

2007 ANNUAL REPORT



Celebrating 30 years of

Global Credibility

1977-2007

CGFNS
INTERNATIONAL[®]



GLOBAL CREDIBILITY

30 YEARS

30 Years of Building Global Credibility

Credibility is built slowly, using the bricks and mortar of experience and success. For 30 years, CGFNS has been building its position as the leading international expert on global healthcare credentials assessment, evaluation and educational certification.

The past year has been one of both challenge and accomplishment.

In 2007, the Commission on Graduates of Foreign Nursing Schools officially became CGFNS International, shortening our name and adopting “International” to reflect our expanding global presence and impact among foreign-educated healthcare professionals. Our history of providing excellence in educational credentialing among foreign-educated healthcare professionals is paying dividends as we extend our additional services globally.

The challenges we face have been many—including a number of national and international issues that affect our applicants, our organization, the healthcare community and, ultimately, consumers of healthcare services. As the world continues to experience a shortage of nurses and qualified healthcare professionals, our work becomes even more relevant and important.

CGFNS International, Inc., celebrates 30 years as the internationally recognized authority on credentials evaluation and verification pertaining to the education, registration and licensure of nurses and healthcare professionals worldwide.

Certification Program (CP) since 1977

Tested 340,000 foreign-educated applicants
Issued 130,000 Certificates

Credentials Evaluation Service (CES) since 1993

Issued 35,000 Reports

VisaScreen® (VS) since 1996

Issued 90,000 Certificates

Credential Verification Service for New York State (CVS) since 2001

Verified credentials of 40,000 applicants

International Consultants of Delaware (ICD)

20,500 reports issued since 1977; 15,500 since 2000, the year it was acquired by CGFNS

* 655,500 total number tested and certificates/reports issued 1977–2007.



GLOBAL AFFIRMATION

President's Letter

LUCILLE A. JOEL, EDD, RN, FAAN

President, CGFNS International

Professor, Rutgers University, College of Nursing



Credibility—the nature of being credible in the real world—resists neat categorization or easy definition. Credibility is born from collective knowledge and experience that delivers valid and reliable programs of service. The dimensions of who we are and what we deliver are embedded in the quality of our work.

For 30 years, CGFNS has provided accurate assessments of the credentials of migrating health professionals. This depth of knowledge and breadth of experience creates quality results for our stakeholders and sets us apart from other groups claiming to be experts in this capacity.

During its first 15 years, the Commission on Graduates of Foreign Nursing Schools focused its attention solely on evaluating the credentials of and testing and issuing certifications to first-level general registered nurses through our Certification Program. With the creation of the Credentials Evaluation Service in 1993, the passage of the 1996 Illegal Immigration Reform and Immigrant Responsibility Act (IIRIRA), the creation of the *VisaScreen*® Program, the acquisition of International Consultants of Delaware (ICD) in 2000, and the creation of the Credential Verification Service for New York State in 2001, we have expanded our scope to include credentials evaluation and verification services for other health professionals. This history of continued expansion is what CGFNS is now known for, and is what will continue to guide our efforts over the coming years.

We have vigorously fulfilled our mandate from federal and state governments to uphold the educational and professional standards created to protect the well-being of U.S. citizens.

At no time was this most important mission called into play more than during recent incidents of cheating on high-stakes tests and dissemination of fraudulent documents. CGFNS acted swiftly and decisively to let the world know we would not tolerate any sidestepping of the educational, ethical or legal hurdles required to become certified to practice nursing in this or any other country. The public deserves only the most qualified nurses and health professionals. And our goal is, and has always been, to ensure public safety.

As we celebrate this milestone anniversary, it is worth noting that the reason CGFNS was created—to evaluate the credentials of foreign-educated nurses and other health professionals who seek employment in the United States—remains our core mission. CGFNS has performed this role without interruption, and our work is as relevant in 2007 as it was in 1977.

While we are proud of our past, we value highly the trust and confidence our applicants place in us, which has enabled CGFNS to become the leader in foreign health professional evaluation and standard setting.

Lucille A. Joel

LUCILLE A. JOEL



2007 HIGHLIGHTS

January 2007

Announced official name change from the Commission on Graduates of Foreign Nursing Schools to CGFNS International, Inc.

February 2007

Opened three new exam centers in China: Shanghai, Guangzhou and Chengdu.

Denied *VisaScreen*® Certificates for nurses involved in the compromised June 2006 Philippine Nurse Licensure Exam.

March 2007

After discussions among CGFNS, the American Nurses Association (ANA) and the Philippine government, Philippine President Gloria Macapagal-Arroyo granted permission for applicants to retake portions of the compromised June 2006 Board of Nursing examination. To date, more than 14,000 have retaken the exam, with a 67 percent passing rate.

Launched CGFNS Connect, formerly the Online Application System, giving applicants a cleaner, simpler and more attractive online application system.

