MARTIN O'MALLEY
Governor

ANTHONY G. BROWN
Lieutenant Governor

T. ELOISE FOSTER
Secretary

DAVID ROMANS
Deputy Secretary

December 1, 2013

The Honorable Joan Carter Conway
Chairman, Education, Health & Environmental Affairs Committee
2W Miller Senate Office Building
Annapolis MD 21401-1991

The Honorable Peter A. Hammen
Chairman, Health & Governmental Operations Committee
241 House Office Building
Annapolis MD 21401-1991

Dear Chairman Conway and Chairman Hammen:

Section 2 of Chapter 621 of the Acts of the 2012 General Assembly (Senate Bill 921) required the Department of Health and Mental Hygiene (DHMH), in consultation with the Department of Budget and Management (DBM), to contract with an independent entity to perform a management and personnel study for the State Board of Nursing. The language further required DBM to oversee the performance of the study and report the results to the Senate Education, Health and Environmental Affairs Committee and the House Health and Government Operations Committee. In accordance with this request, DHMH, in consultation with DBM, issued a request for proposals and contracted with the Management Advisory Group International, Inc. to conduct this study.

The attached report includes an analysis of the organizational structure of the State Board of Nursing and an evaluation of workload, personnel, and overall operations. As a result of that analysis, the report contains a number of recommendations to improve the Board's overall management, structure, and resource allocation.

If you have any additional questions, please contact me at 410-260-7041.

Sincerely,

T. Eloise Foster

T. Eloise Foster
Secretary

Enclosure

cc: The Honorable Joshua Sharfstein, MD, DHMH
   Marie Grant, DHMH
   Patricia A. Noble, MSN, RN, Executive Director. BON
   Shirley Devaris, BON
   Lisa Simpson, DLS
   Erin Hopwood, DLS
   Jennifer Chasse, DLS
   Sara Fidler, DLS
   Cindy Kollner, DBM
   Rebecca Burner, DBM

Management and Personnel Study (Final Report)

for

Maryland Board of Nursing

September 30, 2013

By:

MANAGEMENT ADVISORY GROUP INTERNATIONAL, INC.

13580 Groupe Drive, Suite 200
Woodbridge, Virginia 22192
(703) 590-7250

MANAGEMENT CONSULTING SERVICES

September 30, 2013

Ms. Cindy Kollner
Department of Budget and Management
Maryland Department of Health and Mental Hygiene
301 W. Preston Street, Room 609
Baltimore, MD 21201

Dear Ms. Kollner:

Management Advisory Group International, Inc. (MAG) is pleased to present this final report for technical services for a Management and Personnel Study for the Maryland Board of Nursing.

We appreciate the opportunity to be of service to the Board of Nursing and look forward to continuing our work with you on this important project.

Sincerely,

Donald C. Long, Ph.D.
President
Management Advisory Group International, Inc.
don@maginc.org

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MARYLAND BOARD OF NURSING

FINAL REPORT

MANAGEMENT AND PERSONNEL STUDY

TABLE OF CONTENTS

Exhibits

SECTION 1.0

EXECUTIVE SUMMARY

Section 1: Executive Summary

Project Goals and Objectives:

The Maryland Department of Health and Mental Hygiene (DHMH), in consultation with the Department of Budget and Management (DBM), issued a Request for Proposals (RFP) to contract with an independent entity to perform a management and personnel study of the Maryland Board of Nursing (MBON). The RFP indicated that the study to be performed should include an analysis of the organizational structure, the workload and personnel of the MBON and make recommendations as to the appropriate number, levels and types of staff for the MBON.

Major Project Phases:

- ✔ Project Initiation and Refinement of Approach
- ✔ Conduct Initial Interviews and Analysis
- ✔ Conduct Analysis and Develop Findings
- ✔ Develop Recommendations
- ✔ Prepare Preliminary Report by September 9, 2013
- ✔ Provide Final Report

Major Findings:

- ✔ MBON organizes largely along functional lines. Administrative and operational activities are mixed within the departments. Some operational work is being completed in the administrative functions and vice versa.

- ✔ The span of control for the Executive Director is somewhat broad, as 12 positions report directly to the Executive Director.

- ✔ In addition to the current 77 PIN positions, there appear to be four (4) Contractual positions within the agency, for a total of 81 positions.

- ✔ The number of licensees and certifications has risen by 24.4% or by 88,584 in the last two years.

- ✔ Annually, the number of denials has increased slightly for the RN's and LPN's, and has decreased substantially for the CNA's and CMT's.

- ✔ In the last two years, the overall number of new complaints has increased approximately one-third.

- ✔ Policies and the procedures related to CHRC's have been reduced to writing. MAG encourages better communication of these policies and procedures within the MBON organization and staff, as well as selective placement of them on the website.

- ✔ The website is antiquated.

✓ CHRC's have had a crippling effect on Information Systems' ability to conduct their work and tasks associated with IT.

✓ The Deputy Director position is underutilized.

✓ There is no policy and procedures manual for MBON.

Major Recommendations:

✓ Consolidate operational responsibilities under the Deputy Director.

✓ Reassign Electrology from Administrative Services to the Department of Nursing Practice.

✓ Create two (2) additional high level positions in Information Systems, through upgrades to existing positions.

✓ Create the CHRC function as a stand-alone department reporting under the Deputy Director. Positions are moved from Information Systems to the new department.

✓ Delay seeking legislation to require CMTs to submit to CHRCs, until organizational efficiencies are achieved in the newly designed CHRC Department.

✓ Add two additional staff to MBON in the following classifications; one (1) Administrative Specialist II, and one (1) Nursing Program Consultant Admin I.

✓ Create and send out an RFP to totally redesign the website.

✓ Regularly update personal information regarding disciplinary action and other remedial actions for applicants and licensees/ certificate holders.

✓ Evaluate equipment needs in each department (computers, scanners, printers, etc.) to determine proper equipment to expedite the processing of critical paperwork.

✓ Update MBON's computer system in order to move towards a paperless environment.

✓ Create a policies and procedure manual.

✓ Identify additional key areas where cross-training of personnel will be most beneficial to application processing.

✓ Customer service survey questions should be revised. Customer service training should be added to the call personnel at MBON.

✓ MBON should hold weekly department head meetings.

SECTION 2.0

PROJECT UNDERSTANDING AND APPROACH

Section 2.0 – Project Scope and Approach

2.1 – Background

The Maryland Department of Health and Mental Hygiene (DHMH), in consultation with the Department of Budget and Management (DBM), issued a Request for Proposals (RFP) to contract with an independent entity to perform a management and personnel study of the Maryland Board of Nursing (MBON). The RFP indicated that the study to be performed should include an analysis of the organizational structure, the workload and personnel of the MBON and make recommendations as to the appropriate number, levels and types of staff for the MBON.

The preliminary report was to be completed by September 9, 2013, and the study must be completed on or before October 1, 2013.

2.2 – Scope of Work

The RFP identified critical areas of review for the project. They included:

A. Include an analysis of the workload of the MBON related to its licensure, certification, and complaint resolution functions.

MAG requested a variety of historical and current data from the MBON in reference to work load and program information for the MBON current programs. This included licensure data, certification data, and the number and types of complaints within the last several years. In addition to reviewing the number of applications, complaints, licenses and certifications, MAG reviewed the number of positions assigned historically and currently, to the various functions. Time estimates for the various administrative actions in support of the issuances have been considered through observation and personal interviews with management and staff.

B. MAG is to consider at a minimum:

1. **The number of applications and complaints received by the MBON;**
2. **The number of employees assigned to each step of each function; and,**
3. **The amount of time an application or complaint remains at each step of each function.**

MAG has attempted to capture and review the data noted above through existing reports, memos, and supporting sources such as current databases. The various steps in each of the major processes will be documented through interactions with management and staff. A determination of whether the staff and time resources dedicated to the various functions are sufficient was reviewed with management and staff. MAG also reviewed the recent Sunset Review report.

C. Include an analysis of the impact on staffing needs of new processes.

MAG has reviewed, as appropriate, and where desirable, new processes or approaches for handling the work load in the agency. New processes should be expected to have a positive impact on the amount of time required to handle the work. MAG will estimate the number of staff that can be eliminated or re-directed to areas where the service level may be lower than desired. Consideration of the effect of the biennial licensing of nurses has been taken into consideration.

D. Make recommendations on:

1. The most effective use of existing staff;

MAG will make recommendations in reference to how existing staff may be more fully utilized. This can be accomplished through movement of functions and sub-activities to another office, and the re-purposing and re-focusing of work being done by positions.

2. Cross training of existing staff;

MAG will identify the major skill needs in the different functions to establish where there may be gaps or deficiencies. This has been done through in-depth discussions with management, staff, and HR. The areas where cross-training is appropriate are identified and prioritized.

3. Potential reassignment or realignment of existing staff.

MAG was requested to identify opportunities where positions can properly be re-purposed and re-focused in terms of their work efforts. There also may be situations where reorganization of positions and functions will be appropriate to maximize the service levels and the work being done in the agency.

4. Additional deployment or activation of currently available but unused online functionality.

MAG assigned its own IT Director the task of reviewing the MBON's online functionality, to assist in determining whether there are opportunities for improvement, expanded deployment, or further activation of specific functionalities. This has been supplemented by input from managers and supervisors within the agency, who bring their informed views of possible changes and adjustments.

5. Best practices regarding licensure and complaint resolution processes.

MAG solicited input from agency management to identify other Boards of Nursing that are considered agencies of excellence and/or are similar in size and requirements. MAG has reviewed selected major practices that may be beneficial for implementation in MBON.

6. The development of policies and procedures related to the handling of positive CHRC's.

MAG understands that positive backgrounds are reviewed by the Board prior to issuing a license. If the background check indicates arrests and/or convictions, additional information is requested from the applicant. The Board may deny licensure of an applicant, license the applicant with or without probation, or issue charges against a renewal applicant. MAG has reviewed this process in terms of the major procedures and handling to determine if improvements can be made.

7. Additional staffing requirements, including the use of contractual employees during the period that the MBON is transitioning to a fully-online application process.

MAG, through observation and interviews with management and staff, and the evaluation of work load data, has made recommendations as to the viability of using contractual employees as MBON moves towards a more automated application process.

MAG has considered the MBON's efforts to:

A. Automate its applicant tracking system; (where data is available, comparison will be made to staff dedicated before and after implementation);

B. Conduct cross-training, develop policies and procedures manuals, update its organizational chart and job descriptions for staff members; (MAG will review the agency's efforts in all of these areas to determine any impact on staffing level needs and requirements);

C. Prioritize the certification of medication technicians;

D. Move to biennial licensure and certification; (where data is available, comparison will be made to staff dedicated before and after implementation);

E. Transition to online processing of initial applications for licenses and certifications, in addition to renewal applications, which already are online;

F. Maintain annual data on the number of applicants denied licensure or certification based on positive CHRC results or, in the case of CMT applicants, self-disclosure of a criminal history;

G. Evaluate the need to conduct CHRC for CMT's in light of the current self-disclosure policy;

H. Develop and produce a catalog of complaint data reports to analyze the need for staffing and automation changes and improve overall the complaint resolution process;

I. Assess its complaint backlog and, as necessary, hold additional hearings;

J. Enhance the ability of consumers and the public to access information by improving the quality of service provided by call center operators, revamping the customer satisfaction survey, improving the MBON's website, and re-establishing an online newsletter;

TASK 1.0: INITIATE PROJECT

Objectives:

> To gain a more in-depth understanding of the study background and the Board goals and expectations.

> To establish a mutually agreeable work plan, schedule, and progress monitoring procedure that will successfully meet the study expectations.

> To identify and collect key documents.

Activities:

1.1   Met with the Project Manager and appropriate key management staff to discuss our proposed objectives, scope, approach, work plan, schedule, and progress monitoring procedures. Any concerns or suggested modifications were discussed and plans revised, as appropriate.

1.2   Obtained and reviewed key documents, including:

> relevant organization charts and employee data;

> budgets and financial reports;

> current audit documentation;

> service level descriptions and background;

> key management and operational reports; and

> relevant policies.

1.3   Finalized the work plan and established consultant schedules with calendar dates for completing tasks.

Deliverables:

> Final Work Plan and Schedule

TASK 2.0: CONDUCT INITIAL INTERVIEWS AND ANALYSIS

Objectives:

> To collect the factual information needed in support of project objectives.

> To obtain management opinions and perceptions regarding major procedures, policies, staffing issues or concerns.

Activities:

2.1 Scheduled and conducted interviews. The objectives of these interviews were to:

> confirm breadth/scope of all functions;

> obtain information regarding historical practices, policies, and guidelines;

> understand organization-wide issues, needs and concerns; and

> request and evaluate key documents and data and determine its availability, reliability and source;

> conduct interview sessions with MBON department heads to identify issues of concern that may impede excellence.

2.2 Collected pertinent management and personnel documents and data including:

> annual reports;

> adopted budget;

> workload data;

> recent progressive improvements;

> organization chart;

Deliverables:

> Interviews and data collection meetings.

TASK 3.0: CONDUCT ANALYSIS AND DEVELOP FINDINGS

Objectives:

> To analyze and evaluate organizational staffing, policies and practices.

> To review best practices and determine feasibility of change.

Activities:

3.1 Analyzed the management and personnel data and other study information to identify improvement opportunities in all relevant study areas noted in RFP section 3.2.1.

3.2 Identified possible costs and cost savings during the analysis.

3.3 Reviewed the findings and conclusions to assure that factual information is complete and accurate and that the conclusions are justified.

