passed	Percentage Passed	Exam Takers	Number Passed	Percentage Passed	Exam Takers	Number Passed	Percentage Passed
70–227 Cambridge Institute of Allied Health and Technology – Delray Beach				က	-	33%	4	2	20%
70-135 Capscare Academy for Healthcare Education				13	4	31%	42	15	36%
70–277 Caregiver Education	30	10	33%	32	1	34%	9	0	%0
70–272 Carleen Home Health School	24	19	%62	15	2	33%	6	2	22%
70–288 Casel Healthcare Training Center				41	24	29%	31	16	25%
70-132 Center for Allied Health & Nursing Education - Jacksonville				47	41	%28	53	43	81%
70-155 Center for Allied Health & Nursing Education – Tampa	28	9/	%26	110	100	91%	62	61	%86
70–131 Centura Institute	42	20	48%	20	30	%09	22	16	64%
70-166 Charlotte Technical Center	48	44	95%	39	59	74%	75	62	83%
70-100 Chipola College	11	11	100%	8	8	100%	10	10	100%
70-105 Choice Technical Center	36	35	%26	41	40	%86	35	35	100%
70–237 Christian International School of Healthcare Professions				6	6	100%	က	က	100%
70–102 College of Central Florida	27	27	100%	28	56	93%	31	28	%06
70–282 Community Educational School – Indian River County	7	9	%98	7	7	100%	8	8	100%
70–125 Concorde Career Institute	53	45	82%	41	37	%06	38	36	82%
70-221 Coral Ridge Training School	47	10	21%	20	2	10%	2	0	%0
70–268 Dade County – Homestead Senior High	14	13	63%	11	∞	73%	9	2	83%
70–153 Dade County – Lindsey Hopkins Technical Center	71	63	%68	62	52	84%	26	71	73%
70-254 Dade County - Miami Lakes Technical Center	124	102	82%	116	87	75%	81	64	%62
70–248 Dade County – Robert Morgan Technical Center	120	105	%88	109	100	%76	20	63	%06
70-148 Dade Medical College - Hialeah				31	18	28%	0	0	
70-270 Dade Medical College - Hollywood				2	က	%09	0	0	
70–284 Dade Medical College – Homestead				∞	4	20%	2	-	20%
70-274 Dade Medical College – Miami				4	-	72%	0	0	
70–185 Daytona State College	92	64	%86	98	81	94%	64	61	82%
70-163 DeSoto County School of Practical Nursing	#	9	22%	10	80	%08	∞	9	75%
70-110 Dr. Earl Lennard High School - Ruskin	4	0	%0	-	0	%0	0	0	
70–154 Erwin Vocational Technical Center	137	117	82%	155	143	%26	133	122	95%