April 2007

Sponsored workshops titled *Creating Positive Practice Environments* for internationally recruited nurses in the U.S. through the International Centre on Nurse Migration with the American Nurses Association (ANA).

May 2007

Presented at the International Council of Nurses (ICN) international conference in Yokohama, Japan, and at the Eighth International Regulatory Conference.

June 2007

Announced plans with Kaplan Nursing to provide online and off-line nursing education and test-preparation products and services.

July 2007

The State of Michigan changed its requirements from CP to CES with English.

Barbara L. Nichols, DHL, MS, RN, FAAN, CGFNS International CEO, named as an Ambassador in Research!America's Paul G. Rogers Society for Global Health Research, acknowledging her as one of 50 of the nation's foremost global health experts.

Presented at the 18th International Nursing Research Congress in Vienna, Austria.

August 2007

Hosted CES Connect training webcasts for state boards of nursing.

September 2007

Provided online verification of *VisaScreen*® Certificates to the Department of Homeland Security, Citizenship and Immigration Services, Nebraska Service Center.

October 2007

Celebrated our 30th anniversary.

November 2007

The Nurse Immigration Book, 2007–2008 edition, containing a chapter written by CGFNS, is released.

December 2007

Hosted Building Global Alliances in a World of Healthcare Inequities Symposium in Philadelphia, Pennsylvania, U.S.A., and awarded its 2007 International Distinguished Leadership Award to William L. Holzemer, PhD, RN, FAAN.



“Our overarching goal—to empower nurses around the world to realize their professional and personal dreams, while ensuring the safety and quality of healthcare—is absolute and unwavering.”

— BARBARA L. NICHOLS, CGFNS INTERNATIONAL CEO



NURSING SHORTAGE

U.S. nursing schools, constrained by a lack of faculty, still struggle to boost the supply of nurses. Schools rejected some 30,709 qualified applications from students seeking four-year bachelor's degrees in nursing in 2007, according to preliminary findings from a yearly survey by the American Association of Colleges of Nursing (AACN).

Visa Retrogression

Various issues at and beyond our borders have caused delays and hardships for in-demand foreign graduates looking to practice in the United States. The U.S. government continued to pursue comprehensive immigration reform in 2007, focusing much attention on increasing border safety and preventing illegal immigration. However, this effort did not improve the healthcare system's ability to recruit and retain an adequate number of foreign-educated healthcare workers.

When the number of people who apply for immigrant visas exceeds the number of visas available in a fiscal year, retrogression (the procedural delay in issuing an immigrant visa) is applied, and the applicants are placed on a waiting list. The United States' current retrogression began November 1, 2006—anyone who filed after October 11, 2005, must now wait until the current backlog of applicants is completed. The new fiscal year begins on October 1 of each year and makes new slots available for occupational visas. Schedule A, which has been a special category with more flexible procedures for registered nurses and physical therapists to enter the U.S. with occupational visas, must be renewed by the Congress in order to allow more professionals to enter the U.S.

Due to the continuing worker shortage, immigration attorneys, hospitals, employers and recruiters continue to lobby for legislation, including the Comprehensive Immigration Reform Bill, which would exempt Schedule A healthcare professionals from retrogression and lift quotas for a 10-year period. As of this writing, there has been no progress on legislative remedies to ensure an uninterrupted flow of healthcare professionals to the United States.

State Legislation and Regulations

At the state level, new legislation and regulations have been initiated to require more information about applicants and their qualifications, including fingerprinting and other background screening to ensure public safety.

✳ 60,053 total applications received for all programs from October 1, 2006, through September 30, 2007.

Reporting year follows U.S. Government fiscal year.



GLOBAL TRANSFORMATION

Chief Executive Officer's Letter

BARBARA L. NICHOLS, DHL, MS, RN, FAAN
Chief Executive Officer



We celebrate our 30th anniversary this year by acknowledging our history as an international leader in global nursing assessment. As we move into the 21st century, this milestone is significant. It represents an opportunity to celebrate past achievements and more importantly, to affirm our core values.

Our dual mission—to protect the public and attend to the well-being of migrating nurses—has given us an international voice and a position of credibility. Nursing communities and, more recently, healthcare communities around the world acknowledge our role as a standard-bearer of quality, committed to safe and effective delivery of healthcare.

On Becoming CGFNS International

Accepting this vital role as a global resource is also reflected in our recent name change. The Commission on Graduates of Foreign Nursing Schools is now CGFNS International. Rapid globalization, electronic networking and the increased permeability of national boundaries have all broadened our service base and have demanded greater flexibility and responsiveness. This ongoing growth requires continuous process improvement as we assist the healthcare community worldwide.

Today, CGFNS International is more multifaceted, more diverse and more visible. We have created and sustained partnerships and embraced technology that help us continue to create bridges of communication and collaboration worldwide. We represent a vast number of global, regional, national and cultural constituents, but also continue to negotiate and mediate the differences among them. For us, globalization is not a trend

but a given, and we remain steadfast in our commitment to the public's health as we nimbly track and respond to the many political, social and economic issues inherent in our healthcare environment.

