



GLOBAL RELEVANCE

Annual Report 2006



Commission on Graduates of
Foreign Nursing Schools





Global Relevance on a Personal Scale

The Commission on Graduates of Foreign Nursing Schools (CGFNS International) is the internationally recognized authority on credentials evaluation and verification pertaining to the education, registration and licensure of nurses and healthcare professionals worldwide. CGFNS will celebrate its 30th anniversary in 2007. The organization has certified the credentials of more than 450,000 internationally educated nurses and other healthcare professionals since 1977.

VisaScreen®: Visa Credentials Assessment Program


The Federally mandated, leading healthcare worker certification program for immigration and obtaining an occupational visa in the United States for internationally born: audiologists, medical technicians, medical technologists, occupational therapists, physician assistants, physical therapists, practical nurses, registered nurses, and speech language pathologists. *VisaScreen®* is administered by the International Commission on Healthcare Professions, a division of CGFNS.

 **Certification Program** A program of credentials evaluation, qualifying exam, and English proficiency for first-level general nurses (RNs), often a requirement for state licensure, predicts success for the NCLEX-RN® exam and satisfies the immigration exam requirement.

 **Credentials Evaluation Service** A service that provides course-by-course comparisons of an applicant's education to United States standards for licensure, further education, and employment.

Credential Verification Service for New York State

A service providing the verification of documents required of internationally educated registered nurses, licensed practical nurses, physical therapists, physical therapy assistants, occupational therapists, and occupational therapy assistants seeking licensure in New York State.

 **International Consultants of Delaware** A service providing credentials evaluations for licensure, employment, and education for physical therapists and various other professions.



**GLOBAL
RELEVANCE**
Annual Report 2006



COMMISSION on GRADUATES of
FOREIGN NURSING SCHOOLS

President's Letter

Facing a Visionary Future



Lucille A. Joel

EdD, RN, FAAN
CGFNS President

*Professor,
Rutgers University,
College of Nursing*

For 30 years, CGFNS has served as a valuable resource by reviewing and validating the credentials of migrating healthcare professionals, primarily nurses, who seek employment in the United States. We have vigorously fulfilled our mandate from the federal and various state governments to uphold the educational and professional standards they created to protect the well-being of patients throughout our healthcare system. More recently, CGFNS has begun evolving into a similar resource for other governments, professional organizations, educational institutions, and related bodies around the world. Our experience, contacts, systems, and knowledge set us apart from any other group professing to serve as an “expert” in this capacity.

Migration Realities

The international healthcare worker shortage is a recurring phenomenon. Today, demand continues to outstrip need around the globe—in some regions such as sub-Saharan Africa at an alarming pace.

Shortages exist for various reasons. Healthcare systems in developed nations have an insatiable thirst for nurses and other healthcare workers to fill a broad range of roles. Healthcare workers in some nations are pushed to migrate because of inadequate compensation and poor working conditions, lack of professional and educational opportunities, absence of professional autonomy, gender-based oppression, daily exposure to violence, HIV/AIDS and other communicable

diseases, and the whim of politics. At the same time, the promise of more equitable compensation, career opportunity, personal freedom, and the opportunity to improve the family's well-being at home provide a magnetic pull.

These factors have created noteworthy realities. Eighty-five percent of Filipino nurses, for example, work abroad even though the shortage at home has reached crisis proportions. Ireland, once a major source country, now recruits heavily for importation. The U.S., reputed for its voracious consumption, neither consumes nor imports the most nurses. New Zealand, Australia, Ireland and the United Kingdom outstrip its nurse/population ratio. As a result, active recruitment has become an expeditious solution to workforce shortages all around the globe as well as in the United States.

CGFNS Responds

In serving markets around the world, CGFNS has developed a strong sense of the values of various cultures and how those values affect healthcare standards, systems, and practice. We remain respectful of the need to stay cautious about future global strategies and of the need to observe and listen before moving forward. We know that each local and regional entity creates controls and standards appropriate to its culture and realities. We consider CGFNS unique in having a staff and colleagues well-versed in taking this kind of “internal” view of the global market. We will continue to

learn about and respond to each market, how it functions and what it needs.

In addition to developing market-driven strategies and tactics, CGFNS will continue to invest in infrastructure and other improvements that maximize our ability to deliver services. However, efficiency will never trump our mandate to safeguard the public well-being. Protection against fraud requires judiciousness and care in securing the original-source proof necessary to validate credentials. We will always remain true to the time and depth necessary to ensure the integrity of our processes.

A Visionary Future

CGFNS has earned worldwide recognition as the preeminent expert on developing systems and processes for reviewing and validating educational and professional credentials. The future holds great potential, but where this will take us remains visionary.

Whatever course we take, the framework of the vision remains clear. We will continue to fulfill our original mandate while evolving to broaden our reach into the global marketplace. We will continue to focus on developing deep understanding of and responding to national and regional cultures and standards. We will continue to encourage migrating healthcare professionals to develop cultural competency as well as professional competency. We will continue to promote the development of the highest standards possible within the global context.

CGFNS 2004-2006 Strategic Plan Update

A number of initiatives supporting the four goals of the 2004-2006 Strategic Plan are now in operation, including the establishment of an official liaison relationship with United States Citizenship and Immigration Service (USCIS) Office of Adjudication on interpretation of regulation on select applicants and a schedule of meetings regarding fraud; the launch of the International Centre on Nurse Migration in partnership with the International Council of Nurses (ICN); the publication of Building Global Alliance III: *The Impact of Global Nurse Migration on Health Service Delivery*; the implementation of an organizational re-structure to increase effectiveness in programs and services; and the development of a test blue print draft that restructures the CGFNS Qualifying Exam, allowing the exam to be used as an international test of nursing knowledge and as a self-assessment tool.

Chief Executive Officer's Letter

Moving into the Global Context



Barbara L. Nichols
DHL, MS, RN, FAAN
Chief Executive Officer

*2006 Inaugural Inductee
to the National Black
Nurses Association
Institute of Excellence*

*2007 Distinguished Scholar,
Howard University College
of Pharmacy, Nursing
and Allied Health Sciences,
Division of Nursing*

In 2006, CGFNS accelerated its transformation into a world-class player in the global healthcare area. For almost three decades, we have gained experience, knowledge, and momentum toward this goal while helping 450,000 individuals from all around the world migrate to the United States. As we enter our 30th year, CGFNS has taken miles of strides toward the horizon.

Our history of service has enabled us to develop a practical understanding of the many and complex issues facing migrating healthcare professionals, their home countries, and the countries to which they are drawn. Today, our work belongs to all of our stakeholders, everyone who uses our products and services, wherever they live and work – whether a nurse seeking a career opportunity in another country, a state board seeking a means of validating a physical therapist's credentials, or an educational institution in a developing nation seeking knowledge about international healthcare practice standards. Our future belongs to each of them and to the myriad individuals they touch.

