

July 30, 2014

Senator David Heitmeier, Chairman  
Health and Welfare Committee  
P.O. Box 94183  
Baton Rouge, LA 70804

Dear Representative Heitmeier,

The Louisiana State Board of Nursing (LSBN) hereby submits the following report required by La.R.S. 49:968 (D)(1)(b) and announces its intention to proceed with rule making by finalizing the June 20, 2014, Notice of Intent, captioned as Fees for Registration and Licensure (LAC46:XLVII§3341.A.1-.B.1). This notice of intent was duly promulgated and published on pages 1198-1199 of the *Louisiana Register*.

This rule-making is informed by authority of the LSBN granted in R.S. 37.918 to develop, adopt and revise rules and regulations in the Louisiana Nurse Practice Act. LSBN proposes to amend Chapter 33 in accordance with R.S. 97.911 et. seq., with particular emphasis §3341.A.1-B.1. The proposed rule for increases will be utilized for operating funds which will further the mission of the Louisiana State Board of Nursing. Top funding expenditures will address key operation issues and process improvements including: disaster preparedness, paperless systems, workforce planning and research through the Louisiana Center for Nursing, personnel costs and related benefits, caseload complexity in investigative and legal services, monitoring and recovery services through Recovering Nurse Program (RNP) and the LSBN's adoption and implementation of the National Council of State Boards of Nursing (NCSBN) evidence-based regulatory management system. With the current overall growth rate of three percent annually in the number of nurses served by the LSBN along with an increase in the number of criminally and drug related complaints, it is projected that LSBN's annual operational expenses will exceed the revenue currently generated. The fundamental purpose of the LSBN is to protect the public by insuring excellence in practice by RNs and APRNs in the state. The increased revenue generated from the modest increase in fees will impact the LSBN's ability to better serve the public.

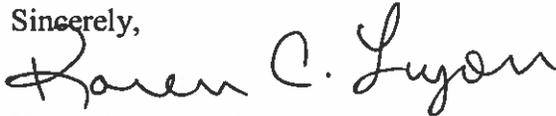
The LSBN held a public hearing pursuant to La.R.S.49:953(A) (2) on July 29, 2014. No member of the public appeared to address the rule. LSBN received four e-mails and two letters in reference to the proposed rule change and these documents are attached herewith. Comments received were generally in reference to the following:

- the amount of the increase
- operate within the constraints of the current budget and limit services offered by the LSBN
- frequency of renewals

After reviewing the submitted e-mails from licensees and the lack of testimony at the July 29, 2014 Public Hearing, the Board is moving forward with rule promulgation without any changes to the proposed rule.

Subject to legislative oversight by either the House or Senate Health and Welfare Committee, the board intends to submit a Rule to the Office of the State Register for publication. Please contact Dr. Karen Lyon at 225-755-7576 if the board may be of any assistance to you concerning this rule.

Sincerely,



Karen C. Lyon, PhD, APR, ACNS, NEA  
Executive Director  
Louisiana State Board of Nursing  
17373 Perkins Road  
Baton Rouge, La 70810  
225-775-7576

KL: mc

cc: Chair, House Health & Welfare Committee  
Via-Email: APA.H-HW@legis.la.gov  
Senate President  
Via-Email: APA.SenatePresident@legis.la.gov  
Speaker, House of Representatives  
Via-Email: Via-E-mail: APA.HouseSpeaker@legis.la.gov  
Editor, Louisiana Register  
Via-Email: Catherine Brindley@la.gov

## **Comment Summary Response & Concise Statement**

TITLE 46

PROFESSIONAL AND OCCUPATIONAL STANDARDS

Part XLVII. Nurses: Practical Nurses and Registered Nurses

Subpart 2. Registered Nurses

Chapter 33: Fees for Registration

LAC46XLVII§3341.A.1-B.1

### **1. COMMENT: E-mail response from June Borazani DNP, RN,CPHQ not in support of the proposed rule changes and subsequent LSBN response.**