Addressing the Global Nursing Shortage

The global nursing shortage serves as a context for many of the changes happening around the world and has intensified our commitment to safeguarding the interests of migrating healthcare professionals. Many foreign nurses who migrate do so to improve their lives and those of their families. Understanding this makes the moral subtext of our work more challenging and has evoked a proactive and aggressive dialogue on roles we might play to ensure responsive and ethical migrating practices.

A Commitment That Spans Three Decades

Three decades into our commitment to nurses and their patients, we still are not fully satisfied with what we have done or where we are. But we are resolute in what we must do. Our overarching goal—to empower nurses around the world to realize their professional and personal dreams, while ensuring the safety and quality of healthcare—is absolute and unwavering. The methods we employ and the partnerships we form will continue to evolve as CGFNS remains focused on credible assessment practices in a global marketplace.


Barbara L. Nichols

BARBARA L. NICHOLS



GLOBAL VALIDITY

Certification Program and Qualifying Exam

 The CGFNS Certification Program (CP) was created in 1977 to evaluate and globally test foreign-educated first-level general nurses seeking to be licensed to practice in the United States. The Certification Program predicts success on the NCLEX-RN® exam and includes a credentials evaluation, the CGFNS Qualifying Exam and a test of English language proficiency. The Certification Program has traditionally been a prerequisite for licensure by state boards of nursing. Those who are successful in meeting program requirements, including passing the CGFNS Qualifying Exam, are issued the CGFNS Certificate. The CGFNS Certificate is recognized by the Department of Homeland Security as meeting one of the requirements for immigration. In 2007, CGFNS issued 5,503 CP Certificates.

Comparative statistics over three decades show that nurses who pass the CGFNS Qualifying Exam on the first attempt have on average an 87–90 percent chance of passing the NCLEX-RN on the first attempt. To make sure the Qualifying Exam maintains predictive success, CGFNS conducts regular validity studies to gauge similarities between the two tests.

In October 2007, our Global Research and Test Administration department published the results of the 2005–2006 validity study. The results show that applicants who passed the CGFNS examination on the first attempt had a 90.3 percent chance of passing NCLEX-RN on the first attempt during the 2005–2006 NCLEX testing year—a slight increase from the 2004–2005 study. Overall, CGFNS Certificate holders, no matter how many times they took the CGFNS exam, had an 86.9 percent chance of

passing NCLEX-RN on the first attempt. By contrast, only 50.4 percent of foreign nurse graduates who did not take the CGFNS Qualifying Exam passed NCLEX-RN on the first attempt.

Validity necessitates adaptation. For this reason, CGFNS continues to monitor changes in the NCLEX-RN exam blueprint. When changes to the NCLEX-RN exam occur, CGFNS alters its Certification Program Qualifying Exam to mirror those changes and maintain accurate predictability.

CGFNS regularly updates its item bank through a rigorous process, beginning with our Item Writer's Workshops. These sessions are attended by practicing faculty who are subject-matter experts. The resulting questions are reviewed and pretested on a group of foreign nurse graduates, reviewed again and then added to the item bank.

2007 Certification Program Qualifying Exam Results*

Total Exam Takers:	12,678
Total Exam Passers:	4,672
First-Time Exam Passers:	3,100
Repeat Exam Passers:	1,572

*October 1, 2006–September 30, 2007.

Reporting year follows U.S. Government fiscal year.



GLOBAL ACCESSIBILITY

2007 Test Site Locations

Argentina	Buenos Aires	Mexico	Mexico City Monterrey
Australia	Perth Sydney	New Zealand	Wellington
Brazil	Rio de Janeiro Natal	Nigeria	Abuja
Canada	Montreal Toronto Vancouver	Pakistan	Karachi
China	Beijing Shanghai Guangzhou Chengdu	Peru	Lima
Denmark	Copenhagen	Philippines	Manila Cebu City Cagayan de Oro City
Egypt	Cairo	Russian Federation	Moscow
France	Paris	South Africa	Johannesburg
Germany	Frankfurt	Sri Lanka	Colombo
Ghana	Accra	Sweden	Göteborg
Hong Kong	Hong Kong	Switzerland	Geneva
India	Bangalore Cochin Delhi Mumbai	Taiwan	Taipei
Indonesia	Jakarta	Thailand	Bangkok
Ireland	Dublin	United Kingdom	London
Israel	Tel Aviv	United States of America	Agana, Guam Atlanta, Georgia Chicago, Illinois Detroit, Michigan Honolulu, Hawaii Houston, Texas Los Angeles, California Miami, Florida New York, New York
Japan	Tokyo	West Indies	Barbados Jamaica Trinidad
Jordan	Amman		
Kenya	Nairobi		
Korea	Seoul		
Kuwait	Kuwait City		



GLOBAL MOMENTUM

CGFNS has worked tirelessly to safeguard the public by ensuring the integrity of the credentials of nurses migrating to the U.S. We celebrate this milestone anniversary having reviewed the credentials of more than 500,000 foreign-educated nurses and other healthcare professionals for U.S. licensure and immigration.



