

Nevada State Board of

# NURSING NEWS

December 2009

Your Questions,  
*Our Answers*

The Board will have  
the hearing without  
you...

National Certification  
to be Required for  
APNS in Nevada

The mission of the Nevada State Board of Nursing is to protect the public's health, safety and welfare through effective regulation of nursing.

**Debra Scott**, MSN, RN, FRE  
Executive Director

**Dean Estes**, Editor  
Director of Finance/Technology  
5011 Meadowood Mall Way, Suite 300  
Reno, NV 89502-6547  
888-590-6726

nursingboard@nsbn.state.nv.us

The **Nevada State Board of Nursing News** publishes news and information quarterly about Board actions, regulations, and activities. Articles may be reprinted without permission; attribution is appreciated.

Circulation includes more than  
35,000 nurses, nursing assistants  
and student nurses.

## CONTACT

### NEVADA STATE BOARD OF NURSING

5011 Meadowood Mall Way, Suite 300  
Reno, NV 89502-6547  
phone—888-590-6726  
fax—775-687-7707  
nursingboard@nsbn.state.nv.us

2500 W. Sahara Ave., Suite 207  
Las Vegas, NV 89102-4392  
phone—888-590-6726  
fax—702-486-5803  
nursingboard@nsbn.state.nv.us

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can be found on the  
Board's website:

[www.nursingboard.state.nv.us](http://www.nursingboard.state.nv.us)

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David Brown at 800.561.4686  
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## A message from the executive director

Debra Scott, MSN, RN, FRE

Words that I hear from the seven members of the Board are that they are proud to be involved with the work of the Nevada State Board of Nursing. The 22 members of the Board staff often echo those senti-

ments — administration, nurse investigators, legal, and the numerous clerical staff who support the everyday work of the Board alike. As we look back over the last year, the challenges have been varied and blessings have been many in meeting our mission to protect the public’s health, safety and welfare through effective regulation of nursing in Nevada.

How do we measure our success in meeting that all important mission? Hard evidence is often difficult to find, but through participation in the National Council of State Boards of Nursing’s (NCSBN) Commitment to Ongoing Regulatory Excellence (CORE), we have some statistics that we believe the nurses and citizens of Nevada should be aware of. The NSBN has been identified to be among the top ten boards of nursing in the nation related to investigations, discipline, and licensure and has been invited to participate in a national group to identify best practices for nursing regulation.

Nevada’s outcomes from NCSBN’s research underscore our position as a leader in nursing regulation. The purpose of the survey is to provide an ongoing performance measurement and benchmarking system for nursing regulators. NCSBN gathers data from nurses, employers, and nursing programs every other year so that boards of nursing can do a self-assessment of our performance and apply resources in areas in need of improvement. Each board of nursing can mea-

sure ourself in comparison to the aggregate value which is the average for nursing boards who have about the same number of licensees.

Some of Nevada’s outcomes include:

NUMBER OF DAYS TO RESOLVE DISCIPLINARY CASES:			
Aggregate	164 (Range 1-1149)	Nevada	120 (in 2009, 89)
NUMBER OF DAYS TO VERIFY A LICENSE:			
Aggregate	11.1 (Range 1-45)	Nevada	1.0
EMPLOYERS PERCEPTION THAT THE BOARD RESOLVED A DISCIPLINARY CASE IN A TIMELY MANNER:			
Aggregate	55.2%	Nevada	80%
HOW ACCESSIBLE IS THE NPA AND HOW CLEAR IS IT?			
Aggregate	97.7% accessible, 73.2% clear	Nevada	100% accessible, 83.8% clear
FROM THE NURSE: HOW WELL DID THE DISCIPLINARY PROCESS PROTECT THE PUBLIC? (on a scale of 4=very effective and 1=not effective)			
Aggregate	3.06	Nevada	3.2
ANNUAL EXPENDITURES BY THE BOARD PER LICENSEE FOR 2002, 2005, AND 2007:			
Aggregate	\$48.84	39.95	48.80
Nevada	\$51.09	68.49	79.91

The final CORE report is extensive and includes 65 pages of descriptions, tables, and graphs. It is available in electronic form upon request from Board staff. More importantly, though, is knowing that, in Nevada, we can be proud of the work that we do to provide safe care for our citizens. Thank you for being part of this awesome work we do.



Another Nevada State Board of Nursing has just come to a close — three days. Sitting, listening, debating, and deciding how best to protect the public's health, safety and welfare through effective regulation of nursing. How do I feel? What's it like to be a member of the NSBN?