3.4 Verified facts and/or collected additional information to formulate conclusions.

3.5 Communicated with other MBON's regarding best practices.

3.6 Met with the Project Manager to discuss key issues and concerns relative to management and staffing and organizational issues.

Deliverables:

> Study Findings and Conclusions

TASK 4.0:   DEVELOP RECOMMENDATIONS

Objectives:

> To develop recommendations for RFP areas reviewed during Task 3.0.

Activities:

4.1 Consolidated the findings and conclusions developed during Task 3.0 and developed a recommendation for each significant finding identified. The recommendations will be based on:

> Workload data;

> Current and future demands;

> Effectiveness and efficiency changes;

> Consideration of all mandated programs;

> Alternative approaches for service provision;

> All related study issues.

4.2 Developed recommendations that are beneficial, realistic and implementable.

4.3 Refine recommendations, as appropriate.

Deliverables:

➤ Series of Recommendations

TASK 5.0: PREPARE PRELIMINARY REPORT BY SEPTEMBER 9, 2013

Objectives:

➤ To prepare a preliminary report documenting the study results.

➤ To discuss the preliminary report with the Project Manager and obtain comments.

Activities:

5.1 Prepared a preliminary study report. The report will include:

- ➤ executive summary;
- ➤ study objectives and methodology;
- ➤ findings and conclusions; and
- ➤ recommendations.

5.2 Discuss the preliminary report, and note comments and any suggested revisions.

Deliverables:

- Preliminary Study Report

TASK 6.0: PREPARE FINAL REPORT

Objectives:

➤ To revise the preliminary report and prepare the final study report.

Activities:

6.1 Revised the preliminary report, as appropriate, based on the comments and suggestions made during discussions.

6.2 Prepared and issue the final study report.

6.3 Present findings and recommendations to the Board.

Deliverables:

Final Study Report

SECTION 3.0

FINDINGS

Section 3: Findings and Current Situation

This section of the report will identify findings and will define the current situation in the organization, without analysis and recommendations. It will help the reader understand the Board of Nursing as it currently exists, without judgment or conclusions as to appropriateness or validity. The initial areas for findings include:

- ✓ Organization Structure
- ✓ Staffing
- ✓ Workload
- ✓ Major Processes
- ✓ Policies and Procedures
- ✓ Customer Service
- ✓ Administrative Issues

3.1 Organization Structure

The only overall organization chart provided to MAG was in the Request for Proposals. It appears to be generated through an Excel program. It shows the working titles of the department heads and various functions completed in their departmental areas. MAG has reproduced this chart in the first exhibit (Exhibit 3-1). Also, the same overall chart was reproduced using the state of Maryland's classification titles (Exhibit 3-2).

Although requested, MBON staff was not able to provide organization charts for the various departments. MAG has used various staffing reports to create the individual department organization charts to ensure that the reader is clear on the current organization structures.

The following pages illustrate the positions and the current reporting relationships, as can best be determined through interviews, research, and supporting report documents. The exhibits are:

Exhibit 3-1: MBON Functional Organization Structure with Working Titles

Exhibit 3-2: MBON Functional Organization Structure with State Titles

Exhibit 3-3: MBON Department Chart for Advanced Practice

Exhibit 3-4: MBON Department Chart for Investigations

Exhibit 3-5: MBON Department Chart for Legislation

Exhibit 3-6: MBON Department Chart for Information Systems and CHRC

Exhibit 3-7: MBON Department Chart for Discipline and Rehabilitation

Exhibit 3-8: MBON Department Chart for Administrative Services

Exhibit 3-9: MBON Department Chart for Nursing Practice

Exhibit 3-1. MBON Functional Org Chart with Working Titles

MBON Executive Director

Management Associate

Board Prosecutors (7 positions; 4 @DHMH & 3 for BON)

Special Investigator

Director of Investigations	Director of Legislation	Director IT & CHRC	Deputy Director Advanced Practice	Director Discipline & Rehab	Director of Admin Services	Director of Nursing Practice

Functions:
Complaints
Data Analysis
Legal Actions

Functions:
Policy Analysis
Regulations
Amendments

Functions:
Databases
Computers
Telephones
Special Projects
CHRC

Functions:
Discipline
Rehabilitation
Compliance

Functions:
Human
Resources Daily
Ledger Budget
Time Keeping
Mail Distribution
Electrology
Property
Maintenance

Functions:
Scope of
Practice
Legislative
Analyst
Regulations

Director of Licensure & CNA Education

Functions:
Training
Endorsements

Director Education & Examination

Functions: Exams
Educational Programs

Director CNA/CMT

Functions:
CNA
CMT

Exhibit 3-2. MBON Functional Org With State Titles

```
                          Program
                       Manager Senior
                            II
                            |
                      +-----+------------+
                      |   Management     |
                      |   Associate      |
 +----------------+   +------------------+
 | Assistant Ag's |   |   Paralegal II   |
 | (7 positions at 3  +------------------+
 |  various levels)   |
 +----------------+   |
```

Nursing Admin Consultant **Admin II**	Nursing Admin Consultant **Admin II**	IT Asst Dir II	Nursing Admin Consultant **Admin III**	Nursing Admin Consultant **Admin II**	Administrator I	Nursing Admin Consultant **Admin II**
Functions: Complaints Data Analysis Legal Actions	**Functions:** Policy Analysis Regulations Amendments	**Functions:** Databases Computers Telephones Special Projects CHRC		**Functions:** Discipline Rehabilitation Compliance	**Functions:** Human Resources Daily Ledger Budget Time Keeping Mail Distribution Electrology Property Maintenance	**Functions:** Scope of Practice Legislative Analyst Regulations

Nursing Admin Consultant
Admin II

Functions:
Training
Endorsements

Nursing Admin Consultant
Admin II

Functions: Exams
Educational Programs

Nursing Admin Consultant

Functions:
CNA
CMT

Exhibit 3-3. Department Chart Advanced Practice

```
                    ┌─────────────────────────────┐
                    │   Deputy Director Advanced  │
                    │          Practice           │
                    └─────────────────────────────┘
                         │                  │
           ┌─────────────────────┐   ┌─────────────────────┐
           │ Director of Licensure│   │ Director of Education│
           │  and CNA Education   │   │    & Examination     │
           └─────────────────────┘   └─────────────────────┘
                    │                           │
           ┌─────────────────────┐   ┌─────────────────────┐
           │  Admin Specialist II │   │   Admin Officer I    │
           │    (2 positions)     │   │    (1 position)      │
           └─────────────────────┘   └─────────────────────┘
```

Exhibit 3-4. MBON Department Chart-Investigations

Investigations

Functions:
Complaints
Data Analysis
Legal Actions

Admin Specialist II (2 positions)

Health Facility Investigator Nurse I (3 positions)

Health Facility Investigator Nurse II (5 positions)

Health Facility Investigator Nurse III (1 position)

Exhibit 3-5: MBON Department Chart Legislation

Nursing Program
Consultant
Admin II

Office Secretary III
(1 Person)

Exhibit 3-6: MBON Department Chart Info Sys & CHRC

IT Asst. Director II

Computer Network
Specialist Lead
(1 position)

Admin Specialist II
(2 positions)

Computer Network
Specialist I (1 position)

Computer Network
Specialist Supr
(1 position)

Computer Operator II
(1 position)

IT Programmer Analyst I
(1 position)

Nursing Program
Consultant Admin II
(1 position)

Nursing Program
Consultant
Admin I
(1 position)

ACD Operators
(2 positions)

Office Services Clerk
(8 positions)

Office Supervisor
(1 position)

Exhibit 3-7. MBON Department Chart Rehab

Director of Discipline & Rehabilitation

Paralegal
(2 positions)

Compliance Officer for CNA's
(1 position)

Office Secretary III
(1 position)

Compliance Officer for RN's
(2 positions)

Office Secretary I
(1 position)

Office Secretary II
(1 position)

Office Service Clerk
(1 position)

Exhibit 3-8. MBON Department of Admin Services

Exhibit 3-9. Department of Nursing Practice

```
                    ┌─────────────────────┐
                    │  Director of Nursing │
                    │      Practice        │
                    └──────────┬──────────┘
                               │
                    ┌──────────┴──────────┐
                    │   Admin Officer I    │
                    │    (1 position)      │
                    └─────────────────────┘

      ┌─────────────────────┐
      │  Admin Specialist II │
      │    (8 positions)     │
      └─────────────────────┘

              ┌─────────────────────┐
              │  Office Supervisor   │
              │    (1 position)      │
              └─────────────────────┘
```

3.1.1 MBON is Organized Functionally

In terms of the overall organization chart, whether reviewing the overall MBON chart with working titles or with state of Maryland formal job titles, one can see that the MBON organizes largely along functional lines. This reflects the various functional areas, such as Advanced Practice, Nursing Practice, Rehabilitation and Discipline, and Investigations. Support work to ensure success in the mission is completed by Administrative Services, Legislation, and Information Systems.

There appears to be some operational work being completed in the administrative functions. For example, the CHRC process is assigned to Information Systems. Also, the Administrative Services Director serves as the liaison between the Electrologists and the Board of Nursing. This includes setting up and attending quarterly meetings for the Electrology Committee, responding to inquiries from the public about obtaining an Electrology license, approval of CEUs, ensuring that renewal applications are sent in a timely manner yearly and reviewing and approving of applications for licensure.

The overall chart includes seven (7) legal positions that perform key legal work for the MBON. Four (4) of the Assistant Attorney General positions work outside of MBON in support of MBON needs, while three (3) Assistant Attorney General positions work inside of the organization in support of Board needs.

It appears that seven (7) department head positions report directly to the MBON Executive Director. In addition, there is a Management Associate, a Special Investigator, and the three (3) Assistant Attorney General positions that report directly to the Executive Director. This is a total of 12 positions reporting directly to the Executive Director. The legal positions work somewhat independently and typically do not require substantial supervision.

3.2   Staffing Levels

According to state of Maryland (DBM) records, there are 77 Permanent Identification Numbers. The following table summarizes these positions, by job classification.

Exhibit 3-10

Filled and Vacant MBON Positions, by Job Classification

State Title	# Filled	# Vacant	Total
ADMIN OFFICER I	5	1	6
ADMIN SPEC II	14	2	16
ADMIN SPEC III	1	0	1
ADMINISTRATOR I	1	0	1
ASST ATTORNEY GENERAL	7	0	7
COMPUTER NETWORK SPEC I	1	0	1
COMPUTER NETWORK SPEC LEAD	1	0	1
COMPUTER NETWORK SPEC SUPR	1	0	1
COMPUTER OPERATOR II	1	0	1
FISCAL ACCOUNTS CLERK II	3	0	3
HLTH FAC SURVEYOR NURSE I	3	1	4
HLTH FAC SURVEYOR NURSE II	5	0	5
HLTH OCCUPATIONS INVEST III	1	0	1
HLTH OCCUPATIONS INVEST SUPV	1	0	1
IT ASST DIRECTOR II	1	0	1
IT PROGRAMMER ANALYST I	0	1	1
MANAGEMENT ASSOCIATE	1	0	1
NURSING PRGM CONSLT/ADMIN I	0	1	1
NURSING PRGM CONSLT/ADMIN II	7	0	7
NURSING PRGM CONSLT/ADMIN III	1	0	1
OFFICE SECY III	2	1	3
OFFICE SERVICES CLERK	6	2	8
OFFICE SUPERVISOR	2	0	2

PARALEGAL II	2	0	2
PRGM MGR SENIOR II	1	0	1
Totals	**68**	**9**	**77**

In addition to the 77 PIN positions, there appear to be four (4) Contractual positions within the agency, for a total of 81 positions.

These positions are assigned to the various departments as follows:

Exhibit 3-11

MBON Positions per Department/Function

Department/Area	Number of Positions
Administrative/Legal	10
Deputy Director/Advanced Practice	6
Investigations	11
Legislative	2
Rehabilitation and Discipline	10
Administrative Services	5
Nursing Practice	12
Information Systems/CHRC	21
Total	77

3.3   Workload

The State Board of Nursing (MBON) licenses two levels of nurses: registered nurses (RN's) and licensed practical nurses (LPNs). Some licensed RN's also receive a certification of advanced practice status in addition to their licensure as an RN.

The Board certifies seven types of advanced practice nurses: nurse anesthetists, nurse midwives, nurse practitioners, infusion therapy nurses, sexual assault forensic examiner (SAFE) nurses, workers' compensation medical case workers, and nurse psychotherapists. Each type of advanced practice certification has specific requirements set out in regulation. Applicants for licensure as an RN or LPN and applicants for certification as a nursing assistant must submit to a criminal history records check (CHRC).

Nurses may also be licensed by endorsement. If an applicant is licensed in another state or country and meets requirements similar to those in Maryland, the applicant is eligible for licensure without taking the National Council Licensure Examination (NCLEX) or other examinations outlined in Board regulations.

The Board certifies nursing assistants (CNAs) and medication technicians (CMTs). CMTs are required to complete a Board-approved medication training program.

3.3.1 Licenses and Certifications

The following table (Exhibit 3-12) indicates the number of licenses and certifications issued since 2006. MAG has added the last two fiscal years of workload measures to the measures noted in the 2011 Sunset Review of the MBON.

A review of the workload measures for the last two (2) fiscal years indicates a continuing upward trend in licensing and certification. The following increases are noteworthy:

- Overall, the number of certifications and licenses issued increased by 18% between FY 2011 and FY 2012. Between FY 2012 and FY 2013 there was a 7% increase. During the 2011 to 2013 period, there was a 24.4% overall increase, or an increase of 88,584 licenses and certifications issued.

- The largest increases in licenses and certifications issued over the last two (2) years were for CNA's, CMT's, and Advanced Practice certifications.