2007 Top 5 Countries of Education

During the past 30 years, these five countries have consistently formed the largest base from which applicants come: the Philippines, India, South Korea, Canada and the United Kingdom.

2007 Applicants by Country*

Philippines	13,972
India	5,112
South Korea	4,159
Canada	879
United Kingdom	313
Total Applicants from These 5 Countries	24,435

*October 1, 2006–September 30, 2007.

Reporting year follows U.S. Government fiscal year.

Nursing Education and Licensure in PHILIPPINES

Nursing education in the Philippines currently offers a four-year Bachelor of Science in Nursing. Coursework includes humanities and social sciences, mathematics and the natural sciences in addition to the four major areas of nursing, along with community health, nursing research and nursing administration.

Upon graduation, candidates are required to complete comprehensive fieldwork in obstetrics, surgery, psychiatry, community health and hospital settings. Graduates may then sit for the nursing licensure examination, which is administered by the Professional Regulation Commission (PRC). In 2007, nearly 14,000 applicants came from the Philippines.



Nursing Education and Licensure in **INDIA**

Nursing education in India includes diploma and baccalaureate programs. Diploma studies generally take three years, culminating in a Diploma in General Nursing and Midwifery or a Diploma in General Nursing. The Bachelor of Science in Nursing is a four-year program, culminating in the University Examination. A graduate of either program may then sit for the State Nursing Council Examination to become licensed as a registered nurse and midwife in India.

The four-year program in nursing education includes courses in the humanities and social sciences as well as the physical and biological sciences. Nursing content focuses on the four major areas of nursing, community health, nursing research and nursing administration. In 2007, more than 5,000 applicants came from India.

Nursing Education and Licensure in **SOUTH KOREA**

Nursing education in South Korea follows a three-year diploma program or a four-year degree program. Clinical education programs include emergency, occupational, geriatric, infection control, public health, home healthcare, mental health and psychiatry, and midwifery.

Upon graduation, each student must pass a national examination to become a registered nurse or midwife, authorized under the Medical Service Act administered by the Ministry of Health. In 2007, more than 4,000 applicants came from South Korea.



Nursing Education and Licensure in **CANADA**

Nursing education in Canada consists of two- to three-year diploma programs and baccalaureate programs that generally run four to five years.

Program curricula, registration and licensing processes are determined by individual provinces. The Canadian Nurses Association (CNA), a federation of provincial and territorial nursing associations and colleges in Canada, develops the Canadian Registered Nurse Examination (CRNE), which is administered in every province except Quebec. Other requirements include a specified number of clinical practice hours and a letter of recommendation from the nursing program. License renewal also varies by province. In 2007, nearly 900 applicants came from Canada.



Nursing Education and Licensure in the **UNITED KINGDOM**

University nursing programs in the United Kingdom—both diploma and degree—normally take three years to complete and must first be approved by the Nursing and Midwifery Council (NMC). Diplomas vary by field of nursing: Higher Education (DipHE), Mental Health or a Diploma in Nursing, for example. Degree programs also vary and include Bachelor in Nursing (BN), Bachelor of Arts in Nursing (BA) and Bachelor of Science in Nursing (BSc).

To become a registered nurse, graduates must apply to the Nursing and Midwifery Council (NMC) registry to have their credentials evaluated and approved. The NMC Register includes Registered General Nurse (RGN), Registered Mental Nurse (RMN), Registered Nurse of the Mentally Handicapped (RNMH) and Registered Sick Children's Nurse (RSCN). Registration must be renewed every three years and is based on continuing education. In 2007, more than 300 applicants came from the United Kingdom.





GLOBAL EVOLUTION of Credentials Evaluation Service Offerings



Credentials Evaluation Service (CES)

CGFNS added the Credentials Evaluation Service in 1993. This service provides a course-by-course comparison of an applicant's education to United States standards for education, licensure and employment. In 2007, CGFNS issued 6,146 Credentials Evaluation Service Reports.

CES and English Language Proficiency

In June 2007, the Michigan Board of Nursing revised its regulations for foreign-educated RNs and LPNs who wish to practice in the state of Michigan, requiring them to use the CGFNS CES Full Education Course-by-Course Report and English Language Proficiency Report. In 2006, CGFNS began integrating English Language Proficiency Reports into the CES Report for those states requiring this assessment.