Work for the Board meeting begins weeks before the actual meeting. Each Board member receives a flash drive with all available information regarding the upcoming cases to review. So the word that describes what happens prior to the meeting is "preparation." A significant amount of time is put into reading every document that each respondent has submitted to us so that we are able to make an informed decision about each individual case.

As the meeting begins, the Board members function as a team, being respectful of each others' opinions, as we frequently do not unanimously agree. But we are each there because of the knowledge we possess, and we are expected to share our individual expertise to help the group make very important decisions — life-changing, career-altering decisions. As in every case, those nurses who come before the Board are given the opportunity to present any additional information that has not already been submitted. The word "thoughtful" comes to mind. Each issue is considered and deliberated until enough information has been processed to form a decision. It is both a physical and mental challenge, and just because a decision has been reached and an order made, that does not mean that emotional involvement ceases. But at the end of the three-day meeting comes exhaustion and relief. I know that I have upheld the law and our mission to protect the public.

Reading these cases, hearing these cases, and deciding these cases is the hardest work I have ever done in my 40-year nursing career — and I spent the first 30 years working as a staff nurse in the emergency department. But it is also some of the most rewarding work I have done. I am proud of my nursing

## What it means to me to be a member of the Nevada State Board of Nursing

### Words from the president

Doreen Begley, MS, RN



profession. I am proud to be a part of something that helps to keep the profession accountable for itself. As nurses, we have the responsibility to monitor ourselves to be the best we can be, to do the right thing, no matter what.

I am currently serving my sixth year on the Board, the second year of my second four-year appointment. Time has certainly flown by. Deciding to participate as a Board of nursing member is a huge decision. It requires the support of your employer and your family, as there is a significant amount of time necessary to participate fully as a contributing Board member.

One of my fellow Board members once commented about her eight years on the Board, "I never felt like I could take a vacation without first making sure it would not interfere with my Board responsibilities." I had never really thought about it in those terms, but she is right. In my six years, I have attended every meeting.

We must take the time to be prepared for each meeting, be thoughtful and deliberative during the meeting, and we must "show up" for each meeting. We expect to be exhausted after the meeting and must take pride in the work that we do on the Board.

For me, that's what it's like to be a member of the Nevada State Board of Nursing.

## Don't Submit A Fraudulent Application!

**If you swear you completed CEs, you must be able to prove you did if you're audited**

As it states on your renewal application, you must keep copies of your continuing training/education certificates for four years, in case you are selected for random audit. If you cannot prove you met the renewal requirements for nurses (30 continuing education credits) or CNAs (24 hours of continuing training/education), *your application will be considered fraudulent and you may be subject to disciplinary action.*

**Nurses:** the Board is also auditing for compliance with the one-time renewal requirement for a four-hour bioterrorism course. You must keep a copy of your bioterrorism certificate of completion indefinitely.

# The Board will have the hearing without you. . .

## OR

# Keep your address current with the Board to protect your rights.

By Fred Olmstead, General Counsel

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AT EVERY BOARD MEETING, nurses fail to appear at the scheduled disciplinary hearings. After Board staff sends a written Complaint and Notice of Hearing, and the Board counsel has prepared for a hearing to prove the allegations of the Complaint, the nurse does not attend the hearing to tell her side of the story. In these circumstances, the Board is left with virtually no choice but to take the allegations of the Complaint and Notice of Hearing to be true and hear the case without the participation of the nurse. If the allegations of the Complaint (taken as true) are a violation of the Nevada Nurse Practice Act (and they usually are), then the Board imposes the appropriate discipline. All of this occurs without the participation of the nurse because the nurse failed to appear to protect her rights.

Is this procedure overly harsh or unfair? Absolutely not. Any other procedure would not be protecting the public. For example, if a nurse could prevent the Board from hearing her disciplinary case merely by failing to appear, then every nurse who knew they were guilty of misconduct would probably choose not to appear so that she could avoid discipline. Clearly, the Board must hear the case, even though the nurse fails to appear. The Board must impose discipline and report that discipline to a national data bank so every other state board of nursing can learn of the nurse's behavior. Only in this way, can the Nevada State Board of Nursing protect the public of the United States from a nurse who is found guilty of violating nursing law. This is how the NSBN protects the public outside of our state if a nurse has a variety of licenses in different states.

Nevada Administrative Code 632.923 allows the Board to proceed with the hearing and to take the allegations of the com-

plaint to be true if a nurse fails to appear after the Board has provided proper notice to the nurse. The law requires Board staff to provide for due process before the Board can hear a disciplinary matter without the nurse present. That due process includes that Board staff properly provide "notice" to the nurse. But, what is this notice and what is required?