- Between 2011 and 2013, the number of CNA certificates increased by 13%, or 17,230.

- Between 2011 and 2013, the number of CMT certificates increased by 14.3%, or 11,584.

- Between 2011 and 2013, the number of AP RN certificates increased by 15%, or 817.

- In terms of actual numbers, overall, the number of individuals licensed or holding certificates was 273,336 in FY 2011, and was 361,920 in FY 2013.

Exhibit 3-12
Licenses and Certifications Held
From the State Board of Nursing
Fiscal 2006-2013

Type of Activity	FY 2006	FY 2007	FY 2008	FY 2009	FY 2010	FY 2011	FY 2012	FY 2013
Licenses/Certificate Holders								
RNs	58,216	55,860	73,818	74,683	74,104	74,884	76,857	76,292
LPNs	10,607	11,063	15,283	14,820	15,283	14,605	14,443	14,334
CNAs	48,623	47,598	81,391	98,869	107,112	114,527	124,757	131,737
CMTs	40,721	15,643	20,384	57,354	62,744	69,246	64,953	80,830
Electrologists	110	108	111	98	85	74	74	74
Additional Workload Measures Related to Nurses								
Advanced Practice Certifications Held by RNs	3,127	3,831	4,003	5,912	4,932	4,598	5,161	5,415
Licensure by Endorsement	2,704	2,091	2,456	2,599	2,812	2,696	2,331	2,646
New Licensee/Exams	2,942	3,095	3,095	2,881	3,240	3,485	3,731	3,737

Notes: The number of electrologists licensed annually is included in this chart as an indicator of the board's workload.   Licenses and certifications associated with nurses were recently changed to biennially, whereas certifications for nursing assistants and medication technicians were previously, and continue to be, issued biennially.

Source: State Board of Nursing

3.3.2   Initial Licenses and Certificates Denied due to Criminal History

MBON duties have been expanded to include review of criminal history records checks (CHRCs) on three- fourths of all applicants for both initial and renewal certification and licensure. Review of CHRCs has increased the staff workload and required MBON to expand its staff and adopt new policies and procedures. Relatively few individuals have been denied licensure or certification based on a criminal history check since the requirements were adopted. Nationally, 36 state boards of nursing, including all but 5 of the 24 compact states, mandate CHRCs as a requirement of licensure.   CHRCs are conducted by the Federal Bureau of Investigation (FBI) and by the Criminal Justice Information System (CJIS).

As shown in Exhibit 3.13, over the last two year period, a total of nine (9) RN applicants, seven (7) LPN applicants, and 11 CNA applicants were denied initial licensure or certification due to a positive CHRC result. Annually, the number of denials has increased slightly for the RN's and LPN's, and has decreased substantially for the CNA's and CMT's. Overall, the absolute number of denials and the percentage denied has decreased.

Exhibit 3-13
Initial Licenses and Certificates Denied
Due to Criminal History
Fiscal 2007-2013

Denial Due to Positive Criminal History Records Check Results According to License Type

Registered Nurses (2007 thru 2011)	3
Registered Nurses (2012)	5
Registered Nurses (2013)	4
Total	**12**
Licensed Practical Nurses (2007 thru 2011)	3
Licensed Practical Nurses (2012)	4
Licensed Practical Nurses (2013)	3
Total	**10**
Certified Nursing Assistant (2007 thru 2011)	124
Certified Nursing Assistant (2012)	7
Certified Nursing Assistant (2013)	4
Total	**135**

Denial Due to Self-reporting of a Criminal History

Certified Medication Technician* (2007 thru 2011)	105
Certified Medication Technician (2012)	8
Certified Medication Technician (2013)	5
Total	**118**
Total Denied (2007 thru 2011)	**235**
Total Denied (2012)	**24**
Total Denied (2013)	**16**
Total Overall Denials	**275**

*Certified medication technician certificate denials are based on self-disclosure of criminal history on the initial application. Criminal history records checks are not currently required of certified medication technicians.

Source: State Board of Nursing

3.3.3 Complaints

The 2011 Sunset Review indicated that the volume of total complaints handled by the MBON had increased significantly. The Board had a sizeable backlog of complaints carried over from prior years. MBON had not been able to meet its goals for the timely resolution of complaints.

From fiscal 2011 to 2013, the number of new complaints received by the Board has increased significantly across the board, and particularly for RN's and LPN's. The overall number of new complaints has increased approximately one-third.

Conversely, over the last two (2) years, the number of pending complaints has decreased for RN's, LPN's, and CMT's. The number of pending complaints for the CNA's has increased in the last two (2) years.

It appears that the Board's efforts to reduce the backlog have been quite successful.

Exhibit 3-14
Trends in Complaints Handled by the State Board of Nursing
Fiscal 2008-2013

	FY 2008	FY 2009	FY 2010	FY 2011	FY 2012	FY 2013
RNs and LPNs						
Pending Complaints	1,584	1,496	1,748	1,468	1,000	1,097
New Complaints	689	849	1,146	1,381	2,844	2,449
Subtotal	**2,273**	**2,345**	**2,894**	**2,850**	**3,844**	**3,546**
Nursing Assistants						
Pending Complaints	679	1,132	1,105	348	806	988
New Complaints	1,026	988	1,052	1,235	1,850	1,968
Subtotal	**1,705**	**2,120**	**2,157**	**1,583**	**2,656**	**2,956**
Medication Technicians						
Pending Complaints	394	467	201	83	13	7
New Complaints	423	301	274	301	576	573
Subtotal	**817**	**768**	**475**	**384**	**589**	**580**
Total	**5,282**	**5,233**	**5,526**	**4,817**	**7,089**	**7,082**

Note: The board received one complaint about a licensed electrologist in fiscal 2012, which is not included in the total.

Source: State Board of Nursing

3.4　Major Processes

The major processes that are critical to the successful accomplishment of the overall mission of the MBON include the online and paper application processes.

The next pages identify the online application process for RN's/LPN's, CNA's and CMT's as well as the paper application process for CNA's and CMT's.

3.4.1　RN, LPN, Advanced Practice, CNA/CMT Online Renewal Application Process

The LPN/RN/Advanced Practice online renewal license process is currently done on-site via computers located in the second floor of MBON's offices (upper level) or online---from each applicant's home/library, and the CNA/CMT is done on-site via computer or paper on the first floor of MBON's office. Both renewal processes are as follows:

Step 1. Fill in application. Pay initial application fee set by MBON.

Step 2. Pay for and submit fingerprints, educational requirements, and CHRC forms---as required per the application instructions. Note that LPN/RN/Advanced Practice licenses are currently processed at the second floor (upper level offices) of MBON while the CNA/CMT certificates are processed on the first floor of MBON..

Step 3. Fingerprints are run through both the STATE and NATIONAL databases and sent back to MBON Information Systems in two (2) separate files that must be converted to compatible files for the MBON system and merged/cross checked against each name of each applicant. This is a lengthy, technical, and time consuming task at this time. CHRC's, which are required for RN's, LPN's, AP Licenses and the CNA's at this time also run through two avenues, STATE and NATIONAL, and then are processed via the same two step conversion/merging process as the fingerprints.

Step 4. If the fingerprints and CHRC's come back negative (free of any criminal blemishes---MBON term that indicates that the applicant has no misdemeanors, felonies, etc.) the license is issued and the applicant is free to begin working.

Alternate Step 4. If the fingerprints or CHRC's come back positive (those with criminal histories of any form or fashion---MBON term indicates possible arrests or convictions according to each applicant) then the application goes to the in-house legal counsel for further investigation and recommendations (currently 3 members). Information regarding those crimes is compiled from the investigation by investigators, 13 plus hard copies are produced/13 plus are copied to flash drives and distributed to the Board for review.

Step 5. The applicant is notified of this hearing (date and time) via postcard in the US mail. The Board (currently 13 members) meets to determine the next step in this process. Meetings are held monthly and usually 12 cases can be heard per meeting. Meetings last the entire day. The applicant can have counsel represent them in this hearing.

Because the Board only meets monthly this creates lag time in the initial application process, depending on what time of the month the applicant applied and also on the number of cases the Board and can hear per meeting. Time in this step can vary from a few weeks to over one (1) year depending on the situation.

Step 6. The Board can determine whether or not to proceed with licensure depending on the CHRC and other information presented to them during, and prior to, the hearing. i.e. if the applicant has a DUI they (the applicant) may be required to spend a number of years/months doing some type of rehabilitation under the Board depending on what is determined by the Board. Conversely, if there is a felony and the circumstances dictate that a license should be denied the Board may act accordingly.

Step 7. The Board, once the applicant has been provided with a certification number, has a certificate printed on bonded paper. These are printed once a week and then labeled and then placed in the mail.

Exhibit 3-15, on the following page, is a flow chart depicting the application process for the RN, LPN, Advanced Practice, and CNA/CMT online renewal application process.

Exhibit 3-15. All Categories Online Renewal Application Process Flowchart

Step 1. (Renewal Online Process)
- Renewal exported (4 separate files)
  - Fixed & send to Comptroller's office
- Board places holds on individuals sent back by Comptroller's office
  - Fixed & sent to Online Vendor

Step 2.
- Complete online application.
- Pay fee set by MBON.
- **All except new discipline since last renewal**

Step 2a.
- IT Functions:
  - Receive file(s) daily
  - Import into imaging system
    - Processed through Workbaskets
  - Export from imaging system
  - Import into Licensure database

Step 3-1 month yearly.
- IT/CHRC department:
  - Open each State/FBI e-mail
  - Negative entered onto spreadsheet
    - Name
    - SSN
    - DOB
    - Transaction ID
  - Imports into Licensure DB
  - List
  - Manually cleared issue CHRC people

Step 4.
- Renewals are processed whether negative or positive

Alternate Step 4.
- Positive fingerprints
  - Investigation/discipline,
  - recommendation,
    - PL&C
    - Settlement
  - Denial or probation
    - hearing before BOARD

Step 5.
- Applicant notified of hearing before BOARD

Step 6.
- BOARD determines disciplinary action for licensee/certificate holder.

Step 7.
- Thank you postcard printed for renewing
- Non-Renewed postcard printed base 30-day grace period.

Exhibit 3.16.MBON LPN/RN/Advanced Practice Paper Renewal Application Process Flowchart
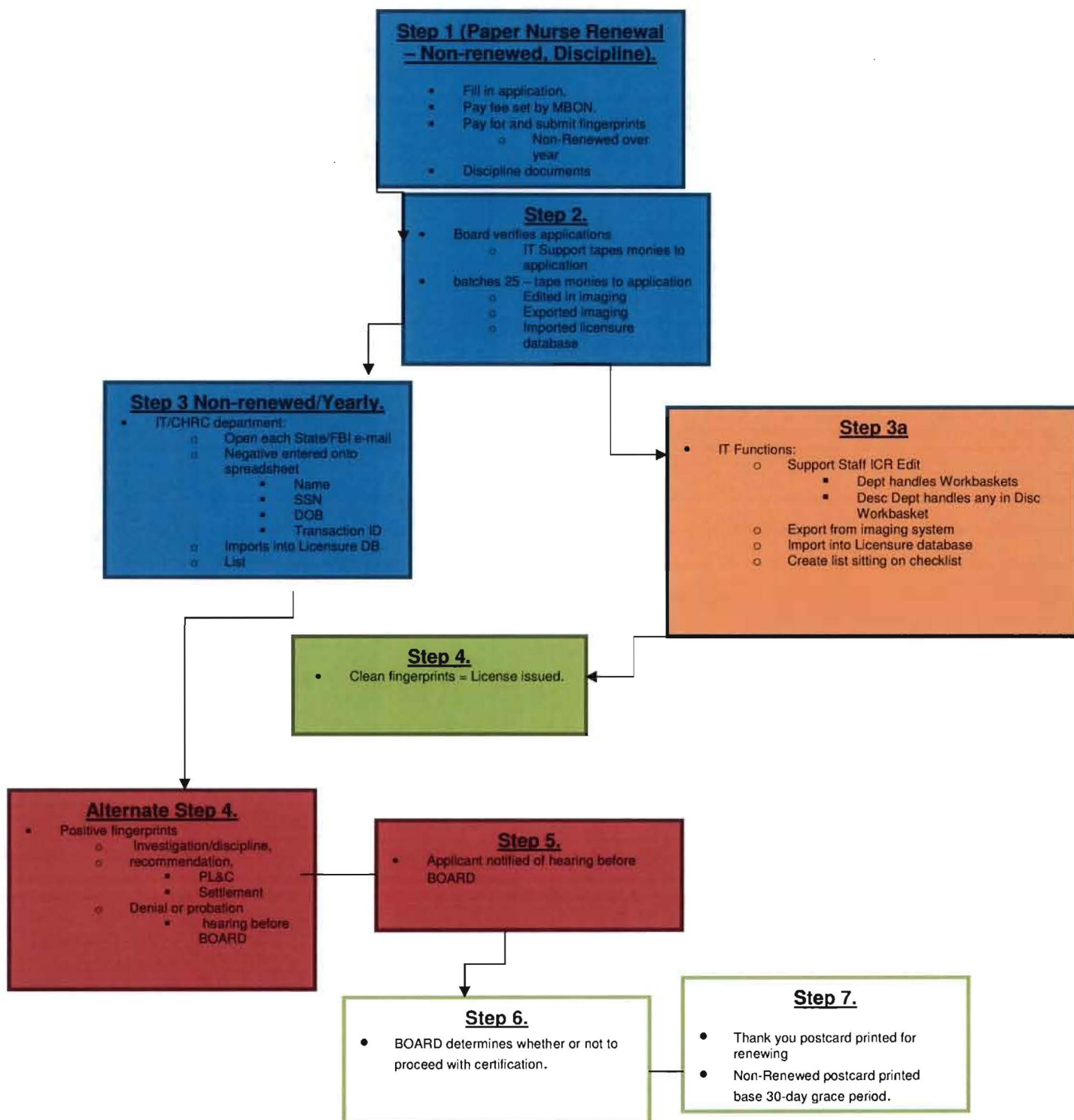
Exhibit 3-17.MBON LPN/RN/Advanced Practice Initial Paper Application Process Flowchart

Step 1 (Paper NCLEX/End/Adv Prac). (Discipline, NCLEX, & Endorsement)

- Fill in application.
- Pay fee set by MBON.
- Pay for and submit fingerprints
- Discipline documents

Step 2.