I strongly object to the proposed fee increase. I feel it is an unreasonable increase which will burden working nurses. I find it especially concerning that one of the reasons listed for the increase is because of criminal and drug related complaints. Why not pass on these costs to those individuals? Why penalize those of who adhere to the rules? Why can't state agencies including the LSBN learn to operate within their financial means like the rest of us? I have no one to put a hand out to when I'm short of money. Why is that every time a state agency falls short of money, it looks to the public for a handout to meet its shortfall? Maybe if the public felt that agencies like the LSBN tightened their belts like the rest of us hardworking citizen nurses before asking for more money, there might be less opposition to these fee hike proposals.

#### ***LSBN Response:***

First: In the last 15 years, the LSBN has experienced growth of 74% in terms of number of RNs licensed (from 34,867 to 60,508). In terms of APRNs licensed, we have grown from 1,065 licensees to 4,586 (an increase of 431%).

Second: During this same time, the number of pre-licensure RN programs in the state have increased from 22 to 27 (a 23% increase); the number of graduate programs has increased from 8 to 12 (a 50% increase).

Third: Fifteen years ago, we had no out of state schools offering clinical experiences in Louisiana; today, we have 3 undergraduate programs (a 300% increase) and 16 graduate programs (a 1600% increase). We must review, visit and approve each of these schools just like we do for in-state schools.

Fourth: We are the only state in the nation who monitors and regulates student nurses. In the last 13 years, we have increased from 3,720 students enrolled in clinical nursing courses to 5,780 enrolled in 2013, a 56% increase.

All of this growth has resulted in a need for additional staff, from 31 to 55 since 2002 (an increase of 78%). However, I currently have 5 open positions, including 2 RN positions. I am trying to consolidate services so that only the APRN Investigator position will be filled. Our personnel costs have also, increased concomitantly to meet the additional work of licensure, educational program approval, discipline and investigations, hearings, the Recovering Nurse Program and the addition of the Center for Nursing for workforce

planning as directed by the Louisiana legislature. In addition, we have just received notification from the Civil Service System that our healthcare insurance costs will be increased 5% beginning immediately.

We are a completely self-funded agency. Many RNs and APRNs are unaware of this because many state agencies are not independent or even quasi-independent and receive general revenue funds from the state. We have not increased our fees in 8 years, since 2006.

You are absolutely correct that the costs of fines, penalties and fees should be assessed against the RN perpetrators of NPA violations and they are. Unfortunately, I can assess the up to \$5000 fine against an RN for practice act violations as well as all costs associated with their investigation and hearing, but I can't make them pay. In many cases, we have suspended their licenses to practice to protect the public or probated them or even revoked them. All of these actions do protect our citizens, but they leave the RNs without the ability to practice and, therefore, without the ability to pay these costs. We probably collect as little as \$0.10 on the dollar for all costs to the agency, but we still have to incur the costs. Not only must we protect patients, we must protect our profession.

I know that none of this information probably makes you feel a whit better, but, unlike Washington, I really do want LSBN's actions to be fully transparent to my nursing colleagues. Thanks for taking the time to express your opinion and I hope I've been able to at least provide explanation, if not solace. Have a great weekend and I hope I have the opportunity to meet you somewhere down the road.

**2. COMMENT: E-mail response from Nicky Cormier, RN not in support of the proposed rule changes and subsequent LSBN response.**

I've been a RN for 18 yrs. When I started, I believe our annual renewal was 22 dollars which went up to 40 dollars, then after Katrina went up to 80 dollars a year. Now 100 dollars. I feel that once you get the 100 dollars this too will be quickly spent with the ever growing state board. What ever happened to "make do with what you have?" Can the increased spending stop? I haven't received a raise in 2 years from my employer while everything else has gone up. I understand its only 20 dollars but how about conserving what you have like I have to do at home. I can't imagine with the number of nurses paying dues in this state, the tremendous increase in the state boards cash flow after going up from 40 to 80 dollars a year. Now apparently, just like our government, this too has all been spent. Just wanted to let someone know how I feel. Thanks for reading.