Nevada Revised Statute 632.350 provides that written notice of the Complaint and Notice of Hearing may be served by personal delivery (very, very rare) or by mailing it by certified mail to the nurse's last known residential address. Is that it? To notify a nurse that a disciplinary hearing will be taking place, all the Board staff has to do is to mail a copy of the Complaint and Notice of Hearing to the nurse's last known residential address? Yes, that is what the law requires. Consider this carefully — any other procedure would not protect the public because any other procedure would allow a nurse to avoid discipline by avoiding the notice of the hearing.

Where does Board staff get a nurse's "last known residential address"? Why, that is the address each nurse gives the Board upon initial licensure, on all renewals and whenever a nurse moves her residence. See NAC 632.205, which requires a nurse to file her current address with the Board. Now we are getting to the unfortunate aspect of the procedure that allows the Board to take the allegations of the Complaint to be true and proceed with the hearing when a nurse fails to appear. One of the reasons nurses fail to appear for the Board hearing is because they fail to keep their address current with the Board, and so, the nurse never receives the legal notice to appear before the Board.

Consider these facts:

Herman, RN, has a drug problem. He has been successfully stealing minor amounts of drugs from his employers for a while. He has discovered that if he takes assignments as a traveling nurse, he can travel to a new state, learn the pyxis machine passwords of his co-workers, steal some drugs and then be gone to a new assignment before he is caught. Herman has learned that facilities rarely report traveling nurses. Rather, the facilities merely tell the staffing agency not to send him back to their facility. True, the patients are hurt because Herman signs out the drugs of the pyxis machine under his and others' passwords and marks the drugs down as given to the patient . . . but the drugs are never given to the patient. Herman either uses them at work or takes them home to maintain his habit. His addiction and consequent denial allow him to discount the patients' pain and continue to divert their medications.

However, while on assignment in Nevada, RN Herman's actions are discovered by a vigilant nursing supervisor. Herman is terminated and is reported to the Nevada State Board of Nursing. During the investigation, Board staff review the pyxis reports, the Medication Administration Record, and the Nurses' Notes that clearly show that Herman has been diverting drugs and falsifying medical records. He knows what the evidence will show and chooses to ignore all legal notices sent by the NSBN staff telling him to appear before the Nevada State Board of Nursing. Herman ignores all notices from Board staff because he is now in Montana, and he never wants to go back to Nevada, anyway.

Another similar case:

Molly, RN who has always been a "good nurse" was also a traveler. She made

**continued on page 8 >>**



## Meet the Staff:

**Cindy Peterson, RN, CRRN, CLNC, CHCQM, FAIHQ**

**Sherri Twedt, RN, CLNC**

Cindy Peterson, RN, CRRN, CLNC, CHCQM, FAIHQ, and Sherri Twedt, RN, are the Board's newest employees. Peterson and Twedt both started working for the Board in August 2009.

Twedt graduated from Truckee Meadows Community College in 1992 with an Associate Degree in Nursing. Prior to coming to the Board, Twedt spent several years working for both Renown Regional Medical Center (formerly Washoe Medical Center) and Saint Mary's Regional Medical Center in their emergency departments.

When asked what she likes best about working for the Board, Twedt responded "the people I work with. We all work very hard towards the same goal of protecting the public."

Cindy Peterson, RN, CRRN, CLNC, CHCQM, FAIHQ, graduated from Brookdale Community College in Lincroft, NJ, with an Associate Degree in Nursing. Twedt is a

member of the National Alliance of Certified Legal Nurse Consultants

Peterson has 15+ years of experience in nursing including positions as relief charge nurse, staff nurse, home care nurse, and in utilization review and case management. Peterson has 9+ years of experience in utilization review

and case management, coming to the Board from Specialty Health MCO in Reno.

Peterson is a member of the Association of Rehabilitation Nurses, the National Alliance of Certified Legal Nurse Consultants, the American Board of Quality Assurance and Utilization Review Physicians and the National Association of Orthopedic Nurses.

Cindy enjoys the challenges of the position and the camaraderie and professionalism of the staff. She wanted to remind all nurses and CNAs "do your CEs on time, be current with your address and phone number with the Board." We welcome Cindy and Sherri as they begin this new endeavor in their professional nursing careers.

## Governor Reappoints Sandra Halley, Consumer Board Member

Governor Jim Gibbons recently reappointed Sandra Halley to the Nevada State Board of Nursing. Ms. Halley was serving the remainder of a term vacated by a previous consumer Board member. She returns to serve a full four-year term, having mastered the role of consumer member on our professional board. She brings a wealth of experience as a long time community volunteer and has utilized her unique consumer perspective in participating in the decision-making activities of the Board.