National Sufficiency, International Opportunity

Today, as never before, we offer relevance through our strategy of supporting national sufficiency and international opportunity. We have become part of policy development nationally and internationally. The departments of Homeland Security and Health and Human Services sought

our advice about how to evaluate English-language competence in 2006, and we helped the World Health Organization (WHO) develop its Region 5 nurse migration flow policy.

We have maintained fruitful dialogue with healthcare boards, nursing councils, and other bodies throughout the world about the scope and standard of practice. To a working group of the Global Health Workforce Alliance, which was created in 2006 to address the worldwide shortage of nurses, doctors, midwives, and other health workers, we stressed the need to create policies that eliminate excessive dependency on international sources for healthcare workers.

.....
**The future for CGFNS
offers virtually
unlimited promise.**
.....

Through our many products and services, we continue to balance our obligation to serve the public welfare in the United States with our responsibility to assist migrating professionals and others. We also have enhanced our ability to adapt and fine-tune our product and service performance in ways that keep them relevant. In 2006, for example, as demand

for the Credentials Evaluation Service grew among state boards of nursing, we reaffirmed our Certification Program as a meaningful way for migrating nurses to evaluate their likelihood of passing the NCLEX-RN® exam.

Organizational Efficiency, Exceptional Results

As our vision for the future clarifies, we have begun transforming our organizational structure and processes in concrete ways to produce exceptional results. Our significant reorganization in 2006 created an internal structure that mirrors our vision. It has enabled us to focus on, measure, and improve our products and services in meaningful and immediate ways.

We combined all product and service lines into a market-driven Global Assessment Products and Services group that seeks to anticipate and respond to local, regional, and global market needs. We created a Quality Assurance and Staff Development function to ensure we continually improve our performance. We integrated other functions to maximize our efforts, such as moving the International Consultants of Delaware into our Philadelphia headquarters premises.

These changes have enhanced value for our stakeholders. Our on-line portals now provide greater and more secure access and communication for applicants. A new advocacy function ensures stakeholders' concerns are heard and resolved.

Re-engineering of our customer service functions has dramatically stepped up our responsiveness.

In addition, partnering with others has expanded our knowledge and our effect on issues of concern. We have joined with Academy Health to research migration data and with the International Council of Nurses to create the International Centre on Nurse Migration. We want to share and broaden the knowledge and expertise generated from our long history of helping organizations and individuals around the world deal with migration, standards and career development, and cultural acclimation.

The future for CGFNS offers virtually unlimited promise. As we grow, we remain as committed to our mission as ever and to keeping our work relevant for our global sphere of stakeholders.



2006 Highlights

January

CGFNS begins emailing its monthly newsletter, *Special Notices & Alerts*.

February

CGFNS integrates all data entry and document imaging functions, realizing immediate efficiency and cost improvements.

March

CGFNS relocates the International Consultants of Delaware (ICD) to its headquarters premises in Philadelphia.

April

CGFNS expands professional and educational development for staff.

May

CGFNS opens its Online Store for the purchase of study aids and other materials, allowing for product orders to be placed online for faster delivery.

June

The Governor of Illinois signed into law the restoration of the Certification Program as an alternative prerequisite for initial licensure of internationally educated nurses in the state of Illinois

July

CGFNS begins offering pre-set appointments for applicants visiting its Philadelphia, Pennsylvania headquarters.

August

CGFNS holds Strategic Planning Retreat with international experts in healthcare to chart the organization's course for the next three years.

September

The New Jersey Board of Nursing announces requirement of the Credentials Evaluation Service Full Education Course-by-Course Report for initial licensure for registered nurses (RNs) and licensed practical/vocational nurses (LPN/LVNs). The Board also requires proof that the applicant has achieved a passing score on the English proficiency examinations. CGFNS responds with the development of an English proficiency report to augment the Credentials Evaluation Service.

October

CGFNS begins sending all VisaScreen® and Certification Program (CP) Certificates to applicants using traceable mail.

November

CGFNS launches new website. The new design and content make it easier for web visitors to browse and more convenient for web visitors to find information.

December

CVS Connect, an online portal for the Credential Verification Service, goes live.

CGFNS Programs

Strong Assets Integrated to Provide Stronger Service

CGFNS continued its evolution toward an international entity doing global work in 2006. Our ongoing transformation demands that we fulfill our mission while creating, implementing, and improving meaningful services for governments, organizations, institutions, and individuals around the world.

To be truly relevant in the global context, we must understand and operate within our stakeholders' local and regional realities. Our 30 years of experience in the international arena uniquely qualifies us to do so, operating as a global company while providing relevance on a personal scale.

Beginning in late 2005 and throughout 2006, CGFNS undertook a significant reorganization of its core programs, creating the Global Assessment and Professional Services Department to strengthen management of our assessment products and services:

- The VisaScreen® Program (VS)
- The Certification Program (CP)
- The Credentials Evaluation Service (CES)
- The Credential Verification Service for New York State (CVS)
- The International Consultants of Delaware (ICD)

This new structure, focused on team-based management, will strengthen visibility, capability, and capacity for credentialing work and related services; improve accountability at all levels; enhance staff development and professional growth; and inspire leadership across the organization.

56,621

total applications received for all programs from October 1, 2005 through September 30, 2006



GLOBAL REALITIES ★



The average nurse-to-population ratio in high income countries is almost eight times greater than in low-income countries.

The Global Shortage of Registered Nurses: "An Overview of Issues and Actions"
The International Council of Nurses

Certificates/Reports Issued by Program

October 1, 2005–September 30, 2006*

- 17,466 *VisaScreen*® Certificates
- 9,252 Certification Program Certificates
- 7,274 Credential Verification Service
- 4,726 Credentials Evaluation Service

* Reporting year follows U.S. Government fiscal year because of Department of Homeland Security (DHS) oversight of the *VisaScreen*®



Anticipated Trends

Presently, the majority of foreign educated nurses in the United States come from the Philippines. Nurses educated in India have become the second largest immigrant group. This occurred as a result of CGFNS administering its Certification Program (CP) Qualifying Exam in several sites in India four times a year, beginning in 2002.

CGFNS has seen an increased interest regarding its CP Qualifying Exam and requests for in country test sites from countries such as the Ukraine, Nigeria, Korea, Indonesia, China, Nepal and Mexico. Recruiters from the Ukraine are working with United States hospitals in Georgia and South Carolina. They have set up exam preparation courses for nursing and English proficiency. The Certification Program is a prerequisite for licensure by a majority of U.S. state boards of nursing.

Educational Exchange Programs with U.S.

Representatives from Ukrainian nursing schools have sought consultation in modifying their education to parallel that of U.S. nurses. Similar activities are occurring in China, Indonesia and Mexico. Korean recruiters and nursing schools are pursuing educational exchange programs with U.S. nursing schools. Many are looking at English immersion courses to ensure that the nurses can meet English proficiency requirements set by the Department of Homeland Security and the state boards of nursing.