- Board verifies applications
  - Fiscal Post monies
- batches 25 – tape monies to application
  - Edited in imaging
  - Exported imaging
  - Imported licensure database

Step 3.

- IT/CHRC department:
  - Open each State/FBI e-mail
  - Negative entered onto spreadsheet
    - Name
    - SSN
    - DOB
    - Transaction ID
  - Imports into Licensure DB
  - List

Step 3a

- IT Functions:
  - Support Staff ICR Edit
    - Dept handles Workbaskets
    - Desc Dept handles any in Disc Workbasket
  - Export from imaging system
  - Import into Licensure database
  - Create list sitting on checklist

Step 4.

- Clean fingerprints = License issued.

Alternate Step 4.

- Positive fingerprints
  - Investigation/discipline,
  - recommendation,
    - PL&C
    - Settlement
  - Denial or probation
    - hearing before BOARD

Step 5.

- Applicant notified of hearing before BOARD

Step 6.

- BOARD determines whether or not to proceed with certification.

Step 7 Exams.

- IT Functions:
  - Prints Exam certificate

3.4.2 MBON CNA/CMT Application Process

The CNA/CMT initial certification process is currently done on-site via computers (in *kiosks*) located in *(reception area)* the lower level (first floor offices) of MBON or online---from each applicant's home/library, etc. and proceeds as follows: - **(Nursing Asst. initial applicants who have the following must complete a paper application: 1.) answer yes to any of the discipline questions, 2.) any NCLEX–Exam candidate failures need to submit paper application along with new set fingerprinting transaction, 3.) C.N.A. Endorsements).**

The applicant must have the 12-digit transaction number provided by the fingerprinting vendor, before starting the online process.

Step 1. Pay for and submit fingerprints, and educational requirements **(The only time the Nursing Assistant is required to provide hard copy of a fingerprint transaction and educational information is when they answer 'yes' to discipline question(s), or if they are Endorsing from another state, or if they are an Exam candidate who has failed)**—as required per the application instructions.

- The Board also must verify, via INAC class list, that each individual has taken the required class work. If they are RN/LPN Exam candidate and has failed, then the NCLEX department must verify that they have the required clinical hours and submit this information to the C.N.A. department.

- Once the IT Staff has received

    o Online application

    o Processed through imaging system

        ▪ Moving applications that are ready for export
        ▪ Import into licensure database

    o Received class list entered by instructor

        ▪ List are generated daily
        ▪ Sent to C.N.A. department notifying them these individuals meet qualifications for 90-day letter

- The C.N.A. department will then process a 90-day letter for each individual who meets the necessary requirements for certification.

At this time, August 2013, neither certificate requires a CHRC, but it has been noted that this requirement may change for the CMTs. **(At this time, the Med Tech is not required to do fingerprints. The Nursing Assistant is required whether they are in-state or endorsing from other state)**

Step 2. Fill in application. Pay initial application fee set by MBON.

The Med Tech initial application was placed online May 7, 2013, it becomes mandatory for all on January 1, 2014. The steps are as follows:

- The Delegating RN must enter class list/completed course online

  o All information must be there before the student can do their online application

  o This eliminates the Board having to verify a class list separate from the application

- The student then goes and processes their online application

  o Their name, social security number, date of birth must match class information

- If their information does not match the instructors information, the student cannot process their application

  o This eliminates individuals submitting false applications

- If all matches, then the student can either pay for application or complete process and notify their institution that application is ready for payment

Note that CNA/CMT applications are currently processed at the first floor of MBON's main office complex.

- **For all applications that are not completed online, these are the steps:**

  o The institution must submit completed applications to the Board

  o The applications must have a completed paper class list attached

  o Board staff then verifies

    ▪ that all information is completed on the application
    ▪ that payment equals all students
    ▪ that individuals repeating class and already have certificate number are not included with initial applicants
    ▪ must send all incomplete applications back

  o Board staff then puts applications in batches of 25, tapes all institution check(s) or money orders to applications and sends up stairs to be scanned

  o Once scanned, Fiscal removes the monies

  o IT staff completes Intelligent Character Recognition (ICR) editing

  o Board staff – lower level – processes any applications in workbaskets

- o IT staff exports information from imaging and imports into licensure database

- o Board staff – lower level – is then provided with list of eligible applicants ready for certification

    - ▪ Board staff – lower level- then opens each application on checklist

        - • One staff member
            - o pays fees
            - o clears checklist items
            - o makes complete
        - • Second staff member
            - o Approves – certifies, number provided
            - o Sends to print batch
        - • IT staff member then prints certificates and creates labels
        - • IT staff member then
            - o puts label on envelop,
            - o matches name on envelop with certificate
            - o closes clasp and meets requirements for mailing by DHMH

Step 3. Fingerprints are run through both the STATE and NATIONAL (**FBI**) databases and sent back to MBON Information Systems in 2 separate files (**e-mails**) that must be converted to compatible files for the MBON system and merged/cross checked against each name of each applicant. This is a lengthy, technical, and time consuming task at this time.

- • The IT/CHRC department must do the following:

    - o Each State and FBI negative report are open

    - o FBI reports are entered 1st into a spreadsheet
        - ▪ Name from FBI
        - ▪ SSN – if they have provided to FBI
        - ▪ Date of Birth

    - o State reports are then entered on spreadsheet

        - ▪ They must ensure
            - • names match
            - • Date of birth
            - • CJIS does not include social security number on their reports

        - ▪ They provide the tracking number
            - • This way the Board meets FBI requirements
                - o Only use one result per licensure/certification type

Step 4. If the fingerprints come back free of any crimes the certificate is issued and the applicant is free to begin working. (**If the applicant has provided correct information: application, on class list provided by RN, payment, & negative background – then this individual can be processed and provided with a certification.**)

Alternate Step 4. If the fingerprints come back with misdemeanors or other crimes (the MBON term for this is POSITIVE) then the application goes to the in-house (**investigation/discipline department(s)** for further investigation and recommendations (currently 3 members). Information regarding these crimes is compiled from the investigation by the investigators, (**then it is sent to Pre-Licensing and Certification (PL&C); those which cannot be addressed in PL&C, if no discussion it goes to settlement conference, if denial or probation goes to the Board).** Thirteen (13) plus hard copies are produced/13 plus are copied to flash drives and distributed to the Board.

Step 5. The applicant is notified of this hearing (date and time) via (Certified) mail. The Board (currently 13 members) meets to determine the next step in this process. Meetings are held monthly and usually 12 cases can be heard per meeting. Meetings last an entire day. The applicant can have counsel represent them in this hearing.

Because the Board only meets monthly this creates lag time in the initial application process, depending on what time of the month the applicant applied and also on the number of cases the Board can hear per meeting.

Step 6. The Board can determine whether or not to proceed with licensure depending on the CHRC and other information presented to them during, and prior to, the hearing. i.e. if the applicant has a DUI they (the applicant) may be required to spend a number of years/months doing some type of rehabilitation under the Board depending on what is determined by the Board. Conversely, if there is a felony and the circumstances dictate that a license should be denied the Board may act accordingly.

Step 7. The Board, once the applicant has been provided with a certification number, has a certificate printed on bonded paper. These are printed once a week and then labeled and then placed in the mail.

Exhibit 3-18, on the following page, is a flow chart depicting the paper application process for the CNA's and CMT's.

Exhibit 3-19, on page 3-28, is a flow chart depicting the on-line application process for the CNA's and CMT's.

Exhibit 3-18
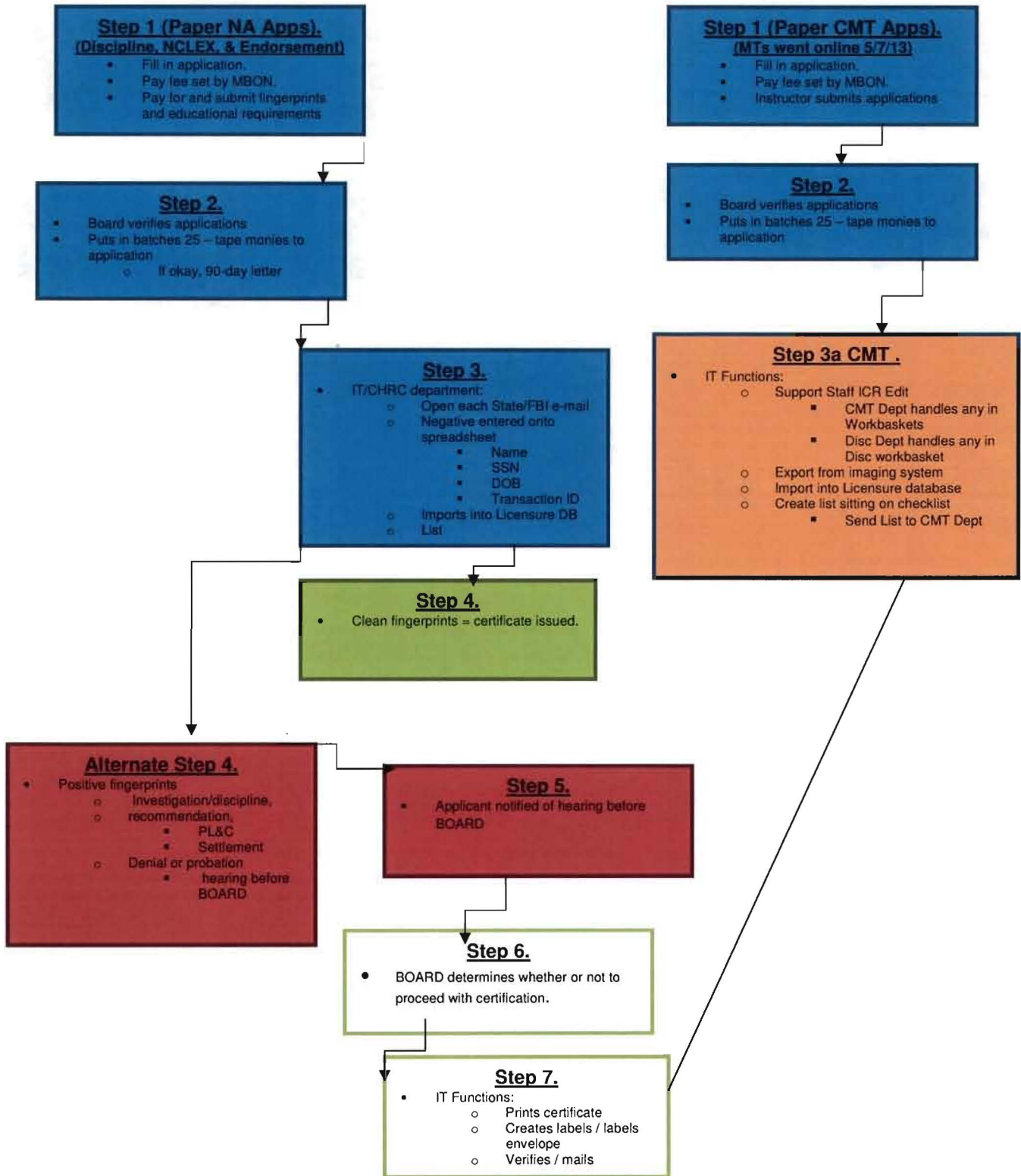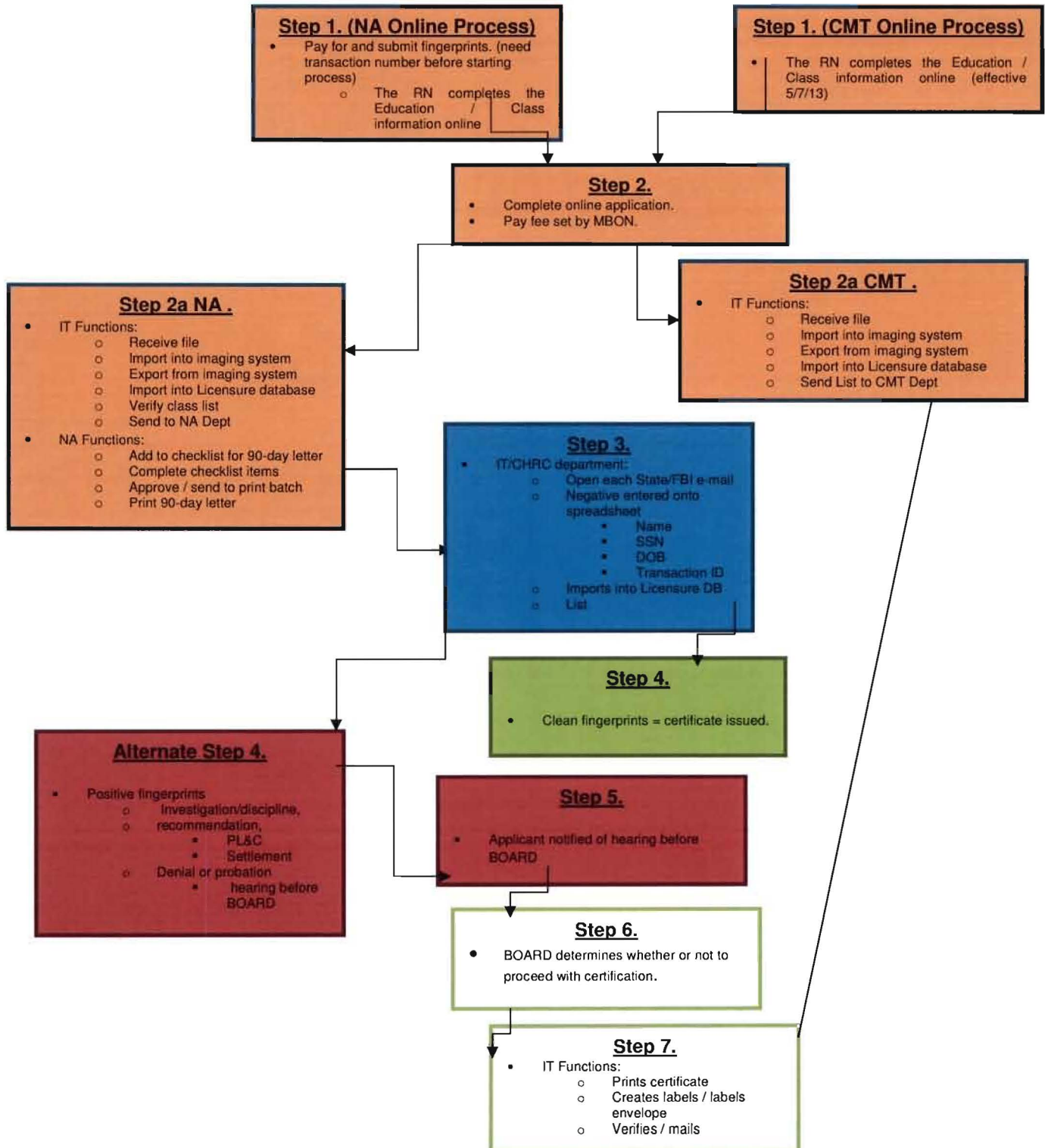**CNA and CMT Paper Application Process Flowchart**

