



Recommendations to Improve **THE BOARD OF REGISTERED NURSING**

1. BRN's current forecast does not measure regional variations in supply and demand for RNs, thereby obscuring regional shortages.

Incorporate regional forecasts into BRN's biennial analyses of the nursing workforce and develop a plan to address regional shortages it identifies. BRN's forecast indicates that the supply and demand for RNs will be fairly well-balanced across the State over the next 10 years. However, other studies that did include regional forecasts have shown regional nursing shortages exist and are projected to continue within California.

STATUS - BRN had not revised its contract for the nursing workforce forecast to include regional analysis by January 1, 2021, as we recommended.

2. BRN's governing board lacks key information about clinical placement slots when making enrollment decisions.

Gather information about the total number of clinical placement slots a health care facility can accommodate and how many are needed. BRN should present this information to the governing board for each enrollment decision it considers. Because BRN does not track the number of available slots at health care facilities where students can gain experience, it cannot effectively analyze and report to its governing board the risk of displacement. Many nursing programs reported that their students were displaced from clinical facilities by students from other programs.

STATUS - BRN has not yet completed actions we recommended, such as revising its regulations or developing a database to compile information about clinical placement slots and clinical placements needs of nursing programs. It may not meet our deadline to do so of April 1, 2021.

3. BRN's approval of nursing programs has similarities to accreditation in both its approval process and the standards it requires nursing programs to meet.

Consider, as part of sunset review, whether BRN should leverage portions of an accreditor's review. Accreditation is optional for nursing programs in the State, and roughly half of them have chosen to become accredited. Yet, several other California healing arts boards rely on accreditation in place of or in conjunction with state review. As part of BRN's sunset review in 2021, the Legislature should consider whether BRN should revise its regulations to leverage portions of an accreditor's review.

STATUS - Sunset Review Hearing to consider this recommendation on March 12, 2021.

BRN COULD REVISE DUPLICATIVE OVERSIGHT REQUIREMENTS

For more information, see page 29 of our report.

SELECTION OF BRN'S REQUIREMENTS FOR NURSING PROGRAM APPROVAL	ACCREDITORS	
	ACEN	CCNE
Nursing program faculty and administrators are qualified and have relevant experience.	✓	✓
Nursing program has sufficient resources for students and faculty.	✓	✓
Curriculum is comprehensive and includes concurrent clinical experience.	✓	✓
Nursing program maintains a minimum pass rate for the licensure exam.	✓	✓
The majority of clinical hours are completed in direct patient care.	X	X
Nursing program considers clinical displacement when selecting a new clinical facility to use.	X	X

Source: Analysis of state law and accreditors' documents.
■ The requirement is present in the accreditor's standard.
■ The requirement is not present in the accreditor's standard.

- **Aligning state review with accreditation is not uncommon. Several California healing arts boards rely on accreditation in place of or in conjunction with state review:**
 - the Medical Board of California
 - the Osteopathic Medical Board of California
 - the Physician Assistant Board
 - the Dental Hygiene Board of California
- **Collaboration between states and accreditors is encouraged.** The National Council of State Boards of Nursing (National Council) recommends that boards of nursing work toward harmonizing their approval processes with accreditors.
- **Although BRN approval is required for nursing programs in California, accreditation is optional.** Only half of nursing program have chosen to become accredited. The National Council recommended in 2012 that all state boards of nursing require nursing programs to be accredited by 2020.

Recommendation

As part of BRN's sunset review in 2021, the Legislature should consider having BRN revise its regulations to leverage portions of the accreditors' reviews. For example, it could consider restructuring continuing approval requirements for nursing programs that are accredited and maintain certain high performance standards for consecutive years (for example, licensure exam pass rates, program completion rates, and job placement rates).

BRN OVERSIGHT AND NATIONAL ACCREDITATION

For more information, see pages 29-30 of our report.

SIMILARITIES

Both review processes involve:

- An initial approval in which accreditors and BRN verify that nursing programs meet their standards.
- The requirement that nursing programs report substantive changes, such as enrollment increases or curriculum changes.
- A cycle of periodic continuing approvals.
- For continuing approval, both processes require a self-evaluation that provides similar information, such as licensure exam pass rates and faculty qualifications.

DIFFERENCES

- The mission of a state board of nursing, such as BRN, is protecting the public and ensuring that nursing programs meet state requirements, whereas accreditors focus on quality and program effectiveness.
- Boards of nursing understand nursing education issues in their specific jurisdictions.
- Accreditors do not have statutory authority to close nursing programs that do not meet standards, while boards of nursing do have that authority.
- Boards of nursing can act right away when they identify problems with nursing programs; accreditors cannot act as quickly.
- Continuing approval visits by accreditors may occur less frequently than BRN's—up to every eight to 10 years for the accreditors compared to every five years for BRN.
- BRN approves nursing program faculty prior to employment, whereas accreditors do not.

Given the differences, we are not suggesting that accreditation is an exact replacement for BRN's oversight. Rather, we believe policymakers should consider, as part of their sunset review, whether it would be appropriate to restructure any of BRN's oversight to reduce duplication with accreditation agencies while still achieving its mission to protect the public.