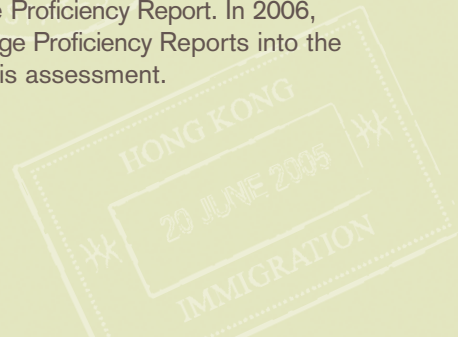
Program

Certificates/Reports Issued in 2007*

CGFNS Certification Program (CP)	5,503
Credentials Evaluation Service (CES)	6,146
VisaScreen® (VS)	13,401
Credential Verification Service for New York (CVS)	10,132
International Consultants of Delaware (ICD)	1,510
Total Certificates and Reports Issued in 2007	36,692

*October 1, 2006–September 30, 2007.

Reporting year follows U.S. Government fiscal year.



GLOBAL ASSESSMENT



VisaScreen®: Visa Credentials Assessment Program

VisaScreen® is our trademark term for the federally-mandated non-U.S. citizen healthcare worker certification program for U.S. immigration and occupational visas. The professions requiring certification are 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 (ICHP), a division of CGFNS. In 2007, ICHP issued 13,401 VisaScreen® Certificates.

Profession	VS Certificates Issued*		
	10/01/04–9/30/05	10/01/05–9/30/06	10/01/06–9/30/07
Audiologist	<15	<15	<15
Clinical Laboratory Scientist	798	766	722
Clinical Laboratory Technician	19	<15	<15
Licensed Practical or Vocational Nurse	63	65	78
Occupational Therapist	103	63	24
Physical Therapist	814	570	416
Physician Assistant	<15	<15	15
Registered Nurse	15,637	15,824	11,958
Speech-Language Pathologist	190	128	158

*Reporting years follow U.S. Government fiscal year.

In 1996, the U.S. Congress passed the Illegal Immigration Reform and Immigrant Responsibility Act (IIRIRA), Section 343, which requires certain foreign healthcare professionals to complete a screening program in order to qualify for occupational visas. CGFNS is specifically designated as an organization qualified to offer this screening. The Final Rules for Section 343 were promulgated in 2003, and in 2004 the Department of Homeland Security approved CGFNS to continue certifying healthcare workers.





Credential Verification Service for New York State (CVS)

CGFNS created the Credential Verification Service for New York State in 2001. This service verifies the documents required of foreign-educated registered nurses, licensed practical nurses, physical therapists, physical therapy assistants, occupational therapists and occupational therapy assistants seeking licensure in New York State. In 2007, CGFNS issued 10,132 CVS Reports.

CVS Connect Goes Live

In January 2007, our Credential Verification Service for New York State (CVS) Connect system went online, allowing CGFNS International to send Credentials Verification Service Reports electronically to the New York State Education Department. The system is modeled after our very successful *CES Connect* online reporting system for state boards of nursing.



International Consultants of Delaware (ICD)

In 2000, CGFNS acquired International Consultants of Delaware (ICD), a recognized expert in the field of international education, expanding CGFNS's services into non-healthcare fields. In 2007, ICD issued 1,510 Credentials Evaluation Reports.



GLOBAL PROTECTION Against Fraudulent Documents



Falsification of documents, counterfeit transcripts and licenses, and identity fraud are growing international problems. Advanced technology has made it easier to produce more sophisticated-looking forgeries. In addition, bribery and collusion help perpetrators pass off seemingly official documents for immigration, licensure, employment and academic admission. A significant portion of CGFNS's credentials evaluation and assessment services is devoted to detecting fraud and preventing unqualified people from becoming practicing healthcare professionals. Our international credentialing and quality assurance staff constantly investigate, research and evaluate documents we receive from international schools and licensing authorities. We conduct periodic

document audits to confirm seals and signatures and verify approved schools of education. CGFNS also consults with state boards of nursing, international nursing councils and education databases to ensure that all information is accurate and current. State, federal and international governmental bodies request information from CGFNS regarding nurses and allied healthcare professionals and their credentials. CGFNS conducts risk assessment procedures to identify recurrent instances of fraudulent activity and irregularities in applications and documents from particular institutions, countries and individuals. Our current policies are being refined to increase the flow of information among the appropriate stakeholders in the public health arena.





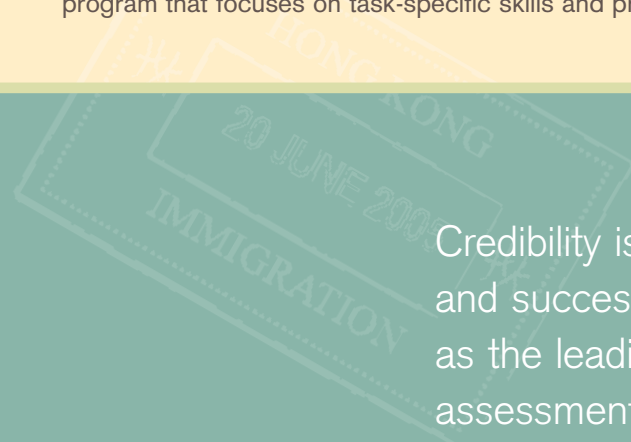
Building GLOBAL CREDIBILITY with Experience and Technology

Simple changes can often lead to significant improvements in the level of service we deliver. While the impact of retrogression reduced the number of applications received in 2007 in comparison with 2006, CGFNS International has initiated a number of technology enhancements to improve our service to those who apply.