Remittances Go Back to Home Countries

These activities are being pursued because of economics. It is well documented that nurses who migrate to the U.S. and work, send millions of dollars in remittances home to their families to provide homes, clothing, food, healthcare and education. Such remittances improve quality of life and the standard of living. In a number of countries such as Nigeria and South Africa, nurse unemployment ranks in the thousands. Migration to the U.S. provides employment for these unemployed professionals.

CGFNS anticipates that within five years the number of nurses migrating to the U.S. to work from China, Nigeria and Mexico will increase exponentially. Nurses from Eastern Europe are being solicited by U.S. hospitals in the Midwest.

Certification Program Qualifying Exam

The CP Qualifying Examination meets federal requirements for an occupational

visa and continues to serve as a valuable tool for internationally educated nurses to predict their ability to pass the NCLEX-RN® licensure exam. Our most recent validity study, covering 2004-2005, demonstrated that applicants passing the CP Qualifying Exam on their first attempt had a 90 percent chance of passing the NCLEX-RN® on their first attempt, while those who did not take the CP exam passed the NCLEX-RN® only 49 percent of the time on their first attempt.

Credentials Evaluation Service

State boards now see CES as a means of securing more detailed educational information about internationally educated healthcare workers. This preference led to significant growth for the program in 2006. The number of applications received nearly doubled from the number received in 2005 and the number of reports issued was up 30 percent from 2005.

The CES report includes an evaluation of secondary school/high school and, for some state boards of nursing, proof that the applicant has achieved a passing score on the English proficiency examinations. In response to inquiries and regulatory mandates from the state boards of nursing, CGFNS has incorporated English scores into the CES reports going to the states requiring the reporting of these scores. In addition, CGFNS has developed stand-alone English proficiency report to augment the Credentials Evaluation Service. As other state boards begin to

rely on CES, significant growth should follow in the immediate future.

Credential Verification Service

The Credential Verification Service for New York State (CVS) continues to grow. This service enables internationally-educated registered nurses, licensed practical nurses, physical therapists, physical therapy assistants, occupational therapists, and occupational therapy assistants to obtain independent verification of the authenticity of their educational and licensure/registration credentials. Once verified, the credentials are forwarded to the New York State Education Department to be evaluated as part of the applicant's licensure application.

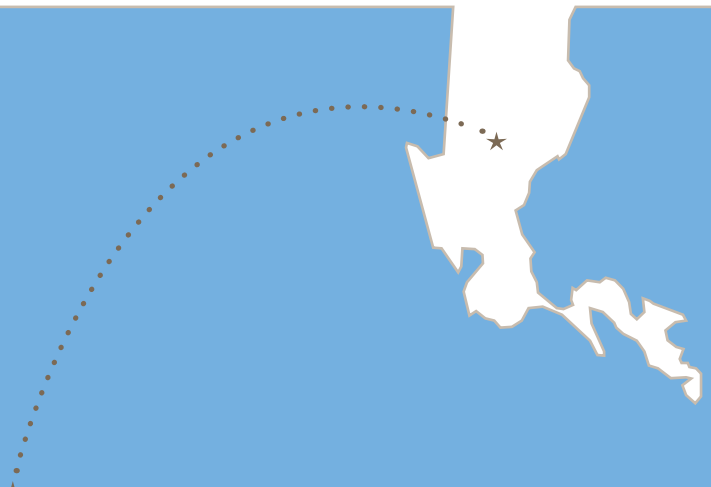
The new CVS online reporting service for New York State, CVS Connect, is modeled after *CES Connect™*, the online electronic reporting service for state boards of nursing, which went live in 2005. New York State can now review Credential Verification Service reports for applicants through the internet instead of waiting for the printed reports to be delivered through the mail.

International Consultants of Delaware

Building on the International Consultants of Delaware's (ICD) core focus on credentials evaluation for physical therapy, CGFNS worked diligently throughout 2006 to forge new relationships with state boards of physical therapy. ICD participated in the annual conference of the Federation of State Boards of Physical Therapy (FSBPT) and distributed program materials to the chief administrators of state boards of physical therapists. In 2006, the Virginia and Washington boards of physical therapy added ICD to their lists of approved agencies for performing credentialing work for internationally educated applicants.



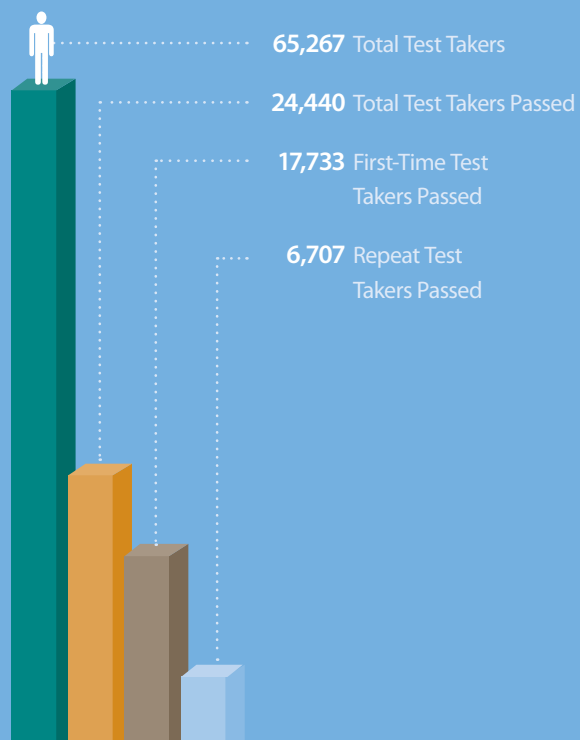
GLOBAL REALITIES ★



Remittance income from nurses is a major source of hard currency for developing countries and has motivated the Philippines to train nurses for export and other countries to try to follow their example.

“Trends in International Nurse Migration,” Aiken, Buchan, Sochalski, Nichols, and Powel Health Affairs, Volume 23, Number 3, 2004

CP Qualifying Exam Results (2004-2006)



The majority of nurses (88-92%) who pass the CGFNS Qualifying Examination on the first attempt also pass the NCLEX-RN® U.S. licensure examination on the first attempt.

CGFNS Knowledge

Promoting Understanding to Create Progress

In 2006, we continued to share knowledge derived from our research and to promote understanding of healthcare practice and practitioners globally throughout 2006, either alone or by partnering with other key players. As co-sponsor of the International Centre on Nurse Migration, for example, we worked with the Commonwealth Secretariat and the Royal College of Nursing to hold a two-day conference in February, 2006, in London to explore ways to integrate international nurses into new workplaces. We presented information about the use of study guides during the National Organization for Competence Assurance's annual conference in Florida in November, 2006.