***LSBN Response:***

First: In the last 15 years, the LSBN has experienced growth of 74% in terms of number of RNs licensed (from 34,867 to 60,508). In terms of APRNs licensed, we have grown from 1,065 licensees to 4,586 (an increase of 431%).

Second: During this same time, the number of pre-licensure RN programs in the state have increased from 22 to 27 (a 23% increase); the number of graduate programs has increased from 8 to 12 (a 50% increase).

Third: When you were first licensed, we had no out of state schools offering clinical experiences in Louisiana; today, we have 3 undergraduate programs (a 300% increase) and 16 graduate programs (a 1600% increase). We must review, visit and approve each of these schools just like we do for in-state schools.

Fourth: We are the only state in the nation who monitors and regulates student nurses. In the last 13 years, we have increased from 3,720 students enrolled in clinical nursing courses to 5,780 enrolled in 2013, a 56% increase.

All of this growth has resulted in a need for additional staff, from 31 to 55 (an increase of 78%). Our personnel costs have, of course, increased concomitantly to meet the additional work of licensure, educational program approval, discipline and investigations, hearings, the Recovering Nurse Program and the addition of the Center for Nursing for workforce planning as directed by the Louisiana legislature.

We had approval from the legislature to increase up to \$100. However, we cannot go beyond this without future legislative approval. So, no, we can't just arbitrarily go beyond the \$100. Additionally, we are a completely self-funded agency. Many RNs and APRNs are unaware of this because many state agencies are not independent or even quasi-independent and receive general revenue funds from the state. We have not increased our fees in 8 years, since 2006.

I am sympathetic to the fact that you haven't received a raise in 2 years and we are well aware of the increases in costs of everything. For us, too, our costs have increased and we have operated with a deficit budget for 2013 and 2014 and are projected to have a deficit budget for 2015. This has reduced our fund balance as an agency just as I'm sure your family's disposable income has been decreased. I really do feel your pain.

I know that none of this information probably makes you feel a whit better, but, unlike Washington, I really do want to provide full disclosure to my nursing colleagues. Thanks for taking the time to express your opinion and I hope I've been able to at least provide explanation, if not solace.

**3. COMMENT: E-mail response from Theresa Savant, MSN, FNP not in support of the proposed rule changes and subsequent LSBN response.**

I do not agree with the proposed change of \$100/year for RN renewal and an additional \$100/year for APRN renewal. This brings my yearly renewal fees to \$200/year, in addition to the malpractice insurance that I carry. I respectfully suggest changing the frequency of renewals to every two years, which would reduce both the individual RN cost burden and the LSBN processing burden every year.

***LSBN Response:***

First: In the last 15 years, the LSBN has experienced growth of 74% in terms of number of RNs licensed (from 34,867 to 60,508). In terms of APRNs licensed, we have grown from 1,065 licensees to 4,586 (an increase of 431%).

Second: During this same time, the number of pre-licensure RN programs in the state have increased from 22 to 27 (a 23% increase); the number of graduate programs has increased from 8 to 12 (a 50% increase).

Third: Fifteen years ago, we had no out of state schools offering clinical experiences in Louisiana; today, we have 3 undergraduate programs (a 300% increase) and 16 graduate programs (a 1600% increase). We must review, visit and approve each of these schools just like we do for in-state schools.

Fourth: We are the only state in the nation who monitors and regulates student nurses. In the last 13 years, we have increased from 3,720 students enrolled in clinical nursing courses to 5,780 enrolled in 2013, a 56% increase.