Step 1 (Paper NA Apps).
(Discipline, NCLEX, & Endorsement)
- Fill in application.
- Pay fee set by MBON.
- Pay for and submit fingerprints and educational requirements

Step 1 (Paper CMT Apps).
(MTs went online 5/7/13)
- Fill in application.
- Pay fee set by MBON.
- Instructor submits applications

Step 2.
- Board verifies applications
- Puts in batches 25 – tape monies to application
    o If okay, 90-day letter

Step 2.
- Board verifies applications
- Puts in batches 25 – tape monies to application

Step 3.
- IT/CHRC department:
    o Open each State/FBI e-mail
    o Negative entered onto spreadsheet
        ▪ Name
        ▪ SSN
        ▪ DOB
        ▪ Transaction ID
    o Imports into Licensure DB
    o List

Step 3a CMT .
- IT Functions:
    o Support Staff ICR Edit
        ▪ CMT Dept handles any in Workbaskets
        ▪ Disc Dept handles any in Disc workbasket
    o Export from imaging system
    o Import into Licensure database
    o Create list sitting on checklist
        ▪ Send List to CMT Dept

Step 4.
- Clean fingerprints = certificate issued.

Alternate Step 4.
- Positive fingerprints
    o Investigation/discipline,
    o recommendation,
        ▪ PL&C
        ▪ Settlement
    o Denial or probation
        ▪ hearing before BOARD

Step 5.
- Applicant notified of hearing before BOARD

Step 6.
- BOARD determines whether or not to proceed with certification.

Step 7.
- IT Functions:
    o Prints certificate
    o Creates labels / labels envelope
    o Verifies / mails

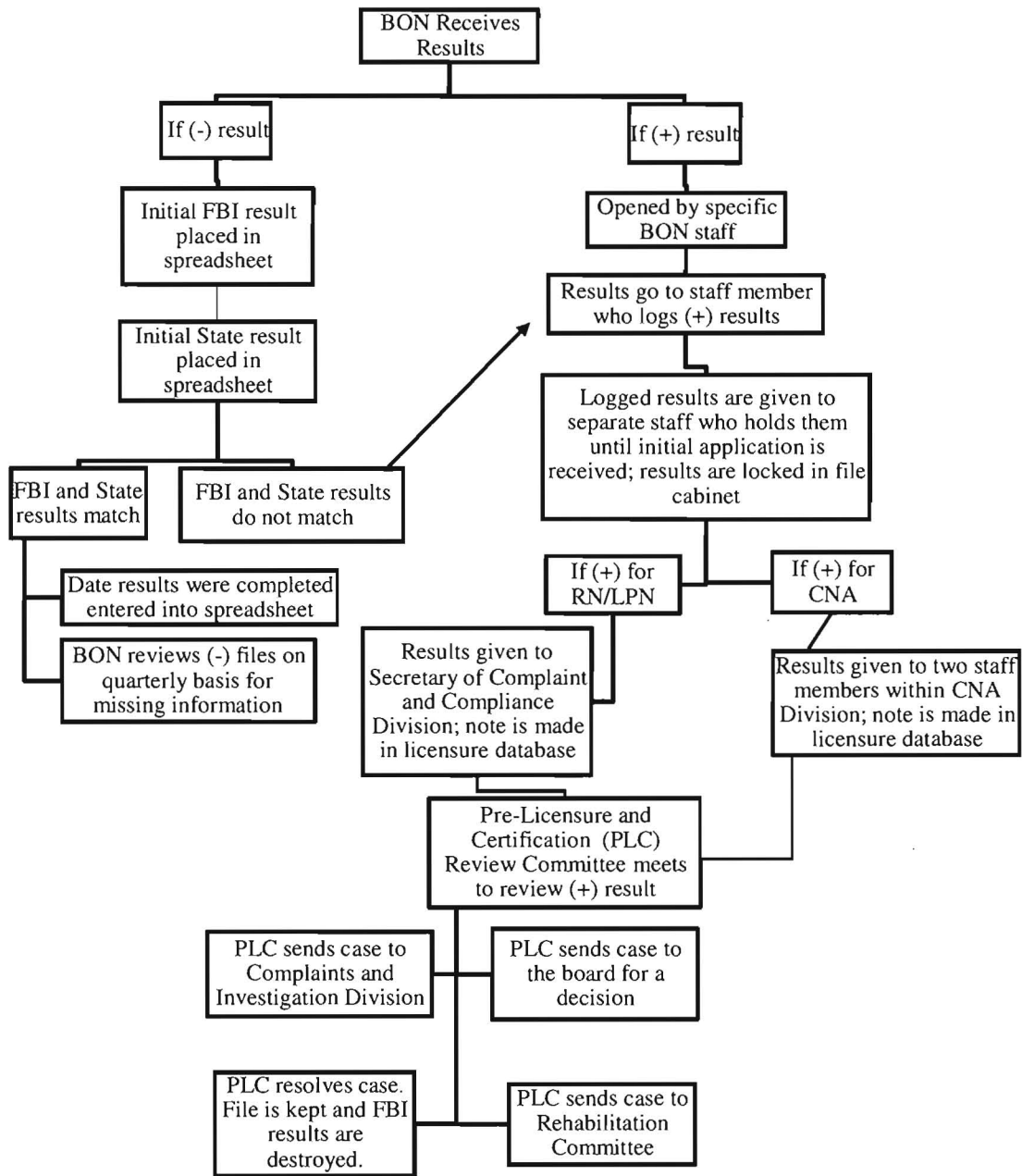**Exhibit 3-19. CNA and CMT Online Application Process Flowchart 2013**

3.4.3   Criminal History Records Check Process

Applicants must apply for CHRCs before submitting their initial application for licensure or certification with the Board.   Once the Board receives a CHRC result, the application can be processed in conjunction with the assessment of the CHRC result.   Exhibit 3-20 outlines the process followed by the Board after receiving CHRC results from the FBI and CJIS. Please note that there are four (4) possible outcomes from the PL & C. They include:

1) the case can be sent to Complaints & Investigations,
2) the case can be sent to the Board for a decision,
3) the case can be sent to Rehabilitation & Discipline, or,
4) the case can be resolved and the files destroyed.

Exhibit 3-20.Criminal History Records Check Process
Followed by MBON Upon Receipt of Results

BON Receives Results

If (-) result

If (+) result

Initial FBI result placed in spreadsheet

Opened by specific BON staff

Results go to staff member who logs (+) results

Initial State result placed in spreadsheet

Logged results are given to separate staff who holds them until initial application is received; results are locked in file cabinet

FBI and State results match

FBI and State results do not match

If (+) for RN/LPN

If (+) for CNA

Date results were completed entered into spreadsheet

BON reviews (-) files on quarterly basis for missing information

Results given to Secretary of Complaint and Compliance Division; note is made in licensure database

Results given to two staff members within CNA Division; note is made in licensure database

Pre-Licensure and Certification (PLC) Review Committee meets to review (+) result

PLC sends case to Complaints and Investigation Division

PLC sends case to the board for a decision

PLC resolves case. File is kept and FBI results are destroyed.

PLC sends case to Rehabilitation Committee

3.5   Policies and Procedures

According to the 2011 Sunset Review, the Board has taken proactive steps in response to the increased workload presented by the implementation of CHRCs through organizational restructuring and the streamlining of complaint resolution policies associated specifically with positive results.   MAG has been provided with a number of policies and the procedures related to the CHRC process. The MBON has developed an overview flow chart (Exhibit 3-18) that depicts the major steps in the CHRC review process. There are no supporting written procedures that provide any additional guidance in this process that are available on the MBON website, and MAG encourages communication of selected policies related to the CHRC process to inform and guide licensees and certificate applicants.

SECTION 4.0

RECOMMENDATIONS

Section 4: Analysis and Recommendations

In the previous section, MAG established a baseline of understanding for the reader, to ensure a common view of the structure, staffing and major processes within MBON.

In this section, MAG will develop recommendations for major processes including applications, CHRC's, and complaints; organizational structure, staffing and workload, customer service, and administrative issues. We will take into account how the processes are currently being completed and recommend changes that should effectively streamline those processes or create greater efficiencies. There are functions under each unit/department of the organizational structure that should, in our view, be changed to allow those departments to fully realize the skills and expertise of their staff.

This section will also include a review of customer service as it pertains to the online/in person/telephone conversations with licensees and certificate holders. Changes that might make the interactions between MBON and the public a better experience will be included. Lastly, any administrative issues will be addressed and recommendations made that should make the internal workings of MBON flow more smoothly.

4.1 Organization Structure

The MBON organizes largely along functional lines, which reflects the various functional areas, such as Advanced Practice, Nursing Practice, Rehabilitation and Discipline, and Investigations. Support work is completed by Administrative Services, Legislation, and Information Systems.

Mixing of Administrative and Operational Functions in MBON

There appears to be some operational work being completed in the administrative functions at MBON. For example, the CHRC process is assigned to Information Systems. Also, the Administrative Services Director serves as the liaison between the Electrologists and the Board of Nursing. MAG believes that the attempted integration of administrative and operational functions is not productive for the organization. The reader will see that MAG's recommended organizational structure separates out the CHRC review process as a distinct functional component. In addition, the handling of Electrologists and related activities surrounding their licensing will be broken out from Administrative Services to enable that unit to properly focus on administrative functions.

Executive Director Span of Control is Excessive

It appears that seven (7) department head positions report directly to the MBON Executive Director. In addition, there is a Management Associate, a Special Investigator, and the three (3) Assistant Attorney General positions that report directly to the Executive Director. This is a total of 12 positions reporting directly to the Executive Director. This is somewhat beyond a normal span of control for administrative and professional functions. It is a result of the underutilization of the Deputy Director position and the direct reporting of three (3) Assistant Attorney General positions. In this section, MAG will make recommendations to tailor the span of control for the Executive Director, consolidate the operational units, and maximize the high level position of Deputy Director.

Legal Support System for MBON is Unique but Effective

The current overall organization chart for MBON includes seven (7) legal positions that perform key legal work for the MBON.

Four (4) of the Assistant Attorney General positions work outside of MBON in support of MBON needs, while three (3) Assistant Attorney General positions work inside of the organization in support of Board needs. The assignment of these legal positions may appear a bit awkward to the outside reviewer, however, the organization and reporting relationships appear to be working relatively effectively. The ability of the legal positions to work independently enables the Executive Director to manage those support activities with relatively minimal time demands.

Information Systems and MBON as a Whole is Impacted by CHRC Alignment

Additionally, the requirement for criminal history records checks (CHRC's) as a condition of licensure or certification has had an impact on the Department of Information Systems and CHRC's responsibilities. MAG believes that the alignment of the CHRC review process within the Information Systems function is inappropriate and is not working. The ability of IT to focus its efforts on the critical and ongoing information needs of the organization is distracted by the placement of the administration of CHRC's within the department. Information systems and information management is at the core of a successful organization such as MBON. The efficiency and effectiveness of the entire organization is being adversely affected by the inappropriate organizational alignment.