Migration Patterns of VisaScreen® Certificate Holders

The Department of Global Research and Test Administration initiated a 2006 study on the migration patterns of its VisaScreen® Certificate holders. The survey focused on patterns of migration into the United States, including the countries healthcare professionals tend to migrate through on their way to the United States, their final destination, their educational and licensure preparation, and how they experienced the recruitment process. The study sought to define a broad understanding of migrating healthcare professionals: who they are, why they have left their home countries, why they chose the United States, the clinical settings they work in, how they interact with those at home once they migrate, whether they return home and when, how their education affects their choices, and other characteristics. Data analysis is currently underway and the results are expected to be published early in 2007.

Collaborative Relationships

Throughout the year, we enhanced our collaborative relationships with immigration advocates and ethnic nursing organizations. We conducted several educational teleconferences with ILW.com, an immigration portal for immigrants, employers, and lawyers. CGFNS' Department of Governmental Affairs and Professional Standards also participated in liaison teleconferences with the American Immigration Lawyers Association (AILA), providing information about

the certification issues facing healthcare professionals as they seek occupational visas.

Through our liaison efforts with the International Bilingual Nurses Alliance and the American Board of Nurse Specialties, we provided educational sessions on immigration, licensure and U.S. healthcare systems and issues.

Monitoring Immigration Reform

CGFNS monitored the debates on immigration at the federal legislative and regulatory arenas to ensure that the policies that address the protection of the public's health and safety are maintained and are not diluted in misguided efforts to cure the nation's immigration dilemma.

Joint Research Study of Clinical Preparedness of Internationally Educated Nurses

CGFNS and Excelsior College jointly published an article titled, "Internationally Educated Nurses' Perception of their Clinical competence" in the November/December 2006 issue of the *Journal of Continuing Education in Nursing*. The article described the results of a joint research study assessing the self perceptions of clinical preparedness of internationally educated nurses.

Overall, we continue to work to ensure that our research and data are included in national and international forums, virtual and otherwise, that address the healthcare workforce. This includes consulting with the U.S. Department of Health and Human Services and the Department of Homeland Security in 2006 to provide input, at the

departments' requests, on score setting for a competence-based English language examination from ETS. Our participation ensured that score-setting procedures reflect the English proficiency needed for various healthcare professions.

In 2006, CGFNS worked to build and communicate impressive data regarding internationally educated healthcare professionals. The CGFNS re-designed web site now includes a specific section



under Tools & Information that provides up-to-date statistics from CGFNS Programs and identifies the research initiatives of the Global Research and Test Administration Department.

Standards Setting

CGFNS has nine Professional Standards Committees that review the professional education standards annually to ensure that the evaluation standards that determine comparability of education are current and relevant to the practice of each of the represented professions in the U.S. The Committee members are representatives of each profession in education, clinical practice and regulatory oversight. These members serve in a consultative role for addressing applicant cases that are unusual.



GLOBAL REALITIES ★

By 2010, demand for nurses in the U.S. will begin to exceed supply at an accelerated rate so that by 2015 the shortage will have almost quadrupled to 20 percent.

The Health Resources and Service Administration, Bureau of Health Professions,
National Center for Health Workforce Analysis

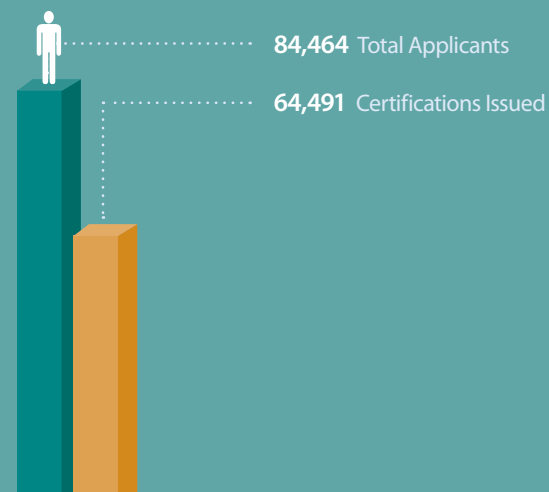
Primary Countries of Education

Philippines, India, The United States, Canada, Korea

States of Intended Practice

California, Florida, Illinois, New Jersey, New York, Texas

VisaScreen® Analysis (1998-2005)



CGFNS VisaScreen® Certification By Profession (1998-2005)

Profession	Applicants	Certifications
Registered Nurses	76,776	59,477
Physical Therapists	3,580	2,456
Clinical Laboratory Scientists	2,636	1,683
Speech Language Pathologists/Audiologists	499	411
Licensed Practical Nurses	371	155
Occupational Therapists	330	217
Clinical Laboratory Technicians	218	69
Physician Assistants	54	23
TOTAL	84,464	64,491



GLOBAL REALITIES ★

Fifty-seven countries, 36 of which are in sub-Saharan Africa, have severe shortages of health workers.

The World Health Organization

CGFNS Service

New Approaches to Ensure Relevance

In 2006, through its significant reorganization, CGFNS energized its commitment to create new service strategies and improve on those services currently being offered. Whether a state board of nursing in the United States, an educational institution in Europe, or a nurse applicant in India, each stakeholder has unique, valid needs and deserves unique meaningful service.

One-Stop Shopping for Healthcare Professionals

CGFNS' vision is to be the one-stop shopping for healthcare professionals who migrate anywhere throughout the world. Based on its 30 years of experience, CGFNS is uniquely qualified to be a trustworthy resource to those seeking opportunities outside of their home countries. CGFNS created a new department called Business Development, Planning and Marketing. This department focuses on applicants and other stakeholders to drive business strategies and approaches that serve stakeholders' broad needs. Such strategies include, for example, moving beyond the application process to develop services that support applicants and their families as they migrate. The re-engineered CGFNS web site reflects this new perspective. A Marketing Advisory Committee also has been established that utilizes the volunteer expertise of business and marketing professionals from highly respected corporations and academic institutions. Because our stakeholders' origins and destinations are varied, CGFNS wants to offer programs and services that create competitive advantages for our applicants that enable them to succeed in their goals.

Advocacy and Quality Assurance Initiatives Now in Place

CGFNS enhanced its commitment to better meeting the needs of its stakeholders. The Advocacy, Quality Assurance and Staff Development (AQA)

Department was restructured to serve three major functions. First, it serves as an advocate for stakeholders, addressing their issues by facilitating resolutions on their behalf. Second, AQA performs risk management functions by proactively identifying system, procedural and personnel issues and recommends and facilitates process improvements. Third, AQA creates and coordinates training and staff development within the organization.

Whether a state board of nursing in the United States, an educational institution in Europe, or a nurse applicant in India, each stakeholder has unique, valid needs and deserves unique meaningful service.