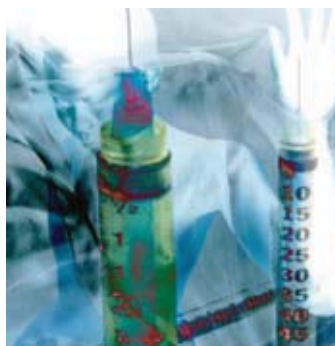
Halley brings a depth of understanding of the role of consumer of nursing services based on her experiences during her husband's terminal illness. She shares, "Having dealt with my husband's cancer for six years, I experienced such wonderful care from the nurses I encountered. I have so much respect for the profession. What could have been such a horrible experience was made as good as it could be because of the nurses who cared for my husband and our family. They've changed my life in such a positive way."

Halley expresses great pleasure in being "part of the great work" the Board does. Her commitment and dedication in working to protect the citizens of Nevada is invaluable to the Board. She has conquered the extremely steep learning curve that is required to be an active part of the Nevada State Board of Nursing.

We sincerely celebrate her reappointment to our Board and appreciate her enthusiasm and commitment to serving the citizens of Nevada.

**<<continued from page 6**

a small mistake involving trust. Molly didn't notice when another nurse watched and learned her pyxis password. The untrustworthy "bad nurse" removed drugs from the pyxis machine under Molly's password and, in an attempt to cover her tracks, falsified some of Molly's patient charts. Molly had no knowledge of the "bad nurse's" actions and so, after her assignment was over, Molly left to return to her home state. During her assignment, Molly had had no problems and had enjoyed her assignment in Nevada.



Pharmacy and administration eventually discovered the medication irregularities and a complaint was forwarded to the NSBN regarding Molly's alleged narcotic discrepancies, drug diversion, and falsification of medical records. No one, not even Molly, had been aware that someone else had used her password to remove the drugs. NSBN staff conducted an investigation and obtained the pyxis reports, Medication Administration record, and Nurses' Notes. On paper, it appeared that Molly diverted drugs and falsified records. Board staff informed Molly, RN of the investigation, by certified letter, to her address of record. However, Molly had since moved back to her home state after her assignment in Nevada and had failed to inform the NSBN staff of her new address. So, all of the notices sent to her were returned to the Board office.

At this point, as far as Board staff is concerned, what is the difference between Herman, RN who diverted drugs and fled the state and Molly, RN who was the victim of password theft, did nothing wrong, and who didn't respond to the Board because her address had changed? There is no difference between these two nurses. If neither nurse appears at their scheduled hearing, they will probably receive the same discipline based on the similarity of their actions.

How can this be? The answer has to do with KNOWLEDGE. As far as Herman's

story is concerned, all the Board knows is that he diverted drugs and falsified records. Imposing the appropriate discipline and then informing the national disciplinary database and/or the states where he holds a license will protect the public and hopefully keep him from practicing nursing, stealing drugs and harming patients again. The Board's actions would be based on the

KNOWLEDGE received from the pyxis reports, the MARs and Nurses' Notes. The Board's actions would also be based on the KNOWLEDGE that Herman did not appear at the hearing and therefore, he did not give any other explanation for the obvious conclusion that he diverted and falsified records.

Nobody would argue with these conclusions or that this line of thinking is improper.

It is the same for Molly, RN. The Board would have the KNOWLEDGE received from the pyxis reports, the MARs and Nurses' Notes. The Board's actions would also be based on the KNOWLEDGE that Molly did not appear at the hearing and therefore, she did not give any other explanation for the obvious conclusion that she diverted and falsified records.

This result seems unfair, because in this hypothetical example, we KNOW that Molly did not divert or falsify. But, who else knew these facts? Nobody. Nobody else knew these facts because Molly did not keep her address current with the Board, and she was therefore unable to protect her rights — to tell her side of the story.

If you are reading this article, then we are preaching to the choir, so to speak, because you probably received this issue of the NSBN News magazine at your address on record with the Board. Still, we must all learn that forfeiting our rights by, for example, failing to maintain a current address could result in the Board taking legal action against our license. Fair? It may not seem fair, but each of us has a responsibility to keep our address of record current with the NSBN. Make sure you don't forfeit your rights by being negligent in maintaining your current address with the Board.



## BOARD TALK

### BOARD MEETINGS

A seven-member board appointed by the governor, the Nevada State Board of Nursing consists of four registered nurses, one practical nurse, one certified nursing assistant and one consumer member. Its meetings are open to the public; agendas are posted on the Board's web site and at community sites.