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		2011 Calendar Year	ır Year	5(2012 Calendar Year	. Year	2	2013 Calendar Year	Year
NCLEX Code School	Exam	Number	Percentage Passed	Exam	Number	Percentage Passed	Exam	Number Passed	Percentage Passed
		2000	00000		5000	0000	15	10	% <u>/</u> 9
70–279 Faith Medical Institute				9	2	83%	8	2	25%
70–182 First Coast Technical College	44	37	84%	45	38	84%	74	09	81%
70-106 Florida Gateway College	26	20	%68	32	31	%26	22	51	%68
70–216 Florida National University – Hialeah	22	12	22%	19	8	45%	17	4	24%
70–231 Florida National University – Miami	26	23	%88	25	11	44%	2	3	%09
70–179 Florida State College at Jacksonville	66	70	71%	104	72	%69	74	40	54%
70–181 Fort Myers Institute of Technology – Fort Myers	62	73	%76	35	34	%26	48	45	94%
70-219 Fort Myers Institute of Technology - Labelle	က	က	100%	8	8	100%	2	2	100%
70-123 Fortis College - Tampa	63	48	%9/	29	52	%82	52	45	%28
70–161 Gadsden Health Center for Education				6	6	100%	4	4	100%
70-104 Galen School of Nursing	212	193	91%	218	190	%28	119	91	%92
70–224 Genesis Vocational Institute							-	0	%0
70-260 Green Cross School of Nursing	31	15	48%	1	-	%6	10	4	40%
70-197 Gulf Coast State College	30	27	%06	32	28	%88	59	25	%98
70-118 Health Opportunity Technical Center	74	25	34%	51	10	50%	16	0	%0
70-126 Heath Education Training School				4	0	%0	4	-	25%
70–264 Hope Health Career Institute	16	8	20%	59	8	28%	13	က	23%
70–149 Horizon Healthcare Institute – Ft. Myers							22	8	36%
70–246 Horizon Healthcare Institute – Palm Bay							-	0	%0
70–206 Horizon Healthcare Institute – Port Charlotte							7	2	29%
70–243 Ideal Professional Institute							-	-	100%
70-145 Immokalee Technology Center	14	11	%62	32	59	91%	15	12	%08
70-177 Indian River State College	28	53	91%	72	99	95%	29	22	%86
70-169 Inlet Grove Adult Community High School				6	8	%68	3	3	100%
70-116 Inlet Grove Community High School	48	32	%29	2	-	50%	-	0	%0
70-213 International Academy Training Center				18	2	78%	#	-	%6
70–217 International Institute for Healthcare Professionals – Boca Raton							3	2	%29

	2	2011 Calendar Year	r Year	20	2012 Calendar Year	Year	2(2013 Calendar Year	Year
NCLEX		Number	Percentage	Exam	Number	Percentage	Exam	Number	Percentage
Code School	Takers	Passed	Passed	Takers	Passed	Passed	Takers	Passed	Passed
70–241 International Institute for Healthcare Professionals – Ft. Pierce							6	2	22%
70-178 Lake County Technical Center	71	29	94%	72	99	95%	20	44	88%
70-142 Lee County High Technical Center North	33	33	100%	32	31	%26	28	27	%96
70-130 Lincoln Technical Institute	89	20	74%	123	28	47%	78	45	28%
70-199 Lively Technical Center	53	49	%26	42	36	%98	38	34	%68
70–236 Locklin Technical Center	-	-	100%	6	8	%68	20	18	%06
70–170 Lorenzo Walker Institute of Technology	62	44	71%	44	33	75%	55	40	73%
70–183 Manatee Technical Institute	75	69	95%	63	28	95%	9/	65	%98
70-139 Medical Prep Institute of Tampa Bay				20	24	48%	27	20	74%
70-141 Med-Life Institute – Bradenton							14	4	29%
70–209 Med-Life Institute – Kissimmee							28	1	39%
70–208 Med-Life Institute – Miramar							9	-	17%
70–239 Med-Life Institute – Naples				2	0	%0	46	6	20%
70–238 Med-Life Institute – Pompano Beach				13	2	15%	26	9	11%
70–223 Med-Life Institute – West Palm Beach							က	0	%0
70–124 Medtech Institute				4	-	25%	27	11	41%
70–115 MedVance Institute – Miami	33	25	%9/	27	23	82%	15	13	87%
70-111 MedVance Institute – Palm Springs	38	19	20%	39	24	62%	41	27	%99
70–109 MedVance Institute – Stuart	40	56	%59	75	28	%//	42	39	%26
70-160 Mercy Hospital School of Practical Nursing	89	52	%9/	92	26	%98	63	28	95%
70-140 Miami Dade College	2	4	%08	84	51	%19	09	43	72%
70–220 North Broward Technical Center							11	7	64%
70–189 North Florida Community College	24	20	83%	23	19	83%	18	18	100%
70–187 Orlando Tech	64	22	%68	09	49	82%	63	47	75%
70–180 Palm Beach County Schools	6	0	%0	-	0	%0	16	0	%0
70–150 Palm Beach State College	35	34	%26	44	41	83%	30	27	%06
70–228 Palm Beach Vocational Institute				44	12	27%	33	2	15%
70–164 Pasco Hernando Community College	62	98	91%	81	78	%96	75	73	%26