All of this growth has resulted in a need for additional staff, from 31 to 55 since 2002 (an increase of 78%). Our personnel costs have, of course, increased concomitantly to meet the additional work of licensure, educational program approval, discipline and investigations, hearings, the Recovering Nurse Program and the addition of the Center for Nursing for workforce planning as directed by the Louisiana legislature.

We are a completely self-funded agency. Many RNs and APRNs are unaware of this because many state agencies are not independent or even quasi-independent and receive general revenue funds from the state. We have not increased our fees in 8 years, since 2006.

I am always open to ideas for efficiencies and your idea to go to every two year licensure is one that I myself have proposed. However, that would only impact costs associated with annual licensure for already licensed RNs in the state. It would not affect licensing new graduates or licensure by endorsement. Additionally, it would have no effect on our work in relation to program approval, investigations (unfortunately, my largest department), hearings, and the workforce planning and research done within the Center for Nursing. Our costs and budget are based on annual expenses for all departments including administration, information technology, practice, education, investigations, hearings, monitoring, the Center for Nursing, and the Recovering Nurse Program.

I know that none of this information probably makes you feel a whit better, but, unlike Washington, I really do want to provide full disclosure to my nursing colleagues. Thanks for taking the time to express your opinion and I hope I've been able to at least provide explanation, if not solace.

**4. COMMENT: E-mail response from Elaine Hearod, BSN, RN not in support of the proposed rule changes and subsequent LSBN response.**

Did I understand correctly that the LSBN was going to raise the fees for renewal? When is someone going to stand up for nurses? We don't make that much money. The work and the responsibility is enormous. I work a 12 hour shift on a medicine floor that I

usually don't get a lunch break and barely can go to the bathroom. Not to mention 12 hrs shift are only for nurses that are dedicated and have an excellent work ethic. need I say more? If the census drops I get cx. I'm a BSN RN with 35 years of experience, if things don't change for the better for nurses I would never suggest anyone to pursue a career in the field. I have already discourage family members. No other profession gets treated this way. I bet Exxon don't cancel engineers. I can only think its because nursing is predominantly a women's profession. Our hospital was just bought out, I lost 480 hours of sick time.

***LSBN Response:***

Your email was filled with much emotion that seemed to be as much directed at nurses' working conditions as it was at LSBN for proposing fee increases. I hope that you have read this month's Examiner in which I attempted to explain the rationale for the Board's decision to ask for increases in fees. If not, here is a link to that document:  
<http://www.lsbm.state.la.us/Portals/1/Documents/Examiners/ExaminerNo32014.pdf>.  
Please see pages 3 and 4. While I am new to my position, having come from Texas to this position last December, and wasn't here for the initial discussions on fee increases, I attempted to provide context for the Board's decision in The Examiner. We will be having a hearing at the LSBN offices on July 29, 2014 at 10 am and I hope that you will be able to attend to express your concerns. I am confident that you are an excellent nurse and I am sorry to hear that your new employer has instituted policies that make your work even harder. I hope that you were just having a bad day and didn't mean what you said about never encouraging someone to become a nurse. I love my profession and while it has provided some of the best and worst moments of my life, for the most part, I cannot imagine not having had the opportunity to make a difference in people's lives as I have as a nurse. Good luck to you and I hope to see you on the 29<sup>th</sup>.

**5. COMMENT: Mailed response from Tom Qualey,MS, MSN, RN not in support of the proposed rule changes and subsequent LSBN response attached as separate documents.**

June 23, 2014  
318 E. Norwood Drive  
Jennings, LA 70546

Karen C. Loyd, PhD, APRN  
Executive Director  
Louisiana State Board of Nursing  
17373 Perkins Road  
Baton Rouge, LA 70810

RE: Response to Notice of Rulemaking Activity

Dear Dr. Loyd:

Based on the material presented in the Proposed Rulemaking, there is no justification for increasing fees prior to implementing in-house cost reducing changes. I am opposed to the proposed fee increase.