Continuous Improvement for Customer Service

The CGFNS Call Center enables applicants to check the status of their applications 24 hours a day/ seven days a week through our Interactive Voice Response (IVR) System or the CGFNS website. During

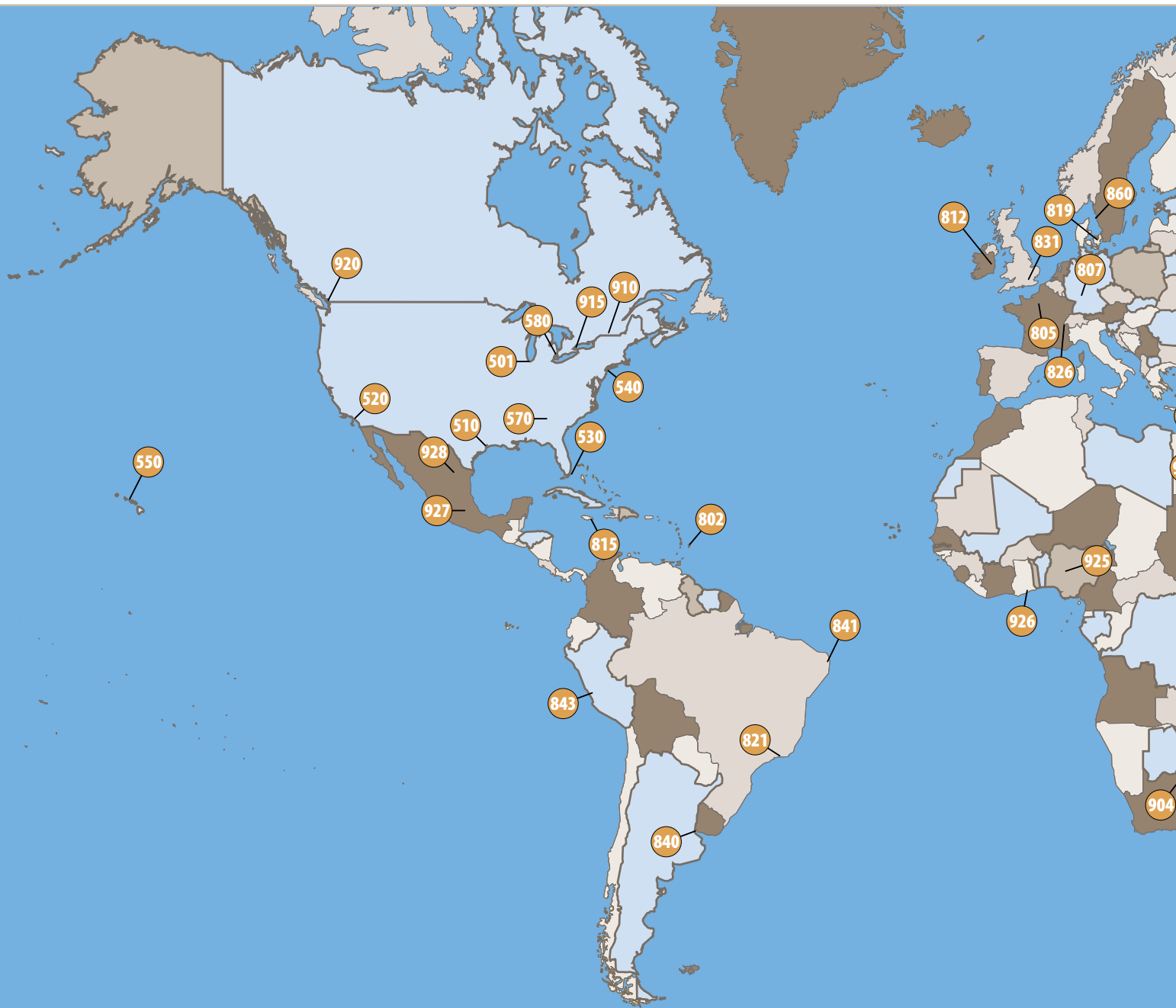
2006, the Call Center significantly increased the use of the IVR system, and the number of calls handled by each service representative. We continue to strengthen performance measurement for the Call Center, including report measures, data and trend analysis, and benchmarking.

In 2006, CGFNS also transformed the Correspondence Unit into the Customer Service Center. The Center provides a broad range of customer-service functions. The Center is committed to providing a friendly, accessible, and efficient customer-service contact for our stakeholders.

Continuous Improvement for Document Processing

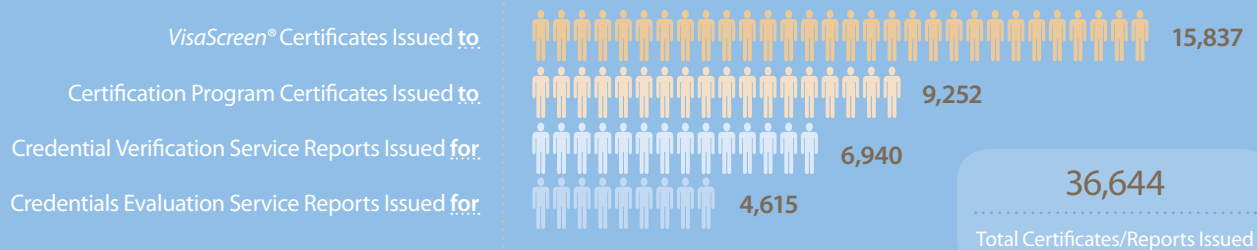
The CGFNS Information Technology (IT) Department undertook a number of significant initiatives in 2006. Chief among these was the integration of document processing. This action resulted in significantly improved document processing time. Other IT systems improvements during the year included:

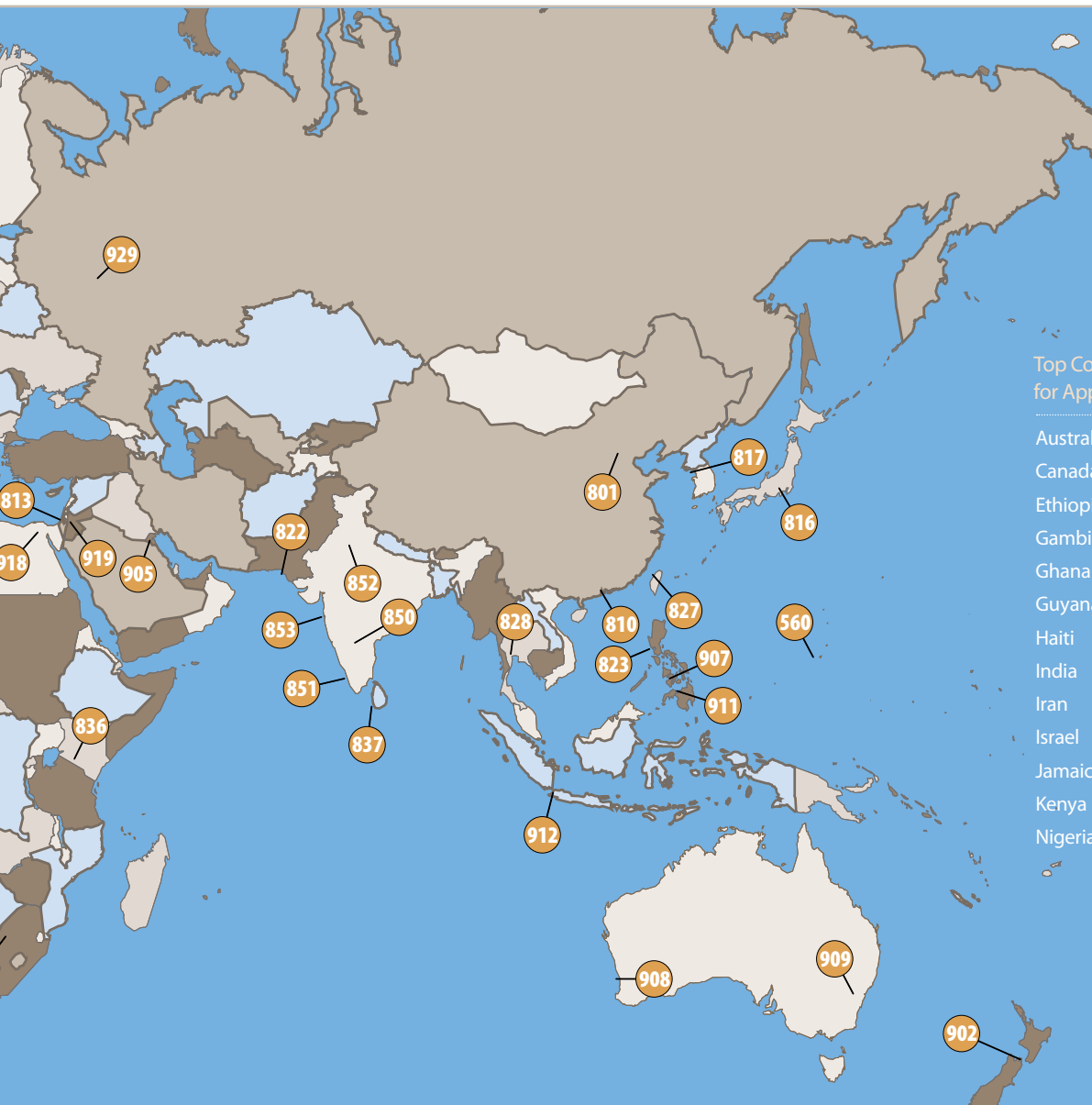
- Complete overhaul of production servers for better performance and cost-effectiveness
- Integration of a case management system
- Systems improvements to improve program performance



Internationally Educated Registered Nurses Served by CGFNS

October 1, 2005–September 30, 2006 by program





Top Countries of Education for Applicants

Australia	Pakistan
Canada	People's Republic of China
Ethiopia	Philippines
Gambia	Poland
Ghana	Russia
Guyana	South Korea
Haiti	Taiwan
India	Ukraine
Iran	United Kingdom
Israel	United States
Jamaica	Uzbekistan
Kenya	
Nigeria	

Global Impact at a Glance

The CGFNS Certification Program (CP) Qualifying Exam is offered four times a year in March, July, September* and November, at more than 50 locations around the world. The qualifying exam measures an applicant's knowledge and is based on what nurses must know and do when they practice nursing in the United States.

501Chicago, Illinois, USA	812Dublin, Ireland	837Colombo, Sri Lanka	909Sydney, Australia
510Houston, Texas, USA	813Tel Aviv, Israel	840Buenos Aires, Argentina	910Montreal, Canada
520Los Angeles, California, USA	815Kingston, Jamaica	841Natal, Brazil	911Cagayan de Oro City, Philippines
530Miami, Florida, USA	816Tokyo, Japan	843Lima, Peru	912Jakarta, Indonesia
540New York, New York, USA	817Seoul, Korea	850Bangalore, India	918Cairo, Egypt
550Honolulu, Hawaii, USA	819Copenhagen, Denmark	851Cochin, India	919Amman, Jordan
560Agana, Guam, USA	821Rio de Janeiro, Brazil	852Delhi, India	915Toronto, Canada
580Detroit, Michigan, USA	822Karachi, Pakistan	853Mumbai, India	920Vancouver, Canada
570Atlanta, Georgia, USA	823Manila, Philippines	860Goteborg, Sweden	925Abuja, Nigeria
801Beijing, China	826Geneva, Switzerland	902Wellington, New Zealand	926Accra, Ghana
802Bridgetown, Barbados	827Taipei, Taiwan	904Johannesburg, South Africa	927Mexico City, Mexico
805Paris, France	828Bangkok, Thailand	905Kuwait City, Kuwait	928Monterrey, Mexico
807Frankfurt, Germany	831London, United Kingdom	907Cebu City, Philippines	929Moscow, Russian
810Hong Kong, China	836Nairobi, Kenya	908Perth, Australia	

* Select sites only.

CES Connect™

Celebrates One Year of Service to State Boards of Nursing

On March 15, 2005, the Commission on Graduates of Foreign Nursing Schools (CGFNS) went “live” with the *CES Connect™*, an online reporting service available via CGFNS’ website, for use by US and Territorial Boards of Nursing. This service allows the Boards instant access to the completed CGFNS Credential Evaluation Service (CES) Reports of their applicants.

Summary

Users of *CES Connect™* now total 46 Boards of Nursing. The state board users are as follows, with those underlined requiring CES as a prerequisite to obtaining initial licensure or licensure endorsement: Alabama, Alaska, Arizona, Arkansas, California, Colorado, Connecticut,

Delaware, Florida, Georgia, Hawaii, Idaho, Illinois, Iowa, Kansas, Kentucky, Louisiana, Maine, Maryland, Massachusetts, Minnesota, Mississippi, Missouri, Montana, Nevada, New Hampshire, New Jersey, New Mexico, North Carolina, North Dakota, Ohio, Oklahoma, Oregon, Pennsylvania, Puerto Rico, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Utah, Vermont, Virginia, Washington, Wisconsin, Wyoming.

State Board of Nursing users, in response to a survey, found *CES Connect™* to be easy to access and navigate. CGFNS’ CES Report content was rated “very good” with no need to either add or delete information.

CES Connect™ also demonstrated its ability to be a reliable and convenient

tool of very good quality. According to the feedback received, the overall opinion of the Boards of Nursing about *CES Connect™* has been and continues to be very positive. Ease of accessibility of the Reports, and an electronic format over traditional mail are quoted as the preeminent features of the system.