	2	2011 Calendar Year	r Year	30	2012 Galendar Year	. Year	6	2013 Calendar Year	Year
		- 1			N. L.			M. L.	
NCLEA Code School	Exam Takers	Number Passed	Percentage Passed	Exam Takers	Number Passed	Percentage Passed	Exam Takers	Number Passed	Percentage Passed
70-157 Pensacola State College	27	26	%96	39	34	%28	42	35	83%
70–194 Pinellas Technical Education Center – Clearwater	125	107	86%	86	95	94%	78	75	%96
70-151 Pinellas Technical Education Center - St. Petersburg	98	80	83%	72	64	%68	81	81	100%
70–129 Premiere International Institute ²				2	9	%98	3	0	%0
70–222 Rasmussen College – Land O' Lakes							27	25	%86
70-119 Rasmussen College – New Port Richey	45	43	%96	31	23	74%	4	2	20%
70–214 Rasmussen College – Ocala							က	2	%29
70–232 Rasmussen College – Tampa				-	0	%0	0	0	
70–108 Ridge Career Center	28	22	82%	59	59	100%	52	47	%06
70–290 Rose Training Institute	37	12	32%	15	2	33%	2	0	%0
70–249 Saber, Inc.	114	62	54%	66	26	22%	72	43	%09
70–196 Santa Fe College	22	22	100%	20	19	%56	22	22	100%
70-193 Sarasota County Technical Institute	62	28	94%	28	54	%26	54	52	%96
70-175 Seminole State College	33	31	94%	32	31	%26	31	59	94%
70-112 Sigma College - Oakland Park	111	25	23%	82	24	73%	75	14	19%
70-192 Sigma College - Royal Palm Beach				-	0	%0	0	0	
70-168 South Florida Community College	22	25	100%	20	20	100%	24	23	%96
70-159 South Technical Academy	4	0	%0	2	-	20%	6	7	%82
70–134 Southeastern College – Green Acres	20	37	74%	36	22	%19	18	17	94%
70-144 Southeastern College - Jacksonville	54	53	%86	45	39	%28	37	31	84%
70–269 Southeastern College – Miami Lakes	61	54	89%	29	28	%26	19	19	100%
70–207 Southeastern College – New Port Richey	82	75	91%	49	46	94%	32	59	91%
70–190 Southeastern College – St. Petersburg	42	39	83%	32	28	%88	30	27	%06
70-121 Southwest Florida Technical Institute				35	16	46%	42	18	43%
70–203 Sunshine Training Center				2	-	20%	10	4	40%
70-173 Suwannee-Hamilton Technical Center	15	11	73%	18	17	94%	17	14	82%
70-128 Tampa Bay Technical High School	17	4	24%	2	2	40%	0	0	
70-114 Taylor College	47	33	%02	22	48	84%	53	45	85%
70–136 Technical Education Center Osceola	61	09	%86	30	29	%26	31	30	%26

	2	2011 Calendar Year	r Year	2(2012 Calendar Year	. Year	2	2013 Calendar Year	· Year
NCLEX	Exam	Number	Percentage	Exam	Number	Percentage	Exam	Number	Percentage
Code School	Takers	Passed	Passed	Takers	Passed	Passed	Takers	Passed	Passed
70–286 Techni-Pro Institute	2	4	%08	20	80	40%	38	9	16%
70-191 Tom P. Haney Technical Center	40	38	82%	45	42	83%	32	28	%88
70–195 Traviss Career Center	65	29	91%	20	62	%68	52	49	94%
70-113 Victoria Medical College				10	က	30%	-	0	%0
70–162 Vintex Training Institute	22	23	40%	18	9	33%	∞	2	25%
70–215 Virginia College at Pensacola	22	19	%98	24	22	95%	30	28	%86
70–120 Walton Career Development Center	31	30	%26	42	41	%86	37	36	%26
70-171 Washington-Holmes Technical Center	40	38	82%	49	40	85%	37	34	95%
70-212 West Lawrence School of Nursing							9	က	20%
70–167 Withlacoochee Technical Institute	16	15	94%	56	25	%96	7	#	100%
Total Statewide ³	4,617	3,695	80%	4,724	3,657	%//	4,315	3,251	75%
National Average			82%			82%			85%