Before LSBN launches into a fee increase, may I suggest the following items be examined and the results of this examination be made public to the licensees. Such an examination may well document the need for increased fees. but as it stands now. I am not certain this action is warranted. When contrasted with RN renewal fees in other nearby States, Louisiana does not appear to be comparable in several areas. Here is a small table I constructed based on information from the following site:

<http://www.allnursingschools.com/nursing-careers/article/nursing-state-boards>

Renewal Period		
State	1 Year	2 Year
TX		\$70
OK		\$75
AR		\$75
LA	\$80	
MS		\$100
AL		\$75
FL		\$80

Based on this brief analysis, on a cost per year basis, LSBN is one of the most expensive states for the renewal of a Registered Nurse license. If there are additional services offered by LSBN, contrasted with the Boards of Nursing in these other States, who also have protecting the public as their Mission, they are not mentioned. Four other States have annual renewals, three have 3 or 4-year renewal periods, 40 have 2-year renewal and two States (OH and VA) did not post this information on the site

1.) There are numerous established inefficiencies directly related to the one-year license renewal program. In my opinion, a two-year (or more) license renewal should be established with license expiration dates established throughout the year (e.g., based on birth month) rather than at the end of the calendar year. This will result in a cost savings by equalizing the work load required for license renewal compared with the inefficient manner of end-of-year activities.

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Karen C. Loyd, PhD, APRN  
Executive Director  
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2.) Concerning the, "...monitoring and recovery services through Recovery Nurse Program (RNP)...", I would propose that the RNP be fully funded by the voluntary RNP participants. Historical financial data on costs and revenues would provide a basis for establish a viable program participation fee. To ensure accuracy and objectivity, the LA Division of Administration may be available for such an analysis and he development of a charge structure.

3.) Concerning, "...LSBN's adoption and implementation of the National Council of State Boards of Nursing (NCSBN) evidence-based Regulatory Management System..." I think it would be appropriate to explain how this system is to be used, and the costs related to implementation and utilization. The real issue, of course, is how this system will actually improve what LSBN is already doing in the area of regulatory management.

In my opinion, there are some genuine economies that the LSBN can implement now before requesting more money from licenses. Possibly discussing these ideas with the neighboring State Board of Nursing may provide some additional cost saving ideas.

Sincerely,

  
Thomas Qualey, MS, MSN, RN  
Jennings, LA

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LOUISIANA STATE  
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July 14, 2014  
318 E. Norwood Drive  
Jennings, LA 70546

Karen C. Loyd, PhD, APRN  
Executive Director  
Louisiana State Board of Nursing  
17373 Perkins Road  
Baton Rouge, LA 70810

RE: Response to the Analysis on Fee Increases

Dear Dr. Loyd:

In reading the analysis published in the latest Louisiana State Board of Nursing "Examiner", I ran into some difficulties. In my opinion, sufficient reason for a fee increase has not yet been presented and the proposed increase should be withdrawn at this time. Maybe in your next report you could address the following matters in greater detail:

1.) In my opinion, the issue of the fee increase is not so much related to perceived "popularity", or lack thereof by licensees, but that there has yet to be a substantiated financial report on costs at LSBN contrasted with other state boards of nursing. Unless an analysis has been done, no one knows what internal cost-saving improvements could be made besides resorting to simply raising fees. For example, to generate revenue LSBN can: 1) for a fee, host nurse employer sites, links and job market fairs, 2) provide teleconference seminars for a fee, 3) increase one-time charges for background checks, applications, etc., 4) do a cost analysis on each program to see if charges are meeting expenses. In brief, there is a concern that LSBN is not being run as efficiently as it could be and still meet all statutory requirements. Until this question is resolved, rulemaking on fee increases is premature at best and quite possibly unwarranted. Mischaracterizing the responses received so far as not demonstrating "popularity" appears to be almost dismissive.