Positive experiences with *CES Connect™* have generated an interest on the part of the Boards of Nursing to ask CGFNS to consider creating a similar system for other services and products, such as, the CGFNS Certification Program and *VisaScreen®* Program.



GLOBAL REALITIES ★

In 2003, more than 11,000 qualified students were turned away from U.S. nursing schools because of capacity limitations.

“Trends in International Nurse Migration,” *Health Affairs*, Volume 23, Number 3

2006 Board of Trustees



President
Lucille A. Joel, EdD, RN, FAAN
*Professor
 Rutgers University
 College of Nursing*



Vice President
Marcia Rachel, PhD, RN
*Chief Nursing Officer
 University Hospitals
 and Clinics
 Jackson, MS*



Secretary
Robert Watkins, MA
*Assistant Director
 of Admissions
 University of Texas
 at Austin*



Treasurer
Charles E Gessert, MD, MPH
*Senior Research
 Scientist, SMDC
 Health System
 Duluth, MN*



1



2



3



4



5



6



7



8



9



10



11

Members

1 Bernard Ascher, MBA

*Director of Service Industry
 Affairs for the Office of
 the United States Trade
 Representative (USTR)
 (Retired)*

2 John Bielec, PhD

*Vice President for
 Information Resources
 & Technology/CIO
 Drexel University*

3 Mary Lou Bond, PhD, RN, FAAN

*Samuel T. Hughes
 Professor in Nursing, and
 Director, Center for Hispanic
 Studies in Nursing & Health,
 The University of Texas at
 Arlington, School of Nursing*

4 John Kaiser, MS

*President, Keystone
 Organization Consultants, Inc.*

5 Eugene Ketchum, PhD

*Program Coordinator,
 Commonwealth of
 Kentucky (Retired)*

6 Mi Ja Kim, PhD, RN, FAAN

*Professor & Dean Emerita,
 University of Illinois at
 Chicago College of Nursing*

7 Norma Lang, PhD, RN, FAAN, FRCN

*Wisconsin Regent
 Distinguished Professor
 University of Wisconsin
 Milwaukee, College
 of Nursing*

8 Beverly McElmurry, EdD, RN, FAAN

*Professor & Associate Dean,
 University of Illinois at
 Chicago, College of Nursing,
 Chicago, IL*

9 Nilda Peragallo, DrPH, RN, FAAN

*Professor & Dean,
 School of Nursing & Health
 Studies, University of Miami*

10 Roy A. Swift, PhD

*Program Director
 Personnel Certification
 Accreditation American
 National Standards Institute*

11 Antonia Villarruel, PhD, RN, FAAN

*Professor, Director
 Center for Health
 Promotion, School of
 Nursing, University of
 Michigan*

2006 Committees

AD HOC Task Force on CGFNS Institute

Eugene Ketchum, PhD (Chair)
Retired

C. Alicia Georges, EdD, RN, FAAN
CUNY Lehman College

Nilda Peragallo, DrPH, RN, FAAN
University of Miami

Antonia Villarruell, PhD, RN, FAAN
University of Michigan

Lucille A. Joel, EdD, RN, FAAN
(Ex-Officio)
Rutgers University

Appeals Committee

Mi Ja Kim, PhD, RN, FAAN (Chair)
University of Illinois at Chicago

Susan Caulk, MA, CRNA, RN
American Association of Nurse
Anesthetists

Leticia Hermosa, JD, EdD, RN
New England Baptist Hospital

M. Bridget Nettleton, PhD, RN
Excelsior College

Ernie Rosas, RN, BSN
Reliable Healthcare Services, Inc.

Lucille A. Joel, EdD, RN, FAAN
(Ex-Officio)
Rutgers University

Bylaws Committee

Robert Watkins, MA (Chair)
University of Texas at Austin

Bernard Ascher, MBA (Retired)

Lucille A. Joel, EdD, RN, FAAN
(Ex-Officio)
Rutgers University

Examination Committee

Mary Lou Bond, PhD, RN, FAAN (Chair)
The University of Texas at Arlington

Christopher L. Coleman, PhD, MPH,
APRN-BC
University of Pennsylvania

Anita D. Daus, PhD, MSN, BSN
Professor Emeritus Mott
Community College

Marlene S. Feldsher, MSN, RN
Sierra College

Karolyn Hanna, PhD, RN
Santa Barbara City College

Anunciacion Hoff, MSN, RN (Nancy)
Fresno City College

Carole Howe, PhD, RN, CNM
University of Massachusetts-Dartmouth

Jo D. Kostka, RN, MSN, MT
Creighton University Medical Center

Susan Landon, MSN, RN
Thomas Jefferson University

Joan Melzer, MS, MN, RNC, ARNP-CNS
Newman University

Lucille A. Joel, EdD, RN, FAAN
(Ex-Officio)
Rutgers University

Executive Committee

Lucille A. Joel, EdD, RN, FAAN
(Chair & President)
Rutgers University

Marcia Rachel, PhD, RN
(Vice President)
University Hospitals and Clinics

Robert A. Watkins, MA
(Secretary)
University of Texas at Austin

Charles E. Gessert, MD, MPH
(Treasurer)
SMDC Health System, Duluth, MN

Finance Committee

Charles E. Gessert, MD, MPH (Chair)
SMDC Health System, Duluth, MN

C. Alicia Georges, EdD, RN, FAAN
CUNY Lehman College

Norma Lang, PhD, RN, FAAN, FRCN
Wisconsin Regent Distinguished
Professor,
University of Wisconsin, Milwaukee

Sue Ellen Pinkerton, PhD, RN, FAAN

Lucille A. Joel, EdD, RN, FAAN
(Ex-Officio)
Rutgers University

Health Professions Standards Committee

Roy A. Swift, PhD (Chair)
American National Standards Institute

Sharon Goldsmith, PhD, CCC-Speech
Goldsmith International SP

Laurita Hack, PhD
Temple University

Gregory T. Howard, LPN
Tuscaloosa, VA Medical Center

Richard D. Morrison, PhD
AARP

Margaret Simpson, MS, MT, ASCP
Alamance Community College

Sherry Stolberg, MGP, PA-C
Primary Care Associate Program,
Palo Alto, CA

Robert A. Watkins, MA
University of Texas at Austin

Lucille A. Joel, EdD, RN, FAAN
(Ex-Officio)
Rutgers University

Information Technology Advisory Committee

Eugene Ketchum, PhD (Chair)
Retired

Janice Biros, EdD
Drexel University

David W. Chapman, PhD
University of Minnesota

John Kaiser, MS
Keystone Organization Consultants, Inc.

Donna C. Pope, MBA
Methodist Healthcare, Memphis, TN

Lucille A. Joel, EdD, RN, FAAN
(Ex-Officio)
Rutgers University

Licensed Practical Nurse Standards Committee

Gregory T. Howard, LPN (Chair)
Tuscaloosa, VA Medical Center

Victor O. Frazer, Esq.