¹ All percentages are rounded to the nearest whole number. Remedial programs were not included in the table or statewide totals.

² Premiere International Institute was previously named West Lawrence Academy.

³ The statewide totals include graduates of closed programs.

Source: National Council Licensure Examination for Practical Nurses Quarterly Report from the Florida Board of Nursing.

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Associate Degree in Nursing (Generic and Bridge) Program Graduate Exam Scores

associate degree in nursing (generic curriculum) program students as well as associate degree in nursing (bridge curriculum) program students. While the percentage of exam takers who passed declined from 2012 to 2013 (83% to 74%), the overall number of students passing Exhibit B-2 shows for each institution the passage rates for associate degree in nursing program graduates who took the National Council of State Boards of Nursing's National Council Licensure Examination (NCLEX) during calendar years 2011 through 2013.3 This includes both the exam increased (6,182 to 6,407). Programs approved since the 2009 law are highlighted in yellow.

Exhibit B-2 Passage Rates for Associate Degree in Nursing Program Graduates¹

rassaye nates ioi associate degree iii nuisiiiy rioyiaiii	Glaunales	S							
	5(2011 Calendar Year	. Year	5(2012 Calendar Year	. Year	20	2013 Calendar Year	/ear
NCLEX	Exam	Number	Percentage	Exam	Number	Percentage	Exam	Number	Percentage
Code School	Takers	Passed	Passed	Takers	Passed	Passed	Takers	Passed	Passed
70-463 Academy for Nursing and Health Occupations							191	135	71%
70–410 Adventist University of Health Sciences	136	116	82%	162	138	82%	178	147	83%
70–458 Azure College – Miami Gardens				48	19	40%	140	39	78%
70-459 Azure College - Sebring							8	2	%89
70-470 Brevard Community College - Cocoa Campus	74	92	%88	29	52	%88	89	55	81%
70-438 Brevard Community College - Palm Bay Campus	29	22	%26	53	47	%68	52	45	%28
70-475 Broward College	373	342	95%	360	352	%86	329	309	94%
70–466 Brown Mackie College							48	25	25%
70–700 Burnett International College							31	6	78%
70-429 Cambridge Medical Institute	13	6	%69	20	18	36%	36	14	39%
70-479 Carleen Home Health School				23	13	21%	199	45	23%
70-401 Chipola College	53	48	91%	29	20	75%	62	49	%62
70–715 Christian International School of Healthcare Professions							2	4	%08
70-437 City College - Ft. Lauderdale	46	30	%59	107	22	21%	99	28	45%

 $^{^{\}rm 3}$ This data includes only first-time test takers.