2.) As a point of clarification, would you please explain the singular position that Louisiana has in monitoring and regulating student nurses that the other states do not provide? Is the monitoring of student nurses the reason for the need for higher RN license fees? If so, what proportion is attributed to student nurse monitoring and how does this cost/activity contrast with the BONs monitoring of student nurses in other states?

3.) The need for additional staff based on current staff vacancies may not be the best way to assess personnel need. Tying positions to reviewed work requirements using the experience of states with a lower licensing fee should be considered. As noted in my

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Karen C. Loyd, PhD, APRN  
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letter of June 23, Louisiana has the most expensive license fees in the six geographically close States identified. While most other states offer two year time periods for licensure, Louisiana has maintained all of the cumbersome inefficiencies of a yearly licensing program. In my opinion, additional staff may not be necessary if a multi-year licensing program were objectively assessed and presented. Finding out how other BONs provide their services at less costs needs to be presented.

4.) A comparison table is offered to examine the fee cost (on an annualized basis) with the number of licensees, population and Cost of Living in each of the identified states. The number of licensees per State was obtained from The Henry J. Kaiser Family Foundation for 2011. The following link is provided: <http://kff.org/other/state-indicator/total-registered-nurses/>. State populations for 2011 were obtained from US Bureau of Census. The following table is intended for illustration purposes only.

**Selected Comparison of RN State License Fees by State Population (2011)**

State	Annualized RN License Fee*	Licensed RN's**	RN Fee Revenue by State	State Population***	Cost of RN fee per Population	Cost of Living ^
TX	\$ 35	184,980	\$ 6,474,300	25,674,681	\$ 0.25	90.3%
OK	\$ 38	28,290	\$ 1,075,020	3,791,508	\$ 0.28	84.2%
AR	\$ 38	23,550	\$ 894,900	2,937,979	\$ 0.30	84.3%
LA	\$ 80	40,840	\$ 3,267,200	4,574,836	\$ 0.71	93.8%
MS	\$ 50	29,640	\$ 1,482,000	2,978,512	\$ 0.50	89.1%
AL	\$ 38	45,400	\$ 1,725,200	4,802,740	\$ 0.36	89.5%
FL	\$ 40	164,800	\$ 6,592,000	19,057,542	\$ 0.35	98.7%

\* Two year licenses were divided by 2 to annualize  
 \*\* No Advanced Practice Nurses identified in data  
 \*\*\* US Census Data for 2011 (<http://www.census.gov/popest/data/state/totals/2011/>)  
 ^"Our Cost of Living indices are based on a US average = 100%." Link at:  
[http://www.bestplaces.net/cost\\_of\\_living/state/louisiana](http://www.bestplaces.net/cost_of_living/state/louisiana)

5.) All State Boards of Nursing have listed the "Protection of the Public" as their highest priority. To that end, it would appear that it costs much more in Louisiana than in the six identified States to provide these same protective services. For example, Texas and Florida with over 4 times the population are less expensive than Louisiana. Notice

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Karen C. Loyd, PhD, APRN  
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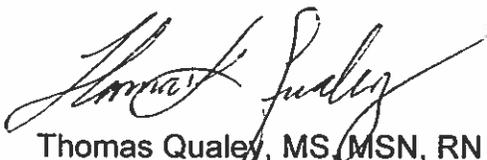
how AL and FL, while quite different in population size, are about the same in cost per citizen. Cost of Living was included in the table to try and identify other variables. All of these states are below the US average of 100, but Louisiana is the second most expensive State of the seven listed. Attention is directed to FL which is almost at the US average but RN fees are half as expensive as the Louisiana RN license fee. From the standpoint of accountability, this difference needs an objective explanation if more money is being required by LSBN to comply with statutory requirements.

In your latest post, Dr. Loyd, there seems to be an effort to balance the statutory requirement to protect the Public with the interest of making disciplining actions affordable to those who have violated the Nurse Practice Act. Trying to balance these goals is difficult at best and statutory requirements must take priority over a perceived financial problem on the part of the offending nurse. If any program authorized by LSBN is to be income generating, then charges must be based on actual costs. If fees not self-supporting (e.g., investigations, disciplinary actions and monitoring) then I think that the financial deficits generated should be examined. It really may be necessary to charge disciplined nurses more money if services have been judged to be cost efficient based on a state by state comparison.