Applicants meet CGFNS at the middle of a very long immigration journey—sometimes up to five years can pass from the time a healthcare worker first submits a visa application to U.S. Citizenship and Immigration Services before applying to CGFNS. Our role is to provide professionals with expert credentials evaluations. We make sure our staff members have the expertise and training required to efficiently process applications in a timely, expert and professional manner. Therefore, staff development at CGFNS is vitally important and includes a multifaceted training program that focuses on task-specific skills and problem solving.



Credibility is built slowly, using the bricks and mortar of experience and success. For 30 years, CGFNS has been building its position as the leading international expert on global healthcare credentials assessment, evaluation and educational certification.





Ongoing Process Reviews

CGFNS regularly audits its internal processes and functions by systematically selecting applicant files and examining them for potential processing errors or credentialing issues as a way to identify potential service or process improvements. For example:

- By implementing new procedures, hiring additional staff and expanding employee training, our Customer Call Center response rates climbed from roughly 75 percent in 2006 to a near-perfect 100 percent in 2007.
- E-mail responses have also increased to nearly 100 percent, with turnaround time reduced to three days. Responding to applicants faster, with thoroughly researched information and current case file data, has greatly improved overall applicant satisfaction.
- CGFNS installed a new mail tracking system in 2007 to help customer service representatives confirm delivery of traceable mail faster and easier.
- CGFNS has also updated its Web services. Applicants increasingly apply for CGFNS services online, check the status of their applications, make payments and order study aids.

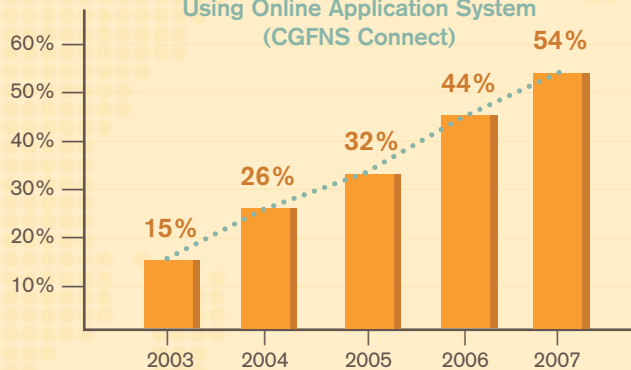
Database with Worldwide Contacts

CGFNS maintains an unparalleled database containing information on 7,500 schools in more than 150 countries worldwide. In addition, we keep files on more than 300 licensing jurisdictions and maintain a network of contacts in a variety of worldwide agencies, governmental bodies, boards and professional nursing associations.

Because of CGFNS's unique history, we have developed a network of worldwide contacts that regularly provide international education and licensure/registration information about nursing not routinely available to other agencies. This information is updated regularly through frequent communication as well as the organization's triennial world surveys.

In order to stay abreast of educational and regulatory changes in countries, CGFNS employees regularly undergo country-specific training about the countries from which applicants and their credentials originate.

Percentage of Applicants Using Online Application System (CGFNS Connect)



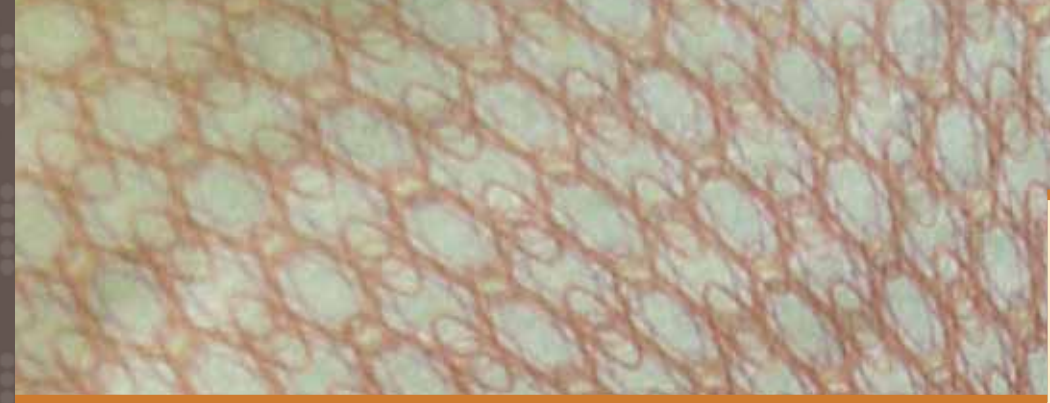


GLOBAL DIALOGUE

CGFNS International continues to expand our role as a collaborator in policy and professional standards development through liaisons with national and international organizations (nursing, health and others), participation on multidisciplinary taskforces and dissemination of information about foreign-educated health professionals. In short, we have embarked on a number of initiatives to identify and develop new markets, domestically and abroad, where we envision much of the future unfolding.