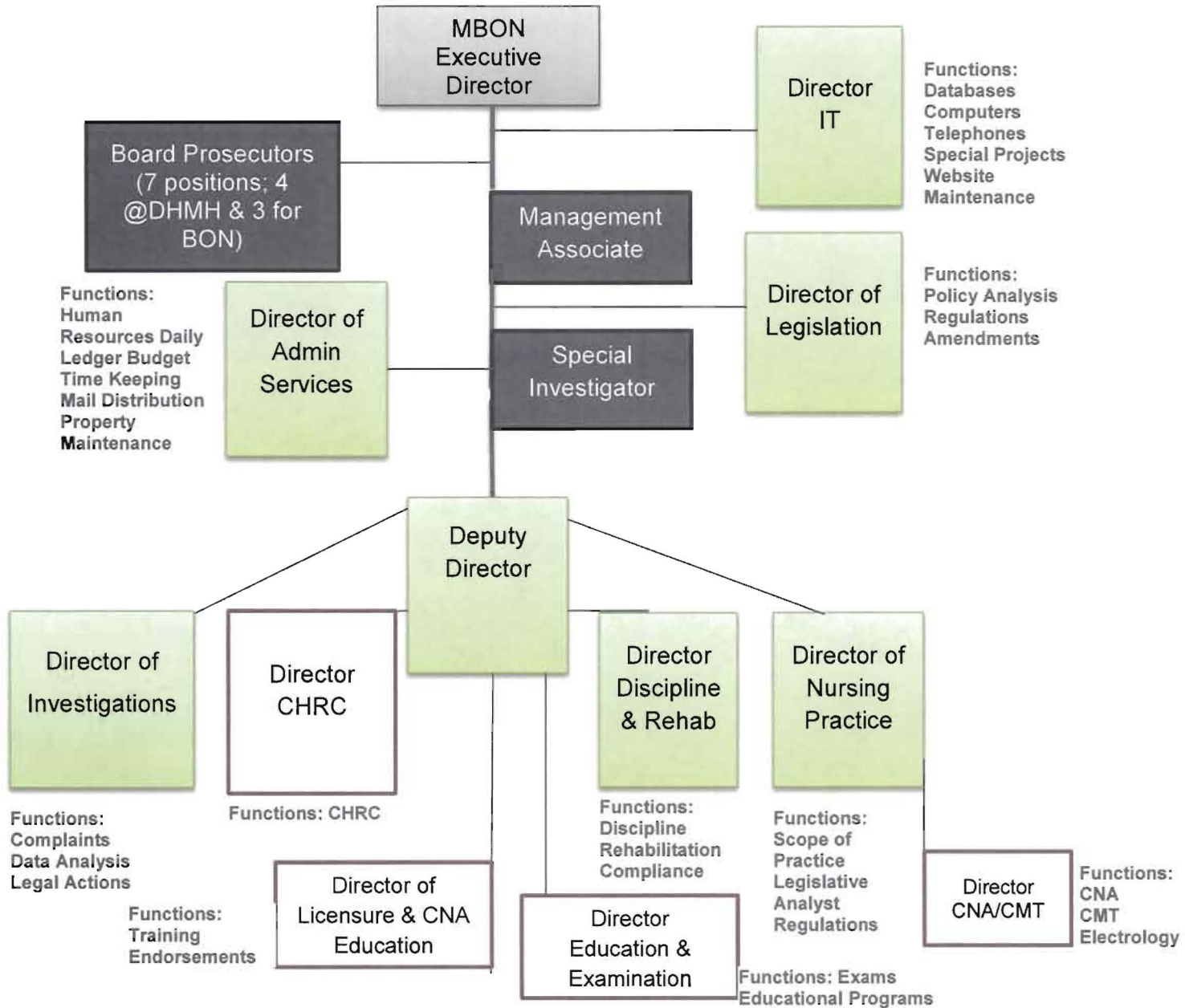## Board Satisfies Mandates and Issues Licenses and Certifications

MAG agrees with the Sunset Review report indicating that there appears to be an atmosphere of disarray from the format of the board's website to its office organization to its staffing alignments to its equipment.

In spite of apparent lack of cohesion and coordination between departments and duties between staff, the board generally satisfies its statutory mandates but in a disjointed manner, as the Sunset Review concludes. MAG concurs that organizational deficiency was evident in the board's data collection and maintenance functions.

MAG's project team further concludes that with organizational realignments, changes to how staff is tasked to the major processes of licensing and certification, an overhaul of the website, authority to fill current vacancies, and upgrading of skills in the information systems function, substantial improvements can be made. A new, fresh look at the organization will also be possible with an incoming Executive Director and an energized Deputy Director position.

Exhibit 4-1, on the following page, represents the recommended MBON organization chart with MBON working titles.

Exhibit 4-1. MBON Functional Org Chart with Working Titles

MBON Executive Director

Director IT
Functions:
Databases
Computers
Telephones
Special Projects
Website
Maintenance

Board Prosecutors (7 positions; 4 @DHMH & 3 for BON)

Management Associate

Director of Legislation
Functions:
Policy Analysis
Regulations
Amendments

Director of Admin Services
Functions:
Human Resources Daily
Ledger Budget
Time Keeping
Mail Distribution
Property
Maintenance

Special Investigator

Deputy Director

Director of Investigations
Functions:
Complaints
Data Analysis
Legal Actions

Director CHRC
Functions: CHRC

Functions:
Training
Endorsements

Director of Licensure & CNA Education

Director Discipline & Rehab
Functions:
Discipline
Rehabilitation
Compliance

Director Education & Examination
Functions: Exams
Educational Programs

Director of Nursing Practice
Functions:
Scope of Practice
Legislative
Analyst
Regulations

Director CNA/CMT
Functions:
CNA
CMT
Electrology

4.1.1 Deputy Director: Consolidation of Operational Departments

The position of Deputy Director is currently underutilized within the organization. The position is the second highest classified position in the organization, yet has had the assigned duties minimized. The Executive Director currently supervises nearly all of the operational and administrative functions, in addition to handling interagency and Board interactions.

MAG asserts that a consolidation of operational functions under the Deputy Director position would yield increased utilization of both the Executive Director and Deputy Director positions. Staff indicated that both of these top positions will become open in the near future due to retirements. This will offer a fresh opportunity for this reorganization of major duties and functions.

Consolidating the operational functions under the Deputy Director position would create improved operational coordination and also enable the Executive Director to focus on broad and critical issues impacting on the mission of the MBON.
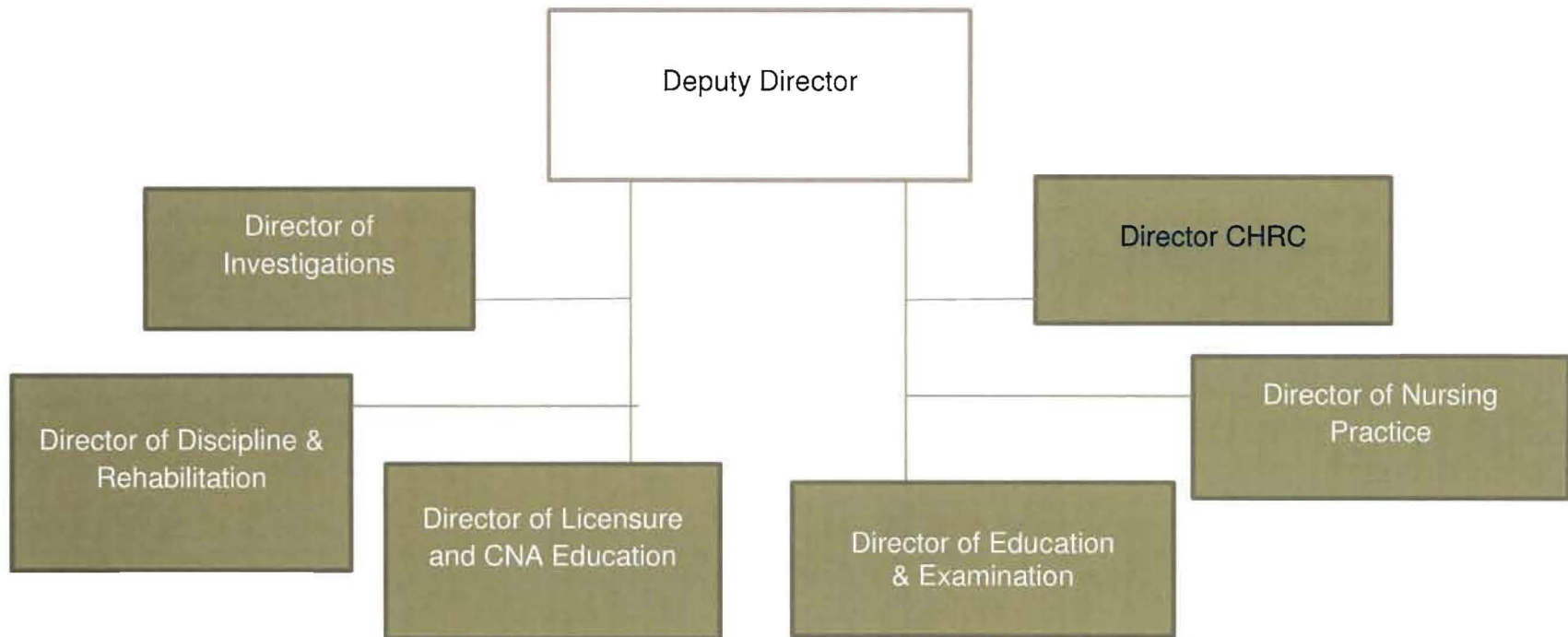
This action also would reduce the span of control for the Executive Director from twelve (12) to nine (9) positions. This includes six (6) department head positions plus the three (3) Assistant Attorney General positions.

Recommendation #1: MBON should consolidate operational responsibilities under the Deputy Director and reorganize the entire organization as follows:

- **The Deputy Director would be responsible for operational functions, including Licensure and Education, CHRC, Investigations, Discipline and Rehabilitation, Nursing Practice, and Advanced Practice.**

- **The Executive Director would directly supervise the Deputy Director, attorneys, special investigator, Information Systems, Administrative Services, and Legislative Departments.**

Exhibit 4-2, on the following page, shows the recommended direct reports for the Deputy Director position.

Exhibit 4-2 Department Chart – Deputy Director

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                          ┌─────────────────────┐
                          │   Deputy Director    │
                          └─────────────────────┘

  ┌──────────────────┐                              ┌──────────────────┐
  │   Director of     │                              │   Director CHRC   │
  │  Investigations   │                              │                   │
  └──────────────────┘                              └──────────────────┘