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		2011 Calendar Year	ır Year	2(2012 Calendar	. Year	20	2013 Calendar Year	Year
NCLEX Code School	Exam Takers	Number Passed	Percentage Passed	Exam Takers	Number Passed	Percentage Passed	Exam Takers	Number Passed	Percentage Passed
6	-	-	100%	104	89	65%	41	22	54%
70-451 College of Central Florida - Lecanto Campus	4	4	100%	20	19	828	0	0	
70-482 College of Central Florida – Ocala Campus	91	28	%96	02	29	%96	103	93	%06
70–433 Concorde Career Institute – Jacksonville	36	18	20%	34	27	79%	32	22	%69
70–499 Concorde Career Institute – Miramar	56	15	28%	40	30	75%	35	18	21%
70–419 Concorde Career Institute – Orlando				2	3	%09	23	16	%02
70-421 Concorde Career Institute - Tampa	14	10	71%	24	18	75%	59	24	83%
70-431 Dade Medical College - Hollywood	42	14	33%	267	103	39%	106	41	39%
70-432 Dade Medical College - Homestead				32	56	81%	37	22	29%
70-408 Dade Medical College – Miami	22	12	22%	128	29	46%	117	39	33%
70–452 Dade Medical College – Miami Lakes				22	43	26%	51	23	45%
70–723 Dade Medical College – West Palm Beach							6	7	78%
70–483 Daytona State College	188	178	82%	220	203	95%	215	195	91%
70–472 Edison State College	270	240	%68	241	222	95%	226	202	%68
70–430 Everest University – Brandon	15	14	83%	59	27	93%	33	20	61%
70-417 Florida Career College - Boynton Beach				105	42	40%	83	32	39%
70-722 Florida Career College – Lauderdale Lakes							4	4	100%
70-478 Florida Gateway College	73	99	%06	9/	74	%26	65	22	82%
70-474 Florida Keys Community College	33	32	%26	61	26	95%	40	37	93%
70-453 Florida National University - Hialeah Main Campus	22	12	22%	33	15	45%	26	22	39%
70-443 Florida National University - Hialeah Training Campus				30	21	%02	51	17	33%
70-454 Florida National University - Miami				61	35	22%	39	17	44%
70-473 Florida State College at Jacksonville	394	331	84%	373	332	89%	304	566	%88
70-412 Fortis College - Largo				2	-	20%	22	38	%69
70-447 Fortis College – Pensacola	114	20	61%	29	22	%26	99	22	83%
70–422 Fortis Institute				21	17	81%	52	37	71%
70–411 Galen Health Institute	133	115	%98	147	139	82%	203	160	%62
70–481 Gulf Coast State College	20	99	94%	101	96	92%	110	87	%62

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	6	2011 Calendar Vear	г Ураг	6	2012 Calendar Vear	rVear	90	2013 Calendar Year	Vear
NPI EX	Fvam 4	Nimber	Dercentage	Evam 2	Mimber	Dercentage	Evam 20	Nimber	Dercentage
Code School	Takers	Passed	Passed	Takers	Passed	Passed	Takers	Passed	Passed
70-444 Herzing College	45	42	%26	17	10	29%	82	0/	82%
70–469 Hillsborough Community College	225	179	80%	321	270	84%	283	214	%9/
70-702 Hope College of Arts and Sciences							35	17	49%
70–477 Indian River State College	136	123	%06	119	117	%86	107	26	91%
70–732 International Institute for Healthcare Professionals – Boca Raton							2	4	%08
70–729 International Institute for Healthcare Professionals – Ft. Pierce							-	-	100%
70-448 ITT Technical Institute - Ft. Lauderdale							-	-	100%
70–488 ITT Technical Institute – Ft. Myers	က	-	33%	-	-	100%	17	13	%9/
70–435 ITT Technical Institute – Jacksonville				2	0	%0	28	12	43%
70–434 ITT Technical Institute – Lake Mary				4	4	100%	47	22	47%
70-446 ITT Technical Institute – Miami							2	-	20%
70-445 ITT Technical Institute - Tallahassee							25	14	26%
70-498 ITT Technical Institute - Tampa				65	42	65%	99	28	42%
70-404 Jersey College – Tampa ²	24	23	%96	140	110	%62	66	92	%99
70-456 Jersey College – Jacksonville ²				21	20	65%	73	49	%29
70-735 Jersey College – Ft. Lauderdale ²							-	0	%0
70-442 Kaplan College				-	-	100%	46	23	20%
70-441 Kaplan University	22	#	20%	-	-	100%	19	6	47%
70-423 Keiser University – Ft. Lauderdale	33	56	%6/	25	53	83%	51	41	%08
70-490 Keiser University – Jacksonville	28	22	%6/	43	38	88%	28	21	75%
70-407 Keiser University – Kendall	33	28	85%	39	38	%26	32	20	63%
70-403 Keiser University – Lakeland	33	27	82%	54	49	91%	64	49	%//
70-415 Keiser University - Melbourne	22	47	82%	54	49	91%	61	22	%06
70–455 Keiser University – Orlando	36	32	%68	34	31	91%	64	52	81%
70-440 Keiser University – Port Saint Lucie							32	31	%26
70–420 Keiser University – Sarasota	45	43	%96	36	35	%26	36	34	94%
70–426 Keiser University – Tallahassee	18	15	83%	11	10	91%	27	21	78%