Ongoing interaction with stakeholders at the national and international levels is key to helping us influence policies and professional standards that better assist us in our work. We are addressing more complex migration and practice issues, influencing legislation, stimulating greater discussion among healthcare practitioners around the world, and using our knowledge and experience to serve a range of healthcare professionals.

CGFNS develops strategic alliances that expand our reach and create new services. At the policy level, we have formed strategic alliances with colleges and universities, governmental and regulatory authorities, and testing/credentialing entities. These collaborations give CGFNS the opportunity to influence policy, target initiatives and create business allies.



OVERVIEW of Domestic and International Activities

Domestic Activities in 2007

- Maintained ongoing analyses and reviews of legislation impacting foreign-educated nurses and other health professionals we certify through national and international environmental scanning of legislation and regulatory rules.
- Responded with information for statutory changes to the rules for boards of nursing in 10 states regarding licensure requirements for graduates of foreign schools of nursing.
- Increased awareness of our expertise by responding to multiple requests to provide information on foreign nurse licensure, practice and migration to federal and state governmental and regulatory authorities, and increased the citation of CGFNS in publications and newspaper articles.
- Enhanced domestic activities through our continuing liaison activities with professional associations and licensing authorities.





Collaboration with AcademyHealth

Our collaboration with AcademyHealth, based in Washington, D.C., will improve our knowledge of recruiting practices and their effectiveness in international nursing migration. AcademyHealth received a grant to examine recruiters and recruiting practices. Working together, we conducted a number of focus group studies of CGFNS applicants. The focus groups sought to determine the satisfaction rates of applicants using recruiters during the immigration process.

International Activities in 2007

International initiatives have been directed at forging strong collaborative relationships with international associations and institutions.

- Provided expert opinion on nurse migration for the World Health Organization (WHO) policy initiatives.
- Shared knowledge regarding international nurse education and registration with Chinese and Indonesian delegations.
- Participated in international meetings and worked with several international and/or regulatory authority organizations on the development and customization of services for their distinct needs.
- Contributed to the ICN-Merck Mobile Library and to UNICEF, both of which provide resources to health workers and children in developing countries.
- Supported an American Nurses Foundation (ANF) CGFNS Scholar to conduct research on the issues concerning foreign-educated nurses.
- Monitored the outcome of the compromised nurse licensure exam in the Philippines and established policy protocols for a retake of the Philippine Nursing Exam Parts Three and Five in consultation with the Philippine President and Department of Labor.
- Obtained and assessed information regarding testing irregularities in nurse licensure exams conducted in Korea and Canada.

- Sponsored a networking session with participants attending the International Health Workforce Conference “A Call to Action: Ensuring Global Human Resources for Health” in Geneva, Switzerland, through the International Centre on Nurse Migration.
- CGFNS, along with the International Council of Nurses (ICN), through its International Centre on Nurse Migration, co-sponsored “Creating Positive Practice Environments for Internationally Recruited Nurses” in the U.S. with the American Nurses Association (ANA).
- Contributed to and assisted in disseminating the International Centre on Nurse Migration’s biannual electronic newsletter, *ICNM eNews*.
- Distributed information about the Impact of *Global Nurse Migration on Health Service Delivery* through a supplemental issue of Sage Publications’ *Policy, Politics & Nursing Practice*.
- Disseminated a white paper on global nurse migration in honor of National and International Nurses Week.
- Presented at the International Council of Nurses (ICN) international conference in Yokohama, Japan, and at the Eighth International Regulatory Conference.
- Sponsored a delegate from Haiti at the 2007 ICN meeting, exhibited at the conference, and sponsored the PowerPoint presentations and conference bags.

Looking forward, CGFNS will continue to expand its work in the areas of research, information distribution and credentials evaluation. We anticipate our services being adopted even more broadly as nurses migrate to countries for professional experience, economic survival and advancement.

Initiative with Kaplan

In 2007, CGFNS agreed to a strategic alliance with Kaplan, a leading international provider of educational and career services. The initiative will develop nursing education and test-preparation programs for hospital organizations, international schools of nursing and individual international nurses.



Building GLOBAL ALLIANCES

Symposium Drew International Participation

On December 3–4, 2007, thought leaders, clinicians, researchers and policy makers gathered in Philadelphia for CGFNS International’s fourth Building Global Alliances Symposium and sixth International Distinguished Leadership Award Gala.

Building Global Alliances in a World of Healthcare Inequities, the theme of this year’s event, began with greetings from CGFNS International President Lucille A. Joel, Philadelphia Health Commissioner John F. Domzalski, and Deputy Secretary for Health Promotion and Disease Prevention at the Pennsylvania Department of Health Joanne Grossi.