### BOARD MEETING DATES

**January 13-15, 2010 – Las Vegas**

**March 17-19, 2010 – Reno**

**May 12-14, 2010 – Las Vegas**

**July 21-23, 2010 – Zephyr Cove**

**September 15-17, 2010 – Las Vegas**

**November 17-19, 2010 – Reno**

### ADVISORY COMMITTEES

The Nevada State Board of Nursing is advised by and appoints members to five standing advisory committees. Committee meetings are open to the public; agendas are posted on the Board's website and at community sites. If you are interested in applying for an appointment to fill an upcoming opening, please visit the Board's website or call the Reno office for an application.

### MEETINGS AND OPENINGS

The openings (listed in parentheses) will occur in the next six months. All meetings will be held via video-conference in Reno and Las Vegas.

Advanced Practice Advisory Committee dates

February 23, 2010      August 24, 2010

May 25, 2010      November 9, 2010

CNA Advisory Committee dates

January 28, 2010      July 15, 2010

April 22, 2010      October 21, 2010

Disability Advisory Committee (none)

April 23, 2010

Education Advisory Committee dates

February 5, 2010      August 20, 2010

April 16, 2010      October 15, 2010

Nursing Practice Advisory Committee dates

February 2, 2010      August 3, 2010

April 6, 2010      October 5, 2010

June 8, 2010      December 7, 2010

### COME TALK TO THE BOARD

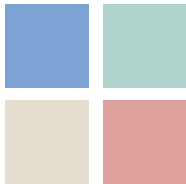
During each regularly scheduled meeting of the Nevada State Board of Nursing, Board members hold a Public Comment period for people to talk to them on nursing-related issues.

If you want to speak during the Public Comment period, just check the meeting agenda for the date and time it will be held. Usually, the Board president opens the first day of each meeting by inviting Public Comment. Time is divided equally among those who wish to speak.

For more detailed information regarding the Public Comment period, please call the Board.

### WE'LL COME TALK TO YOU

Board staff will come speak to your organization on a range of nursing-related topics, including delegation, the impaired nurse, licensure and discipline processes, and the Nurse Practice Act.



## YOU'RE IN GOOD COMPANY

### Active Nevada licenses/certificates on December 2, 2009

**RN** • 26,479    **LPN** • 3,249    **CNA** • 6,900

## MOVING?

Now you can  
change your  
address on line!

The law requires you to  
inform the Board when  
you change addresses

You're required by law to inform the Board, in writing, of any address change, including a zip code change. The easiest and fastest way for you to make your address change is to go to the Board's website and click on the Address Change link. You may also send an email to [nursingboard@nsbn.state.nv.us](mailto:nursingboard@nsbn.state.nv.us), call the Board and request an address change form, or mail a signed letter to the Las Vegas office. Remember to include your name, license or certificate type and number, former address, and current address.

### CHANGE OF ADDRESS FORM

▲ NAME (LAST, FIRST, MIDDLE) ▲

▲ TYPE OF LICENSE ▲

▲ LICENSE NUMBER ▲

▲ DATE OF BIRTH ▲

▲ FORMER ADDRESS ▲

▲ CITY, STATE, ZIP CODE ▲

▲ CURRENT ADDRESS ▲

▲ CURRENT ADDRESS ▲

▲ CITY, STATE, ZIP CODE ▲

▲ TELEPHONE # ▲

▲ SIGNATURE ▲

Mail to: Nevada State Board of Nursing  
2500 W. Sahara Ave. #207  
Las Vegas, NV 89102-4392



# Your Questions, *Our Answers*

Every day, the Board receives calls and emails regarding scope of practice, and licensure/certification issues. Providing information you need to practice safely is a key function of the Board, but did you know that most of the information you need is available to you 24 hours a day, seven days a week on the Board's website?

The Nurse Practice Act (NPA), the Board's practice decisions, and the Determining Your Scope of Practice Decision Tree specifically address most of the questions received by the Board and are the same tools used by staff to respond to your questions. In addition, applications for licensure and certification are available on the website and include instructions that may answer many of your questions.

Here are answers to some of the ques-

tions frequently asked of the Board ...

**If I download the application online, how do I get the fingerprint cards and do I have to pay the fingerprint fee in order to have the cards sent to me?** Staff will automatically send you fingerprint cards and you do not need to pay the fee to receive them.

**Can I fax my renewal or initial application to the Board? Do I need to follow-up with a hard copy in the mail?** Yes, you can fax the application to either office of the Board along with a valid credit card (Visa, Mastercard, Discover or American Express) for payment. You do not need to mail the hard copy to the Board.