Melba Lee-Hosey, BS, AA, AAS, LVN
Stepping Stones Ed. Prog.

Betty H. Hunt, LPN
Randolph Hospital Inc., Asheboro, NC

Eric A. Lampe, ABD, PhD

Annitta Love, MSN
H. Councill Trenholm State
Technical College

Lucille A. Joel, EdD, RN, FAAN
(Ex-Officio)
Rutgers University

Marketing Advisory Committee

John Bielec (Chair)
Drexel University

Mary Lou Burdick, CEO
Lou Burdick & Associates

Carolyn Choh Fleming
Saint Joseph's University

Timothy Knettlar
Federation of State Medical Boards

David J. Reibstein
The Wharton School,
University of Pennsylvania

Heide I. Rowan
DuPont Corporate Marketing

Medical Technology Professional Standards Committee

Margaret Simpson, MS, MT, ASCP
(Chair)
Alamance Community College

Harriet B. Rolen-Mark, MA, MT (ASCP)
SUNY Upstate Medical University

JoAnn P. Fenn, MS, MT (ASCP)
Univ. of Utah School of Medicine

Timothy S. Thompson, MA
University of Pittsburgh

Kathleen McEnerney, DA,
MT(ASCP), NM
Tennessee State University

Lucille A. Joel, EdD, RN, FAAN
(Ex-Officio)
Rutgers University

Nominations Committee

Nilda Peragallo, DrPH, RN, FAAN
(Chair)
University of Miami

John Bielec, PhD
Drexel University

C. Alicia Georges, EdD, RN, FAAN
CUNY Lehman College

Occupational Therapy Professional Standards Committee

Scott McPhee, DrPH, OT, FAOTA (Chair)
School of Occupational Therapy
Belmont University, Nashville, TN

Diane Harlowe, MS, OTR, FAOTA
University of Wisconsin – Madison

Joan C. Rogers, PhD, OT, R/L
University of Pittsburgh

Paul T. Skiem, MBA

Timothy S. Thompson, MA
University of Pittsburgh

Lucille A. Joel, EdD, RN, FAAN
(Ex-Officio)
Rutgers University

Physical Therapy Professional Standards Committee

Laurita Hack, PhD (Chair)
Temple University

Sue Ellen Bowersock, PT
South Carolina Department
of Mental Health

David D. Gale, PhD
Eastern Kentucky University

Leonie (Lee) B. Nelson, DPT, MA
University of Vermont

Robert Watkins, MA
University of Texas at Austin

Lucille A. Joel, EdD, RN, FAAN
(Ex-Officio)
Rutgers University

Physician Assistant Professional Standards Committee

Sherry Stolberg, MGPGP, PA-C (Chair)
Primary Care Associate Program,
Palo Alto, CA

Geraldine A. Buck, MHS, PA-C
Drexel University

Christine Greb
Philadelphia University

Dawn Morton-Rias, PD, RPA-C
SUNY Downstate Medical Center

Laura J. Stuetzer, MS, PA-C

Lucille A. Joel, EdD, RN, FAAN
(Ex-Officio)
Rutgers University

Professional Nurse Credentials & Standards Committee

Robert Watkins, MA (Chair)
University of Texas at Austin

Yvonne K. Moody, RN, MSN
(Vice Chair)

Nettie Birnbach, EdD, RN, FAAN

Judith Edwin, EdD
Savannah State University

Dede (Edyth) Pahl, MBA
Consultant

Gabriel Juno Sapalaran, Jr, RN, CNIII
Duke University Hospital System

Joyce E. Thompson, DrPH, CNM,
FAAN, FACNM, RN
Western Michigan University

Lucille A. Joel, EdD, RN, FAAN
(Ex-Officio)
Rutgers University

Research & Evaluation Committee

Nilda Peragallo, DrPH, RN, FAAN
(Chair)
University of Miami

Huey Jen Chen, PhD, ARNP
Byrdine F. Lewis School of Nursing,
Atlanta, GA

Chris R. Esperat, PhD, RN,
APRN, BCN, MAN
Texas Tech University

Keville C. Frederickson, EdD, RN, FAAN
CUNY Lehman College

Phyllis B. Kritek, PhD, RN, FAAN
(Consultant)

Beverly J. McElmurry, EdD, RN, FAAN
University of Illinois at Chicago

Lucille A. Joel, EdD, RN, FAAN
(Ex-Officio)
Rutgers University

Speech Language Pathology Standards Committee

Sharon Goldsmith, PhD, CCC-Speech
(Chair)
Goldsmith International SP

Carolyn Wiles Higdon
University of Mississippi

George O Purvis, PhD
VA Medical Center

Peter J. Watson, PhD
Case Western Reserve University

Lucille A. Joel, EdD, RN, FAAN
(Ex-Officio)
Rutgers University

Strategic Planning Committee

Marcia Rachel, PhD, RN (Chair)
University Hospitals and Clinics,
Jackson, MS

Carol Bradley, MSN, RN
Tenet California

Pauline G. Johnson, JD
Attorney/International Consultant

David Keepnews, PhD, JD, RN, FAAN
Adelphi University School of Nursing

Daniel J. Pesut, PhD, APRN, BC, FAAN
Indiana University

Roy A. Swift, PhD
American National Standards Institute

Antonia Villaruel, PhD, RN, FAAN
University of Michigan

Lucille A. Joel, EdD, RN, FAAN
(Ex-Officio)
Rutgers University

Senior Management Team



**Barbara L. Nichols,
DHL, MS, RN, FAAN**
Chief Executive Officer



Leo Clayboss, CPA
Interim Chief Financial Officer



Daisy Alford-Smith, PhD, RN, FAAN
*Chief Operating Officer
January–June, 2006*



Catherine R. Davis, PhD, RN
*Director of Global Research
and Test Administration*



Julia Yuen-Heung To Dutka, EdD
*Director of Global Assessment
and Professional Services*



Andrew C. Hamilton
Director of Information Technology



Donna Rae Richardson, JD, RN
*Director of Governmental Affairs
and Professional Standards*



Petula L. Wilson, PHR
Director of Human Resources



Brittany Grimes Zaehringer, JD, MSSA
*Director of Advocacy,
Quality Assurance and Staff Development*



Peter Zaehringer
*Director of Business Development,
Planning and Marketing*

Our Mission

CGFNS protects the public by assuring the integrity of health professional credentials in the context of global migration and by fostering the equitable treatment of healthcare professionals as they expand their horizons.

We do this by focusing on four key objectives:

- *We develop and administer a predictive testing and evaluation program for internationally-educated nurses;*
- *We provide a credentials evaluation service for internationally-educated and/or internationally-born healthcare professionals;*
- *We serve as a clearinghouse for information on international nursing education and licensure; and*
- *We conduct and publish studies relevant to internationally-educated nurses.*