Warren Ross, President of Robert Ross International University of Nursing, diamond sponsor of the event, had the honor of introducing the keynote speaker, Stephen Lewis. Formerly the Special Envoy to UN Secretary-General Kofi Annan, Lewis is a Co-director of AIDS-Free

World, a new international AIDS advocacy organization, based in the United States (www.aids-freeworld.org). Lewis reminded the audience that more than a billion people live on less than US\$1 per day. He said that healthcare inequities “shame and diminish us all” and focused on the toll that HIV/AIDS is taking on the world population.

The Building Global Alliances Symposium featured the following international experts on healthcare inequities, who were designated Adele Herwitz scholars in honor of the CGFNS founder: Marko Vujicic, PhD, World Bank; Janet Hatcher Roberts, BA, MSc, International Organization for Migration; Mireille Kingma, RN, PhD, International Council of Nurses; Michael J. Villeneuve, RN, BScN, MSc, Academy of Canadian Executive Nurses; and William L. Holzemer, PhD, RN, FAAN, 2007 CGFNS International Distinguished Leadership Award recipient.

Vujicic spoke on Global Health Disparities: The Role of Health Financing, Donor Assistance, and Human Resources. He said that donor aid for health has increased significantly but that lack of predictability of funding and the “verticalization” of aid results in the lack of responsiveness and flexibility to aid “sudden problems and crises.”

Roberts spoke on The Impact of Global Inequities on Health Profession Migration. She quoted the Millennium Declaration’s statement about the challenge of globalization, stating, “Those who suffer or benefit least deserve help from those who benefit most.” She then showed how the determinants of health and health professionals are inequitably distributed.



CGFNS International Building Global Alliances Symposium speakers were designated Adele Herwitz scholars in honor of the CGFNS founder. From left are CGFNS International CEO Barbara L. Nichols, Marko Vujicic, Janet Hatcher Roberts, Mireille Kingma, William L. Holzemer, Michael J. Villeneuve and CGFNS International President Lucille A. Joel. Not pictured is Stephen Lewis.



International Distinguished Leadership Award

Kingma spoke on Nursing Migration and the Global Health Economy. She characterized healthcare migration as “brain circulation,” offering opportunities for development, employment and business; creating a competitive edge for multicultural nursing; and encouraging positive practice environments and dissemination of good practice. She said remittances to source countries from migrating healthcare professionals reached US\$300 billion in 2006. She called for the development of self-sustainable workforces, the regulation of recruitment and deployment, and the respect for human rights.

Villeneuve spoke on Eliminating Health Disparities as Part of the Core Business of Nursing on a Global Level. He said, “Many of the sources of pain, misery, sickness and death worldwide are amenable to intervention by nurses and midwives.” He urged nurses and midwives to do a better job, collectively, of purposefully and strategically creating points of access for the kinds of knowledge they bring to policy discussions.

CGFNS International Distinguished Leadership Award Presented to William L. Holzemer

William L. Holzemer responded to the presentations as the 2007 CGFNS International Distinguished Leadership Award recipient. Dr. Holzemer’s current research project, “Perceived AIDS Stigma: A Multinational African Study,” is supported by NIH’s Fogarty International Center, the National Institutes of Health, and the Health Resources and Service Administration.

CGFNS International established the International Distinguished Leadership Award in 2001 to recognize individuals who demonstrate outstanding international, professional and personal achievement that serves as a model for success in the global healthcare community.

The 2008 CGFNS International Building Global Alliances Symposium and International Distinguished Leadership Award is scheduled for December 7–8, 2008 in Philadelphia.

From left to right: CGFNS International President Lucille A. Joel, EdD, RN, FAAN; CGFNS 2007 International Distinguished Leadership Award recipient William L. Holzemer, PhD, RN, FAAN, Professor of Nursing, Associate Dean for International Programs and Lillian and Dudley Aldous Endowed Chair in Nursing Science at the University of California, San Francisco (UCSF) School of Nursing; CGFNS International CEO Barbara L. Nichols, DHL, MS, RN, FAAN.



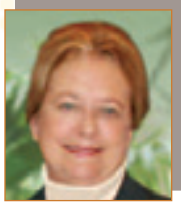
Members of the CGFNS International Board and staff posed with keynote speaker Stephen Lewis during the CGFNS International Building Global Alliances Symposium on December 3–4 in Philadelphia. **From left:** Kathleen Rohrbaugh, Marla Downing, Mi Ja Kim, Barbara Nichols, Leo Clayboss, Stephen Lewis, Lucille Joel, Donna Richardson, Monique Rawls, Beverly McElmurry, Julia To Dutka, Petula Wilson, Dorothy McBride, Lorrie Murphy, Silvia Pomponi and Catherine Davis.



CGFNS International celebrated its 30th anniversary during the 2007 International Distinguished Leadership Award Gala, following the Building Global Alliances Symposium on December 3–4 in Philadelphia.

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