**Where do I obtain continuing education (CE), and how do I know if my CE provider is approved?** There are numerous CE providers. Check with your employer for

resources, or look on the Internet and in professional magazines. The NPA lists the requirements for an approved CE provider beginning under NAC 632.340, and the Board's website has a link on the home page for continuing education.

**If I renew online, how do I submit my CE certificates to the Board?** You don't unless you are specifically audited or requested by the Board to do so. The Board conducts random audits monthly. All nurses and nursing assistants are required to retain CE certificates for four years: 30 CEs and a one-time mandatory four hour CE bioterrorism course for nurses, and 24 CEs and 40 hours of employment for CNAs. See the website for specific requirements of the mandatory bioterrorism course.

**How often is the web verification updated to reflect a new license/certificate or a renewal?** The database is updated every day and new information will be available online generally within 24 hours (except weekend renewals) for verification.

**How do I place my license on "Inactive" status, and what is the fee?** A written  
continued on page 14>>



## 2010 INTERNATIONAL YEAR OF THE NURSE: A CELEBRATION

2010 IYNurse, in recognition of the United Nations Millennium Development Goals (MDGs), seeks to recognize the contributions of nurses globally and to engage nurses in the promotion of world health.

2010 is also the Centennial Year of the death of modern nursing's founder — Florence Nightingale (1820-1910). To celebrate this historic milestone, the 2010 IYNurse is planned as a sustained public awareness initiative to actively involve the world's nurses — estimated to be more than 15 million — in a celebration of commitment to bring health to their communities worldwide.

### UN Millennium Development Goals

1. Eradicate extreme poverty and hunger.
2. Achieve universal primary education.
3. Promote gender equality and empower women.
4. Reduce child mortality.
5. Improve maternal health.
6. Combat HIV/AIDS, malaria and all communicable and noncommunicable diseases\*
7. Ensure environmental sustainability.
8. Develop a global partnership for development.

\*2010 IYNurse joins the worldwide call for including this language in MDG #6.



© UNDP Brazil

## HOW YOU CAN BE INVOLVED

- Share your stories and photos of nurses who make a difference through promoting world health.
- Post your 2010 IYNurse events on the global calendar at [www.2010IYNurse.net](http://www.2010IYNurse.net).
- Increase public and government awareness about health issues — with a focus on the UN MDGs.

For More Information: [www.2010IYNurse.net](http://www.2010IYNurse.net)

### Suggestions for Celebrations & Activities

Workshops & Related Education Projects  
Blogs & Webcasts  
Press Releases, Press Kits & Briefings  
Newspaper Human Interest Stories  
Radio & TV Talk Shows  
Cultural Shows

Banquet & Picnic Events  
Cathedral & Interfaith Events  
State & Provincial Capital Events  
Community Health Events  
Fundraising Events  
Hospital & Clinic Events

Job Fairs & Recruitment Events  
Nightingale Award Events  
Related Award Events  
Sister-Cities Events  
University & College Events

### Founding Organizations

Honor Society of Nursing, Sigma Theta Tau International (STTI)  
Nightingale Initiative for Global Health (NIGH)  
Florence Nightingale Museum (FNM) London

[www.2010IYNurse.net](http://www.2010IYNurse.net)

## LPN BOARD MEMBER POSITION OPEN

The Nevada State Board of Nursing is a seven-member Board consisting of four registered nurses, one licensed practical nurse, one certified nursing assistant, and one consumer member. Below is a list of current members. If you are a Licensed Practical Nurse who has lived in the state of Nevada for at least two years and you wish to be considered for a four-year appointment, please visit <http://gov.state.nv.us/Administrative.htm> for an application form to submit to the Governor's office. You may also contact the Governor's office at (775) 684-5670.

## Haven't Practiced For Five Years?

### ***Nurses must take a refresher course***

According to NAC 632.192 (4): ***An applicant for renewal of a license who has not practiced nursing during the immediately preceding five-year period must complete a course or program approved by the board if he has otherwise satisfied the requirements for renewal set forth in this chapter and chapter 632 of NRS.***

For more information and a list of approved refresher course providers, please visit the Board's website or call the Board office.

# NATIONAL CERTIFICATION TO BE REQUIRED FOR APNs IN NEVADA

The Board's Advanced Practice Advisory Committee has been discussing adding national certification as a requirement for certification in Nevada for advanced practitioners of nursing. Currently, the requirements for certification in Nevada include the following:

- If the applicant completes a program designed to prepare an advanced practitioner of nursing on or after July 1, 1992, he must be certified as an advanced practitioner of nursing by a nationally recognized certification agency or hold a bachelor's degree in nursing from an accredited school.
- If the applicant completes a program designed to prepare an advanced practitioner of nursing on or after June 1, 2005, he must hold a master's degree in nursing or in a related health field approved by the Board.
- If the applicant is applying for licensure/certification in Nevada and has been certified as an APN in another jurisdiction, he must have maintained the licensure/certification in good standing and complied with the requirements for continuing education of that state or jurisdiction.