┌──────────────────┐                                      ┌──────────────────┐
│ Director of       │                                      │ Director of       │
│ Discipline &      │    ┌──────────────────┐              │ Nursing Practice  │
│ Rehabilitation    │    │ Director of       │   ┌──────────────────┐  └──────────────────┘
└──────────────────┘    │ Licensure and     │   │ Director of       │
                        │ CNA Education     │   │ Education &       │
                        └──────────────────┘   │ Examination       │
                                               └──────────────────┘
```

Deputy Director

Director of Investigations

Director CHRC

Director of Discipline & Rehabilitation

Director of Licensure and CNA Education

Director of Education & Examination

Director of Nursing Practice

4.1.2 Electrology Licensing: An Operational Function

There were 74 Electrologists licensed in FY 2013. The Administrative Services Director currently serves as the liaison between the Electrologists and the Board of Nursing. This includes setting up and attending quarterly meetings for the Electrology Committee, responding to inquiries from the public about obtaining an Electrology license, approval of CEUs, ensuring that renewal applications are sent in a timely manner yearly and reviewing and approving of applications for licensure.

MAG believes that the licensing of Electrologists is more of an operational function, similar to the licensing and certification of CNA's and CMT's, rather than an administrative function such as human resources and financial management.

This function and activities should be reassigned to an operational department. MAG believes that the perfect fit for this function is under Nursing Practice.

Recommendation #2: Reassign Electrology from Administrative Services to the Department of Nursing Practice. MAG recommends that the MBON move the electrology licensing under Nursing Practice, along with the certifications of the CNA's and CMT's. This frees up the Administrative Services Department to concentrate on the administrative functions within MBON.

4.1.3 Information Systems and CHRC's

The Department of Information Systems and CHRC's includes 21 assigned positions to the variety of important IT and operational functions.
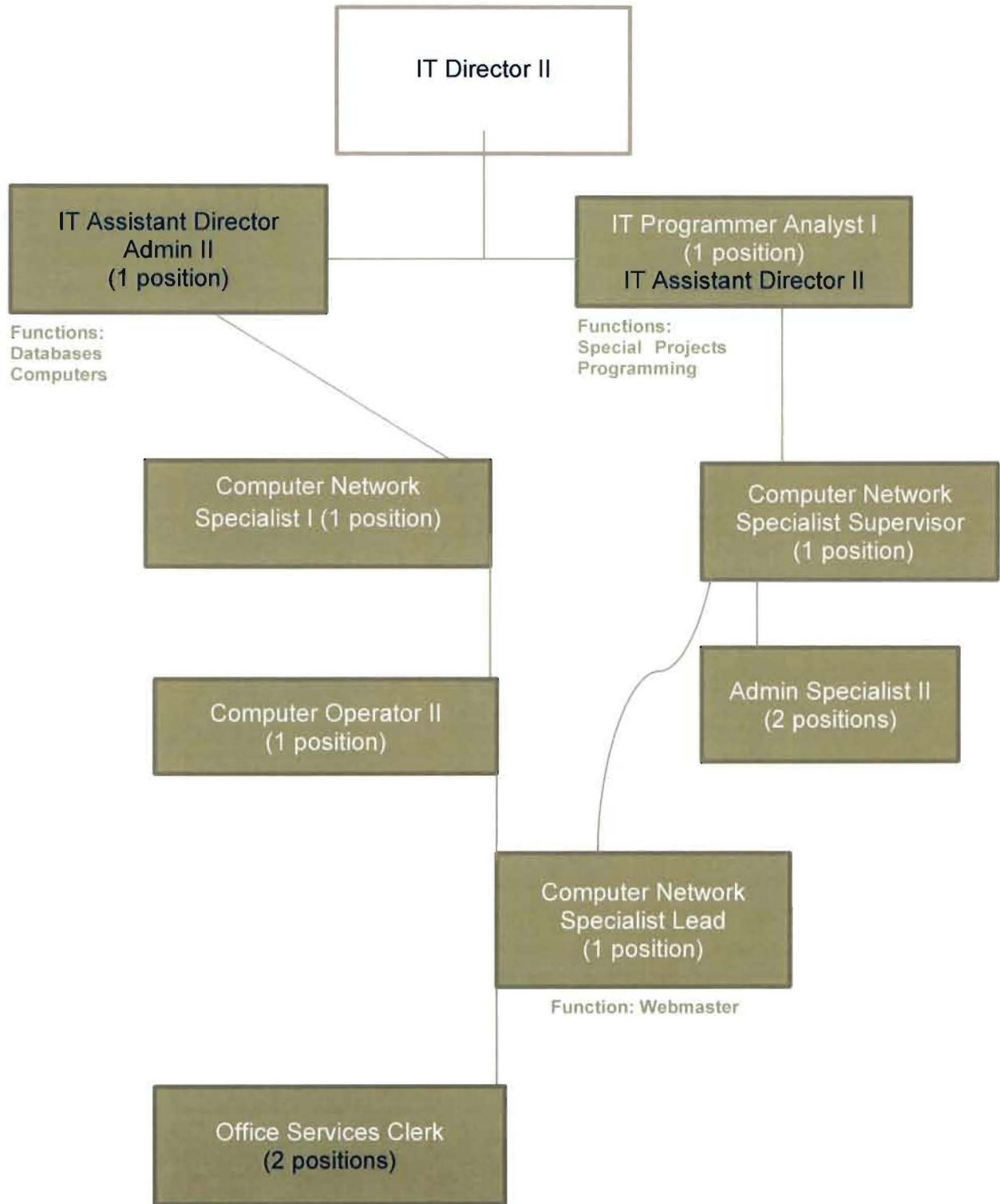
Information system management is a core and key function for the MBON, and deserves appropriate resources and top level skills. The work is substantial and ongoing, and staff is required to respond to the day to day issues and concerns that emerge. That leaves little time for systems improvement and adjustments. Many of the activities are routine, thus requiring entry level staff positions that currently exist at a sufficient level. However, there are higher level IT management and programming activities that do not receive adequate attention. Current managers with appropriate abilities are being spread thin.

The current IT Assistant Director II (state title) incumbent serves as the head of the department (MBON working title is Director of IT). This position is overburdened with both supervisory and day to day operational duties.

There is a need for additional management and high level skills in this department. MAG recommends continuing some of the high level duties for the current head of the department and assigning other high level duties to new, reclassified top IT management positions recommended (as described on page 4-8).

Recommendation #3: Create two (2) additional high level positions in Information Systems, through upgrades to existing positions.

Exhibit 4-3.MBON Department Chart Info Sys

IT Director II

IT Assistant Director
Admin II
(1 position)

Functions:
Databases
Computers

IT Programmer Analyst I
(1 position)
IT Assistant Director II

Functions:
Special Projects
Programming

Computer Network
Specialist I (1 position)

Computer Network
Specialist Supervisor
(1 position)

Computer Operator II
(1 position)

Admin Specialist II
(2 positions)

Computer Network
Specialist Lead
(1 position)

Function: Webmaster

Office Services Clerk
(2 positions)

These newly created positions would include an IT Director II position (state title) to oversee the Information Systems Department, and a second IT Assistant Director II (state title) position with high level programming/code writing skills. These positions should be funded from existing vacant positions (IT Programmer Analyst I and Computer Network Specialist Supervisor). There is no net increase in positions in this area, although there would be a slight increase in cost (estimated $40,000) due to the positions being classified and paid at a higher level.

Duties of IT Assistant Director Positions

In terms of separation of duties and major functions, one of the IT Assistant Director II positions would be responsible for database management and computers, while the other IT Assistant Director II position would be responsible for special projects and programming.

This recommendation will have the effect of raising the overall level of IT management, code writing, and programming capabilities within the department.

CHRC's

Currently, the management and handling of the CHRC process is completed within Information Systems.

This function appears to have been assigned to IT because the criminal history data is currently being sent from CJIS and the FBI in files that only one incumbent in the Information Systems Department can open and organize. This process in and of itself needs to be corrected so that inefficiencies in this department can be recouped and the licensure and/or certification process can be streamlined. There has been some discussion at the management level with the providers of the criminal history data regarding the restructuring of the format that data is currently transferred, however, it has been insufficient to clarify the impact on MBON for the unwieldy and awkward format of the data as it now exists.

MAG believes that the handling of CHRC's is more of an operational function, similar to the licensing and certification of CNA's and CMT's, rather than an administrative function such as information systems management.

Recommendation #4: Create the CHRC function as a stand-alone department reporting under the Deputy Director. This will help expedite and integrate the criminal histories into the application and/or renewal process.

Recommendation #5: The board should delay seeking legislation to require CMTs to submit to CHRCs, until organizational efficiencies are achieved in the newly designed CHRC Department.

Exhibit 4-4 Director of CHRC

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                  ┌─────────────────────────────┐
                  │       Director of CHRC       │
                  │          Admin II            │
                  │ (State Title is Nursing Admin│
                  │        Consultant II)        │
                  └─────────────────────────────┘
                         │              │
              ┌──────────────────┐   ┌──────────────────┐
              │ Office Supervisor │───│  ACD Operators   │
              │   (1 position)    │   │   (1 position)   │
              └──────────────────┘   └──────────────────┘
                       │
              ┌──────────────────┐
              │    RN/AP/LPN      │
              │     Admin I       │
              └──────────────────┘
                       │
                                      ┌──────────────────┐
                                      │    CAN/CMT        │
                                      │   Electrologists  │
                                      │ Office Services   │
                                      │     Clerks        │
                                      │   (3 positions)   │
                                      └──────────────────┘
              ┌──────────────────┐
              │ Office Services  │
              │     Clerks       │
              │   (3 positions)  │
              └──────────────────┘
```
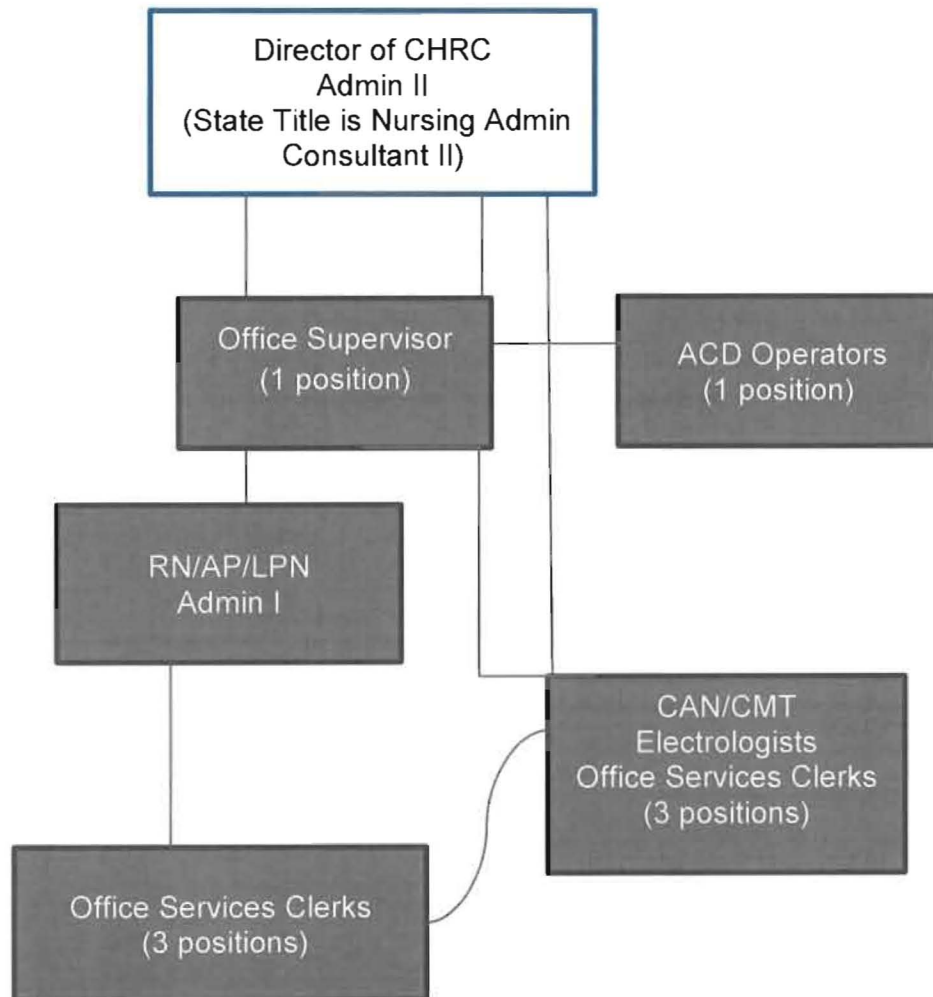
4.2 Staffing

As an overall observation, in reference to the number of PINS (77) and contractual positions (4) that exist within MBON, MAG believes that staffing for MBON is nearly adequate for current and anticipated needs, under the following conditions:

- Organizational restructuring is accomplished as noted in Recommendations 1, 2, and 4;

- Information Systems management positions are created through upgrades recommended in Recommendation 3;

- Selected positions are reclassified appropriately and filled through recruitment;

- Vacant positions are authorized to be filled;

- Cross training of office staff issuing certifications and licenses is accomplished.

MBON Staff Request for Positions

During interviews, Department Directors indicated a desire for additional staff positions in a variety of areas (but not all).

After careful consideration, MAG concludes that most of the staff requests are not needed, but, for the most part, instead can be accommodated by filling vacancies or placing the right person in the right job classification so the departments can operate at peak efficiency. For example, MBON staff noted that Information Systems is short of staff to perform the required duties. During our interviews we were able to identify an excellent picture of what would be appropriate for Information Systems, including upgrading some of the current positions to allow for a top level position as the Director of Information Systems and the merging of two other positions to allow for a second mid to high level position as the Assistant IT Director II. By adjusting the duties instead of having them all fall under one person, IT can recapture the lost inefficiencies that have been the brunt of their organizational distress.

Many of the current personnel under the Department of Information Systems will shift to become the newly created CHRC Department, i.e. the two (2) ACD Operators should move from Information Systems to CHRC, along with six (6) Office Service Clerks, one (1) Administrative Officer I, and one (1) Office Supervisor to help expedite the number of CHRC's that now nearly cripple the Information Systems Department. With reorganization and clear designation of duties, this department should shine and all CHRC's, which are voluminous, can be tabulated, managed, and tracked.

Filling Vacancies

Several Departments have vacant positions that should be filled to increase their operational efficiencies and to begin to make progress through the backlog of duties they have not been able to adequately remedy with the current number of staff levels.

Support Staff for the Deputy Director Position

The Deputy Director should be assigned an Administrative Specialist II to help ensure that the Departments that report to that position are getting the resources they request and duties are being performed at or above optimum. This position should be moved from Nursing Practice.

Move Two Support Positions from Nursing Practice to Assist in Paralegal Work

The Paralegal incumbents under Discipline and Rehabilitation have 474 open cases from the Office of the Attorney General (OAG). Currently they scan all documents, and then Information Systems distributes them to the Board for review. Two (2) office positions should be moved from Nursing Practice to aid the Paralegal in Discipline and Rehabilitation. Currently, Nursing Practice has vacant office positions (such as Administrative Specialist II and Administrative Officer I) that could be reclassified to Office Service Clerks. These positions could scan and free the Paralegals to manage the 474 open cases that need attention as soon as possible.

Overall Recommended Staffing Levels: 79 PINS and 4 Contractual

Top MBON staff initially indicated that MBON has 75 authorized positions and four (4) contractual positions. State documents provided indicated 77 positions plus four (4) contractual positions. Administrative Services provided internal information that indicated 80 positions.

Through a review of the various documents provided, MAG has attempted to determine the current number of positions available to MBON. The state documentation is used in this staffing review as the basis for analysis.

In the absence of departmental organizational charts provided by MBON, MAG has attempted to establish the reporting relationships and the number of staff within each of the various departments.

Following the analysis of MBON's needs and workload requirements, and the reorganization of functions and staff assignments, MAG is recommending a total staffing level of 83 positions, including contractual positions. The additional two (2) positions are an Administrative Specialist II position reporting to the Deputy Director, and a Nursing Program Consultant Admin I position to oversee and manage the CHRC process.

Exhibit 4-5, on the following page, indicates the recommended level of staffing for each of the departments.

Recommendation #6: Add two additional staff to MBON in the following classifications; one (1) Administrative Specialist II, and one (1) Nursing Program Consultant Admin I. This additional staff will be part of the newly reorganized CHRC Department and also serve as an assistant to the Deputy Director as those duties will now expand.

Exhibit 4-5

**Recommended MBON Positions
per Department/Function**

Department/Area	Number of Current Positions	Number of Recommended Positions
Administrative/Legal	10	9
Deputy Director/Advanced Practice	6	10
Investigations	11	12
Legislative	2	2
Rehabilitation and Discipline	10	10
Administrative Services	5	5
Nursing Practice	12	8
Information Systems/CHRC	21	11
CHRC		11
Licensure and Education		2
Education and Examination		3
Total	77 plus 4 contractual: 81	83

4.3 Major Processes

The current process responsibilities for MBON are to expedite the application and certification process, both in new licensures/certifications and renewals; to apply, where necessary, any administrative or disciplinary actions to those that they license and certify; and, to ensure that those educated in Maryland are adhering to a certain level of curriculum standards.