	2	2011 Calendar Year	r Year	2	2012 Calendar Year	r Year	20	2013 Galendar Year	Year
NCLEX Code School	Exam Takers	Number Passed	Percentage Passed	Exam Takers	Number Passed	Percentage Passed	Exam Takers	Number Passed	Percentage Passed
∞	6	∞	%68	40	35	88%	33	28	85%
70–406 Keiser University – West Palm Beach	47	35	74%	20	43	%98	54	48	%68
70-405 Lake-Sumter State College	02	89	%26	98	80	83%	74	29	%08
70–713 Management Resources Institute							26	45	%08
70-733 Medical Prep Institute of Tampa Bay							23	23	100%
70–719 Med-Life Institute – Pompano Beach							15	2	13%
70-409 Mercy Hospital College of Nursing – Miami	35	30	%98	34	32	94%	37	31	84%
70–484 Miami Dade College	515	434	84%	539	454	84%	575	446	%82
70-416 North Florida Community College	23	19	83%	21	21	100%	24	22	95%
70-450 Northwest Florida State College	22	22	100%	48	48	100%	89	61	%06
70–492 Palm Beach State College – Belle Glade	13	13	100%	7	80	73%	16	14	%88
70–486 Palm Beach State College – Lake Worth	143	138	%26	154	145	94%	161	136	84%
70–728 Palm Beach Vocational Institute							20	6	45%
70-464 Pasco Hernando Community College	161	138	%98	151	129	82%	175	148	85%
70-487 Pensacola State College – Warrington Campus	218	178	85%	302	220	73%	255	154	%09
70–476 Polk State College	142	139	%86	147	143	%26	154	140	91%
70-414 Professional Training Center				20	10	20%	42	15	36%
70–436 Rasmussen College – Ft. Myers Campus				34	56	%9/	96	92	%89
70-491 Rasmussen College – New Port Richey				22	46	84%	135	92	%89
70–495 Rasmussen College – Ocala Campus	44	36	85%	93	75	81%	103	82	%08
70-494 Rasmussen College – Tampa Campus							52	33	63%
70–493 Saber, Inc.				33	21	64%	83	51	61%
70–428 Sanford Brown Institute	40	21	23%	34	23	%89	24	12	20%
70–471 Santa Fe College	137	129	94%	131	124	82%	134	115	%98
70–705 Schiller International University							-	-	100%
70-462 Seminole State College	187	181	%26	150	149	%66	506	197	%96
70–701 Sigma College – Oakland Park							09	18	30%
70–718 Sigma College – Royal Palm Beach							1	0	%0