At its November 2009 meeting, members of the Nevada State Board of Nursing discussed options about whether or not to require national certification for APNs who are already certified by the Board in Nevada. In addition, they discussed whether or not APNs

who are seeking licensure/certification in Nevada from another state should be required to be nationally certified to practice in Nevada.

Upon clarifying the issues involved, the Board agreed that the requirement for national certification for APNs in Nevada shall only apply to individuals who complete a program designed to prepare an advanced practitioner of nursing after June 1, 2014. This requirement will apply to nurses who are currently licensed and certified in Nevada and to those who apply for licensure/certification in the future, either for initial certification or licensure/certification by endorsement. In other words, the Board decided to "grandfather" all APNs who graduate from their education program before June 1, 2014, and not require national certification for those individuals.

The Board is currently beginning the process of writing regulations to this end. The Board will conduct public workshops in the near future to hear public testimony related to this and other pending regulations. Once public workshops are completed, all information gathered at the workshops will be presented to the Board who will consider the proposed regulations at a public hearing.

All those interested in giving public testimony should watch the Board's website, [www.nursingboard.state.nv.us](http://www.nursingboard.state.nv.us), for legal notice of both the workshops and the hearing of the regulations. Please make your opinions known so that the Board can make an informed decision.

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request via email, letter or fax to place your license on "Inactive" status must be received on or before your current license expiration date, and there is no fee. CNAs are not eligible for "Inactive" status. If you place your license on "Inactive" status online in error, you are required to submit a paper application to change your status to "Active."

How do I update my contact information with the Board so I will receive mail and the Nursing News magazine? The NPA states you must notify the Board of any change in your address within 30 days after the change. You can do this on the website, or in writing via fax, email or mail. Address changes are never accepted via telephone.

I want to start a CNA training program in my facility, how do I go about it? Contact the Board office and you will be transferred to the appropriate staff that will assist you.

Can I refuse an assignment that I think is unsafe, and how do I do it? Can I lose my license/certificate or my job if I refuse an assignment? The Board has never disciplined a nurse/nursing assistant for properly refusing an assignment they determine is unsafe or they are unqualified to perform. The most frequent issue is whether the

nurse abandoned patients. Patient abandonment is defined in the NPA under NAC 632.895(6). The Board has no jurisdiction over employment issues, and you may lose your job if you refuse an assignment; however, if done properly you will not lose your license/certificate. An unsafe assignment is a unique situation defined by the nurse related to her knowledge, skills and competency.

What is the RN's role in supervising unlicensed personnel such as unit clerks, EKG techs, etc? The NPA clarifies supervision under NAC 632.222 and .224. Nurses may assign tasks and supervise unlicensed personnel while maintaining accountability for appropriate assignments. Appropriate assignment of tasks includes the nurse being aware of the unlicensed person's job description, their competency to perform the tasks, and the policies of the facility.

Are LPNs allowed to do a dressing change involving a wound vac? Follow the Determining Your Scope of Practice Decision Tree. Some LPNs may have the documented training and competency to perform the procedure, while some may not. In addition, there must be facility policies and procedures that allow it.

Are CNAs working for a home health

agency allowed to pick up medications at a pharmacy and deliver them to a patient's home? No. Medications are not within the CNA scope of practice. The CNA Skills Guidelines that outline the CNA scope of practice are available on the Board's website.

I have been told a CNA can't do private duty. Why? A CNA practices only under the direction of a licensed nurse and may not work independently. The CNA must name the nurse who will attest to this supervised practice and provide the nurse's license number on the CNA renewal application. Licensed nurses supervising CNAs must provide this information to them for submission to the Board.

I have not practiced as a RN or LPN for more than five years, what do I need to do to renew my license? You must take a Board-approved nursing refresher course to be eligible to renew. See NAC 632.192 (4) in the NPA.

Where can I find out how many nurses are licensed in Nevada? The Board publishes an annual report that includes statistical information on nurses and nursing assistants, education programs, and investigation and discipline. These reports are published on the website.



Have a question?  
Give us a call.