Finally, I would suggest that what would make many of us, "... suffering in our struggling economy feel better..." is a genuine financial analysis that actually looks at LSBN's operating costs contrasted with other States. There is an honest need for a presentation of analytical work to justify this 25% fee increase. Please withdraw the notice of fee increase at this time and then resubmit if an increase is actually justified.

Leaving the impression that nursing regulatory costs in Louisiana are simply higher than in virtually any other state – and just raising fees is how it will be addressed – is an approach that calls out for a real dialogue amongst the stakeholders.

Sincerely,



Thomas Qualey, MS, MSN, RN  
Jennings, LA

CC:

Sen. Dan "Blade" Morrish  
119 W. Nezpique Street  
Jennings, LA 70546

Rep. John E. Guinn  
P.O. Box 287  
Jennings, LA 70546

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July 25, 2014

Thomas Qualey, MS, MSN, RN  
318 E. Norwood Drive  
Jennings, LA 70546

Re: Letters of June 23 and July 14, 2014

Dear Mr. Qualey,

I am in receipt of the above dated letters. Thank you for corresponding with the Board concerning the licensure and fees proposed increases. Since I have previously addressed the issue of the fees increase proposal in The Examiner, I won't restate my arguments here. In addressing specific items within your letters, I provide the following information:

1. You are correct that Louisiana currently requires annual registration, which makes us the most expensive renewal of the seven (7) states cited. We are examining the proposal to move to biennial renewal of licenses and the economies of scale that option presents.
2. The RNP and monitoring program produced \$261,476 in income in 2014. The salaries alone of the seven professionals who comprise this department are \$409,690 before any mandatory state benefits. So I am already operating at a \$148,214 deficit. The fees increases we are asking for will offset some of these losses, but the fact remains that, once an RN or APRN is disciplined and their license is suspended or revoked, they have lost their earning ability and LSBN is last on their list of creditors. That doesn't change the fact that we still have to investigate, discipline and monitor these nurses, whether they pay their fees and fines or not.
3. The NCSBN ORBS system will allow us to consolidate data processing and data mining for our 60,000+ RNs and APRNs. Much of what we currently process by hand will be done electronically within online databases. This will provide quantifiable efficiencies but Louisiana won't be going online with this system until late 2015.
4. The mission of the LSBN is to protect the health of the public through regulation of RN and APRN practice. Our legislative mission does not include hosting employer sites and job market fairs nor to provide continuing education, either face to face or online.
5. No other state board in the nation monitors student nurses. They leave such monitoring up to the schools of nursing. That means we must review every application of a student applying for upper division clinical courses once those students have been admitted by the schools. We review their criminal background checks, their pre-requisites and make sure that they meet our standards for future licensure. If the students have disciplinary issues with something in their criminal background check, then we have to decide if they will be allowed to proceed to clinical courses and, if they do, how we are going to monitor them particularly in the

area of substance abuse. The costs associated with this monitoring are not shared by any other state because they don't monitor students.

6. I am constantly engaged in evaluating the personnel needs of the agency in concert with my Board of Directors. Position vacancies are not just filled because they exist and we actively evaluate every FTE position

Thank you for contacting me and expressing your opinions. In closing, I would like to express that, for future reference, as is clearly listed on our website, in the 2013 Annual Report, and in all editions of the 2014 Examiner, my name is Lyon, not Loyd, as you have used in the salutation of both of your letters.

Sincerely,

A handwritten signature in cursive script, appearing to read "Karen C. Lyon".

Karen C. Lyon, PhD, MBA, APRN, ACNS, NEA<sub>BC</sub>  
Executive Director