MAG was asked to determine the time required for the various processes (licenses/certifications-new or renewals, positive CHRC's, educational requirements, and other disciplinary actions deemed actionable by MBON are the basic processes managed by MBON at this time---see above) and number of personnel per process for MBON.

MAG has determined that MBON has many people involved in their various processes that could be streamlined to better expedite the licensure or certification process, whether new/initial or a renewal. The limitation on staff cross training within the licensing and certification processes emerged largely due to a criminal abuse by a person who was found to be selling certificates. In order to circumvent this abuse the MBON made it impossible for one or two people to take this process from beginning to completion/outcome. Since the abuse was stopped and that person fired, it is the belief of MAG that these processes could revert back to how they once were handled. Enabling certification staff to handle more processes would help ensure that all persons applying for licensure or certification have a seamless application process and enable them to speak to the same people on the same topic regarding where they are in this process at any given time. The risk of abuse can be monitored and should be balanced against enabling staff to handle multiple actions within the certification and licensing process.

Online Application Process and Online Experience

MBON has moved toward a near total online application process (entirely paperless for the RN/LPN and AP, as well as, the CNA) which has helped the organization to better manage the number of applicants that come through MBON for licensure and certification.

There are still technological steps in this process that can be upgraded to help ensure their customers are moving through this process as best they can. For example, the website is widely recognized internally (staff) as being neither user friendly nor professionally organized.

MBON Website

MAG's Information Technology Director has reviewed the current MBON website and offers the following selected suggestions:

I. Promote a serious yet calming web experience. Licensing can be a stressful time for most. The application and licensing process should evoke a sense of ease. This is usually done by introducing a combination of simple graphics and colors.

    A. Color Combinations and Graphics

        1. Use backgrounds to match font colors
        2. Use various graphics for linking

    B. Consistency

1. Consistently use standard graphic links
2. Easy to find webpages within the website
3. Cascading Style Sheets

   a. Consistent font size and color
   b. Consistent font properties (italicized, bold, and underlined.

II. Promote a sense of professionalism and confidence. The information needed to complete the process should be presented in a structured and consistent manner. This will give the user the confidence that one needs while obtaining the correct information in a professional manner.

A. Navigation

   1. Frames (well suited for non-ecommerce type sites)

      a. Left frame to house a Treeview navigation structure
         in order to better organize a topic/subtopic type structure.

      b. Top frame to house a quick pull down type menu
         (i.e. About, FAQ, Contacts, Employment, etc.)

B. Frequently Asked Questions (FAQ)

   1. Provide links to pages in question
   2. Provide a place for a user to ask a question.

C. Inclusivity

   1. Try to keep all data and information contained within the site itself. This promotes focus and importance.

   2. Try to keep all links pointing to various internal pages or areas. This eliminates the problem of a broken link due to an external site that has been edited, is down or discontinued.

One staff incumbent in Information Systems has been acting as the webmaster, although his primary duties are database management. The duties of this department have been so varied that this person has been unable to effectuate any meaningful changes to improve the website.

Rather than trying to re-design the website in-house, MAG suggests that MBON send out an RFP to exact such changes as soon as possible.

With the additional staff recommended for Information Systems, we anticipate the ongoing cost of maintaining the website would be internalized. With the recommendations for higher level positions and structuring of duties, for the most part, updating would be accomplished by MBON staff rather than outsourcing the updating.

Recommendation #7: Create and send out an RFP to totally redesign the website. This should include changes in vernacular to reflect the educational levels and skills of those they serve, i.e. for the CNA/CMT applicants there need be basic terms used instead of jargon typical of the medical industry.

Updating of Website Data

MBON staff has stated that the information available on MBON's website is out of date and incorrect. This is critical and includes the information regarding updates to personal information on disciplinary action and other remedial actions for applicants and licensees/certificate holders. Updates need to be performed with greater regularity such that it can be accessed by potential employers and the applicants themselves. This should be done daily or weekly in order to keep abreast of changes that affect their licensure, certification, and livelihood.

Recommendation #8. Regularly update personal information regarding disciplinary action and other remedial actions for applicants and licensees/certificate holders.

Office Equipment

Various Departments within MBON have noted that they could use more or updated equipment to handle their duties and to create a seamless flow of information between departments and onto the website. Doing so would save time and money, as well as, ensure that all information required for various processes is managed as rapidly and effectively as possible.

Recommendation #9: Evaluate equipment needs in each department (computers, scanners, printers, etc.) to determine proper equipment levels to expedite the processing of critical paperwork.

Increase Use of Electronic Transfer and Use of Data

Information transfer within MBON now is executed via paper. This is an antiquated and wasteful way to exchange data and information between departments that are critical to the operation of the MBON mission and vision. The entire computer system at MBON requires revamping, including increase in bandwidth, databases, computer programs, etc., for expedited information access and transfer. This may require updating of the current system or simply be better served purchased anew.

While MAG is able to identify and communicate the major issues of concern in this area, MAG is not a computer consulting firm and therefore does not offer an estimate of cost for the broad needs in this area. The first step is to fully evaluate needs, which can be accomplished through a contracting process with an information systems firm.

For example, for Board meetings, currently one person has to copy many documents many times (13 times for each board member) and distribute them to the various Board members before each meeting. This is a waste of time that could be better spent executing the mission and vision of MBON. Thumb drives to insert in the loaner computers could be used at meetings and MAG was told had been used in the past. The MBON may also want to explore the use of tablet computers for Board members rather than using thumb drives, for a more permanent solution.

Recommendation #10: Fully evaluate computer system needs and update MBON's entire computer system in order to move towards a paperless environment.

Policy and Procedures Manual

MAG has noted via various interviews with key people at MBON that there is no manual of written policies and procedures. Many staff within MBON believe that a recognized internal set of procedures is necessary to ensure that all personnel know their various duties and how all of the functional areas should work together. MAG concurs and suggests that MBON do so as soon as possible. Regarding the CHRC policies and procedures, MAG, in concert with the Department of Information Systems, created a comprehensive flowchart depicting the exact CHRC procedures (both positive and negative). That flowchart is part of Exhibit 3-18 of this study.

Recommendation #11: Create a policies and procedure manual.

Cross Training to Open Bottlenecks

During the course of MAG's review of MBON it was discovered that, as a reaction to a one time serious abuse within the system (selling certificates), management changed the processes to prevent any one person from managing or having access to too much personal information about applicants. This change has impacted the length of time it takes to complete the application and renewal process greatly.

There is no one widely recognized bottleneck in the application process. The process, however, is slowed due to the restrictive access policy in place, in which office clerks and staff have limited work focus and data access. The organizational response to criminal acts performed by one person has caused a series of bottlenecks in the overall process of licensing and certification.

Therefore, MAG suggests that the policy of extreme limitation of staff access to data be changed and that personnel be cross-trained and authorized to handle an increased number of steps in the application and certification process. This cross training and expansion of office staff duties/authorizations would reduce the time necessary for the various functions of the application process to be completed.

Recommendation #12: Identify additional key areas where cross-training of personnel will be most beneficial to application processing.

4.5 Customer Service

Customer Service Survey

MAG has taken time to preview the current customer service survey located on the MBON website and has noted that it has not been revised according to the recommendations of the Sunset Review. It remains a short and not helpful set of unrelated questions. For instance, nearly half of the current survey questions regarding whether and how the respondent is licensed or certified.

MAG recognizes that most of the people using this survey are licensees or certificate holders, members of the public, including individuals lodging complaints and employers of licensees or certificate holders. MAG believes that the questions on the survey should focus more on the interaction between the respondent and the board and less on whether and how the respondent is licensed or certified by the board.

The Sunset Review suggested some vaild questions that should be asked on the survey and MAG concurs. Those questions might include:

1.   What was your reason for interacting with the board? (Initial licensure or certification, renewal of license or certificate, delay of licensure or certification, or making a complaint?)

2.   Was the interaction online, by phone, or in person?

3.   How long did it take to reach a staff member (amount of time on hold or amount of time to receive a returned call or email, or, if at the office, amount of time to physically speak to a staff member)?

4.   Did the staff member help resolve the issue in a clear fashion? Please explain.

5.   Did the staff member treat you courteously? Please explain.

6.   Did you use the online application or renewal process? If so, did you find the process to be user friendly? Do you have any suggestions on how the process could be improved?

Additionally, the more responses to the survey the board receives, the more information the board will have to improve the services it currently provides. At this time the survey is only available through the homepage on the board's website. Access to the survey should be streamlined and the questions therein revised to provide more comprehensive information to MBON.

Recommendation 13: Survey questions should be revised to provide more comprehensive information to MBON.

Consistency in Phone Support

MAG has spoken to various departments within MBON and found that the callers are often sent from department to department and never find resolutions to the issues that they originally called in about. In addition to that, the callers are frequently left on hold instead of being responded to by the call personnel at MBON. IF and when a caller gets to the call personnel, the responses are variable and inconsistent because they do not have access to the information required to adequately help the callers. The staff answering the phones for MBON should have access to the information regarding all applicants so they can effectively and efficiently aid them in any and all questions they might have instead of transferring them between the various departments with no resolve.

Recommendation 14: Customer service training should be added to the call personnel at MBON so staff responses are consistent.

4.6 Administrative Issues

The Sunset Review concluded that MBON should conduct monthly staff meetings. MAG was advised by MBON monthly meetings involving all staff lasting one half hours have been less than productive and resolving no issues of import to MBON.

MAG recommends that MBON hold weekly Department Head meetings to allow all departments to ascertain how things are functioning and what items/tasks/processes might be required to change to create a seamless work environment that satisfies the mission and vision of MBON.

Recommendation 15: MBON should hold weekly department head meetings.

SECTION 5.0

IMPLEMENTATION

5.0   IMPLEMENTATION PLAN OF RECOMMENDATIONS

	STATE OF MARYLAND BOARD OF NURSING MANAGEMENT AND PERSONNEL STUDY				
Rec. #	Action Step	Responsibility	Estimated Completion	Impact	Projected Savings or (Costs)
1	Consolidate operational responsibilities under the Deputy Director.	Executive Director	January 2014	Increased internal operational coordination.	None.
2	Reassign Electrology from Administrative Services to the Department of Nursing Practice.	Executive Director	January 2014	Consistent functional relationship for greater efficiency.	None.
3	Create two (2) additional high level positions in Information Systems, through upgrades to existing positions.	Board	January 2014	Improved functioning and management of in-house IT activities.	($40,000)
4	Create the CHRC function as a stand-alone department reporting under the Deputy Director. Positions are moved from Information Systems to the new department.	Executive Director	January 2014	Enables Information Systems to concentrate their efforts and skills on practical IT solutions.	None

	STATE OF MARYLAND BOARD OF NURSING MANAGEMENT AND PERSONNEL STUDY				
Rec. #	**Action Step**	**Responsibility**	**Estimated Completion**	**Impact**	**Projected Savings or (Costs)**
5	Delay seeking legislation to require CMTs to submit to CHRCs, until organizational efficiencies are achieved in the newly designed CHRC Department.	Board	October 2014	Enables CHRC staff to streamline procedures and organize information collection and sharing.	None.
6	Add two additional staff to BON in the following classifications; one (1) Administrative Specialist II, and one (1) Nursing Program Consultant Admin I.	Board	January 2014	Create a smoother flow of information transfer and better allocation of current resources.	($100,000)
7	Create and send out an RFP to totally redesign the website.	Executive Director and IT Director	January 2014	Create professional image and enable all applicants to easily and effectively apply for new licenses and certifications and renewals.	($25,000)
8	Regularly update personal information regarding disciplinary action and other remedial actions for applicants and licensees/ certificate holders.	Executive Director and IT Director	Ongoing	Ensure accurate and updated data for applicants and licensees/certificate holders.	None.

	STATE OF MARYLAND BOARD OF NURSING MANAGEMENT AND PERSONNEL STUDY				
Rec. #	**Action Step**	**Responsibility**	**Estimated Completion**	**Impact**	**Projected Savings or (Costs)**
9	Evaluate equipment needs in each department (computers, scanners, printers, etc.) to determine proper equipment to expedite the processing of critical paperwork.	All Department Directors, coordinated by IT Director.	January 2014	Installation of modern and appropriate equipment to expedite processing.	TBD
10	Fully evaluate computer system needs and update BON's entire computer system in order to move towards a paperless environment.	Executive Director and IT Director	December 2014	Overall productivity and data accuracy.	TBD
11	Create a policies and procedure manual.	All Department Directors, coordinated by Deputy Director.	July 2014	Organizational coordination and cohesion.	Staff time, if completed internally.
12	Identify additional key areas where cross-training of personnel will be most beneficial to application processing.	All Department Directors, coordinated by Deputy Director.	July 2014	Increase in efficiency in handling of applications and renewals.	None.

	STATE OF MARYLAND BOARD OF NURSING MANAGEMENT AND PERSONNEL STUDY				
Rec. #	**Action Step**	**Responsibility**	**Estimated Completion**	**Impact**	**Projected Savings or (Costs)**
13	Customer service survey questions should be revised.	Information Systems	March 2014	Provide more comprehensive information to BON.	None
14	Customer service training should be added to the call personnel at BON.	Executive Director	December 2013	Satisfied callers and ease of information access within BON.	Minimal
15	BON should hold weekly department head meetings.	Executive Director and Deputy Director	December 2013	Help BON department directors focus on inter-departmental processes and changes to increase efficiencies.	None