	2(2011 Calendar Year	r Year	2	2012 Calendar Year	r Year	20	2013 Calendar Year	Year
NCLEX	Exam	Number	Percentage	Exam	Number	Percentage	Exam	Number	Percentage
Code School	Takers	Passed	Passed	Takers	Passed	Passed	Takers	Passed	Passed
70-400 South Florida State College	23	47	%68	36	34	84%	47	42	%68
70-413 Southeastern College - Miami Lakes	19	14	74%	23	22	%96	34	24	71%
70-439 Southeastern College - St. Petersburg							2	4	%08
70–714 Southwest Florida College							-	-	100%
70-731 Southwest Florida Technical Institute							8	2	25%
70–425 St. Johns River State College	65	29	91%	65	64	%86	71	63	%68
70-489 St. Petersburg College	397	348	88%	344	315	85%	340	282	83%
70-480 State College of Florida - Manatee-Sarasota	145	143	%66	137	135	%66	148	138	63%
70-468 Tallahassee Community College	49	44	%06	73	72	%66	84	75	%68
70–427 Taylor College – Belleview				17	10	29%	16	11	%69
70-457 Taylor College – Belleview	15	12	%08	30	16	23%	42	22	25%
70–740 Techni-Pro Institute							6	0	%0
70-497 Ultimate Medical Academy							27	17	63%
70-467 Valencia College	293	275	94%	566	252	%26	237	223	94%
70-703 Victoria Medical College							9	-	17%
70–424 Virginia College				12	∞	%29	22	Ξ	20%
Total Statewide ³	4,690	4,010	%98	7,444	6,182	83%	8,707	6,407	74%
National Average			82%			%06			81%

¹ All percentages are rounded to the nearest whole number. Remedial programs were not included in the table or statewide totals.

² Jersey College was previously named Center for Allied Health and Nursing Education.

³ The statewide totals include graduates of closed programs.

Source: National Council Licensure Examination for Registered Nurses Quarterly Report from the Florida Board of Nursing.

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Bachelor of Science in Nursing (Generic and Second Degree) Program **Graduate Exam Scores**

of science in nursing (generic program) students and bachelor of science in nursing second degree students. The percentage of exam takers Exhibit B-3 shows for each institution the passage rates for bachelor of science in nursing program graduates who took the National Council of State Boards of Nursing's National Council Licensure Examination (NCLEX) in calendar years 2011 through 2013.4 This includes both bachelor who passed decreased from 2012 to 2013 (94% to 88%) as did the number of students passing the exam (2,300 to 2,246).

Passage Rates for Bachelor of Science in Nursing Program Graduates¹

	2011 6	2011 Calendar Year	r Year	2	2012 Calendar Year	Year	20	2013 Galendar Year	Year
NCLEX		Number	Percentage		Number	Percentage		Number	Percentage
Code School	Takers	Passed	Passed	Takers	Passed	Passed	Takers	Passed	Passed
70–592 Barry University	150	127	85	154	145	94	103	75	73%
70–569 Bethune-Cookman University	63	49	78	52	45	87	52	32	%29
70-525 Chamberlain College of Nursing - Jacksonville	7	9	98	26	20	68	71	20	%02
70-540 Chamberlain College of Nursing – Miramar							6	6	100%
70–598 Horida A&M University	73	62	85	84	9/	06	82	61	74%
70–566 Florida Atlantic University	62	28	94	9/	20	92	75	70	93%
70–503 Horida Gulf Coast University	22	23	93	63	62	86	51	47	95%
70–589 Florida International University	149	140	94	223	211	92	175	156	%68
70-520 Florida Southern College	21	16	9/	27	21	28	28	17	61%
70–590 Horida State University	108	103	95	110	106	96	121	107	%88
70–560 Jacksonville University	72	99	92	74	73	66	87	80	95%
70–508 Miller's College of Nursing							_	-	100%
70–578 Nova Southeastern University – Ft. Lauderdale	145	137	94	216	195	06	249	221	%68
70–596 Nova Southeastern University –Ft. Myers	21	19	06	29	49	83	92	20	%99
70-530 Palm Beach Atlantic University	30	59	97	52	48	92	41	35	82%

⁴ This data includes only first-time test takers.