Nevada State Board of

# NURSING NEWS

## ADMINISTRATION

5011 Meadowood Mall Way, Suite 300, Reno, NV  
89502, 888-590-6726  
nursingboard@nsbn.state.nv.us

### **Debra Scott, MSN, RN, FRE,**

*Executive Director*

Statewide Liaison and Spokesperson  
Organizational and Public Management  
Fiscal and Human Resource Management  
Legislative and Governmental Relations  
APN Advisory Committee Chair  
Nursing Practice Advisory Committee Chair

### **Chris Sansom, BSN, RN, Director of Operations**

Program Management  
CNA Advisory Committee Chair

### **Fred Olmstead, General Counsel**

Legal Counsel

### **Dean Estes, Director of Finance/Technology**

Budget, Accounting and Payroll  
Technology Support  
Programming  
Website

### **Roseann Colosimo, PhD, MSN, RN, Education**

*Consultant*

Nursing Education Programs  
CNA Training Programs  
Continuing Education Programs  
Education Advisory Committee Chair  
Advanced Practice and International Graduate  
Document Analysis

### **Patty Shutt, LPN, Site Operations Supervisor**

Las Vegas Site Supervision  
Advanced Practice Certificate Processing

### **Marianne Kadlic, Executive Assistant**

Assistant to the Executive Director  
Scheduling  
Board Meeting Agenda and Arrangements

## SUPPORT STAFF

### **Christie Dalipson, Management Assistant**

Assistant to the Director of Operations  
Discipline Investigative Support  
Compliance Support  
Board Meeting Preparation  
Disability Advisory Committee Scheduling  
Nursys Data Entry

### **Adela Smith, Assistant to the Director of Finance/ Technology**

Initial and Renewal Applications  
Financial File Management  
Nursing Personnel Lists  
Spanish-Speaking Services for Consumers

### **Cyndie Souza, Management Assistant**

Discipline Investigative Support  
Yes Answer and Fraudulent Application Processing  
Endorsement Forms  
Board Meeting Preparation  
Nursys Data Entry

## PROGRAM STAFF

5011 Meadowood Mall Way, Suite 300,  
Reno, NV 89502, 888-590-6726

2500 W. Sahara Ave., Suite 207, Las Vegas, NV  
89102, 888-590-6726

nursingboard@nsbn.state.nv.us

## INVESTIGATIONS AND MONITORING

### **Linda Aure, BSN, RN-BC, Senior Investigator**

Complaint Investigations  
Nursing Practice Questions

### **Amy Clark, BSN, RN, Application Coordinator**

Application Review  
Fraudulent Application Screening

### **Cindy Peterson, RN, CRRN, CLNC, CHCQM, FAIHQ, Investigator**

Complaint Investigations  
Nursing Practice Questions

### **Kathleen Reynolds, BHS, RN,**

*Compliance Coordinator*

Disability Advisory Committee Chair  
Disability Advisory Committee Scheduling  
Probation and Alternative Program Monitoring  
Reinstatement Applications

### **Sherri Twedt, RN, CLNC, Investigator**

Complaint Investigations  
Nursing Practice Questions

## LICENSURE/CERTIFICATION

### **Sarah Bowen, Licensure Specialist**

Licensure Eligibility Questions  
Endorsement and Examination Applications  
Continuing Education Providers  
International Nurse Graduates and Licensure  
Issues  
RN/LPN CEU Audits

### **Patty Towler, Senior Certification Specialist**

CNA Registry Maintenance  
CNA Certification and Renewals  
CNA Program and Instructor Approvals  
Certification Audits (CNA, APN, CRNA)

## SUPPORT

### **Ariadna Ramos, Program Assistant**

Endorsement Applications  
Licensure Eligibility Questions  
Spanish-speaking Services for Consumers  
Program Support of Licensure and Certification

### **Gail Trujillo**

### **Jeannette Calderon**

### **Tammy Schaffer - Receptionists**

Renewal Applications  
Program Support  
Inquiries, Information and Referrals  
Licensure and Certification Applications



### **Doreen Begley, MS, RN**

President, RN Member  
Term expires 10/31/12



### **Betty Carlgren, LPN**

LPN Member  
Term expires 10/31/09



### **Carrie McMurray, CNA**

CNA Member  
Term expires 10/31/11



### **Patricia "Tish" Smyer, DNSc, RN**

Vice President, RN Member  
Term expires 10/31/12



### **Belen Gabato, MS, RN**

RN Member  
Term expires 10/31/11



### **Kelly Espinoza, MSN, RN**

Secretary, RN Member  
Term expires 10/31/12



### **Sandra Halley**

Consumer Member  
Term expires 10/31/13

**Board  
Members**

Nevada State Board of Nursing  
5011 Meadowood Mall Way, Suite 300  
Reno, NV 89502-6547