	2	2011 Calendar Year	r Year	2	2012 Calendar Year	r Year	20	2013 Calendar Year	Year
NCLEX Code School	Exam Takere	Number Passed	Percentage Passed	Exam Takere	Number Passed	Percentage Passed	Exam Takere	Number Passed	Percentage Passed
	84	69	82	98	81	94	86	88	%06
70–513 Professional Training Centers							-	0	%0
70–515 Remington College of Nursing	71	99	93	9/	73	96	73	69	%26
70–504 South University – Tampa	80	69	98	92	20	82	98	69	%08
70–570 South University – West Palm Beach	22	52	91	28	22	92	20	22	%62
70–567 University of Central Florida	237	227	96	218	215	66	222	212	%26
70–585 University of Florida – Gainesville	128	117	91	186	179	96	239	221	%76
70–591 University of Miami	180	172	96	120	118	86	189	181	%96
70–594 University of North Florida	128	113	88	115	112	26	106	102	%96
70–565 University of South Florida	210	199	92	184	172	93	186	169	91%
70–510 University of Tampa	39	38	26	37	36	26	40	39	%86
70–505 University of West Florida	59	27	93	38	38	100	34	30	%88
Total Statewide	2,201	2,014	95%	2,449	2,300	94%	2,565	2,246	88%
National Average			89%			92%			85%

¹ All percentages are rounded to the nearest whole number. Remedial programs were not included in the table or statewide totals.

Source: National Council Licensure Examination for Registered Nurses Quarterly Report from the Florida Board of Nursing.

 $^{^{\}rm 2}$ The statewide totals include graduates of closed programs.

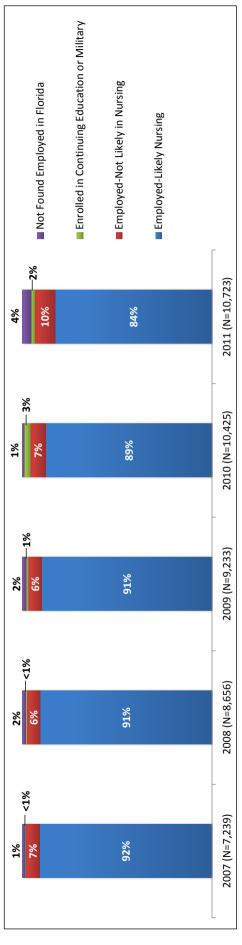
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Appendix C

Employment Outcomes of Florida Nursing Education Program Graduates

in a nursing-related field as of 2012. The data showed that most individuals who graduated from a Florida nursing program and received a license to practice nursing were employed in nursing-related fields in Florida. For example, 92% of 2007 licensees, 91% of 2008 licensees, 91% of 2009 licensees, 89% of 2010 licensees, and 84% of 2011 licenses were employed in a health care-related field in Florida.⁶ To determine how many graduates were likely employed in nursing fields in Florida, we obtained data on individuals who were approved for a nursing license (practical nursing or professional nursing) in 2007, 2008, 2009, 2010, and 2011 and selected those individuals who reported graduating from a Exhibit C-1 shows the percentages of Florida nursing program graduates who received their licenses in 2007 through 2011 and were employed Florida nursing school. We matched these individuals to the Florida Education and Training Placement Information Program (FETPIP) unemployment insurance database to determine if they were employed in Florida and where they were employed.

Most Graduates of Florida Nursing Programs Who Received a Nursing License from 2007 through 2011 Were Likely Employed in Nursing-Related Fields in 2012¹



¹ Percentages do not add exactly to 100% due to rounding.

Source: OPPAGA analysis of licensure data from the Department of Health and unemployment insurance data from the Florida Education and Training Placement Information Program (FETPIP).

⁵ The 2007, 2008, 2009, 2010, 2011, and 2012 calendar years were the most recent years available for this analysis, as the unemployment insurance database runs a year behind.

⁶ In 2011, all of the licensees identified as "enrolled in continuing education or in the military" were enrolled in continuing education.

The Florida Legislature

Office of Program Policy Analysis and Government Accountability



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