Nevada State Board of Nursing

Fiscal Year 2017/2018

ANNUAL REPORT

MISSION

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

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ABOUT THE BOARD

BOARD MEMBERS

Deena McKenzie, MSN, RN, CNML
President, RN Member

Jacob Watts, CNA
Secretary, CNA Member

Ovidia McGuinness, LPN
LPN Member

Richelle O'Driscoll
Consumer Member

Susan VanBeuge, DNP, APRN, FNP-BC, CNE, FAANP
Vice President, RN Member

Rhigel "Jay" Tan, DNP, APRN, RN
RN Member

Mary-Ann Brown, MSN, RN
RN Member

As of October 2018

The Nevada State Board of Nursing was established in 1923 by the state legislature to regulate the practice of nursing. The seven-member Board appointed by the governor consists of four registered nurses, one practical nurse, one certified nursing assistant and one consumer member. Currently, the Board appoints and receives recommendations from six standing committees. The Board also appoints a Nevada licensed registered nurse to serve as the Executive Director.

The Board's regulatory responsibilities have evolved to keep pace with innovations in nursing practice thereby enhancing public protection by ensuring licensees and certificate holders practice in a safe, competent and ethical manner. The Board's functions include:

Administration

- Establishing and maintaining minimum practice standards.
- Developing and adopting regulations.
- Utilizing Board appointed advisory committees to ensure stakeholder input.
- Conducting outreach and providing education through publications, presentations and social media.
- Collaborating with consumers, individual groups, organizations, and other regulatory agencies.

Education, Licensure, and Certification

- Approving schools of nursing and nursing assistant and medication-aide certified training programs.
- Adopting exams for licensure/certification.
- Licensing advanced practice registered nurses, registered nurses, and licensed practical nurses.
- Issuing certificates to nursing assistants and medication-aides certified.
- Certifying registered nurse anesthetists and emergency medical service registered nurses.
- Approving education/training providers for ongoing competency.

Investigation and Compliance

- Investigating complaints against licensees and certificate holders alleging violations of the Nurse Practice Act.
- Conducting disciplinary proceedings.
- Administering remediation and rehabilitation programs including:
  - Monitoring licensees and certificate holders who are on disciplinary probation.
  - Administering the Board’s alternative program for nurses and CNAs recovering from substance use disorders.

MESSAGE FROM THE PRESIDENT AND EXECUTIVE DIRECTOR

Deena McKenzie
MSN, RN, CNML
BOARD PRESIDENT

Cathy Dinauer
MSN, RN
EXECUTIVE DIRECTOR

MESSAGE FROM THE PRESIDENT AND EXECUTIVE DIRECTOR

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

This year, the focus for the Nevada State Board of Nursing (NSBN) was the implementation of our new computer program. The official name of the program, Optimal Regulatory Board System (ORBS) is a web-based service which requires a portal for access. Most nurses have become familiar with the system, fondly known as the "portal". The system was developed by the National Council of State Boards of Nursing (NCSBN) and offered to its member boards at no charge. NSBN'S current program was becoming antiquated and unreliable, so the Board and board staff needed to seek other systems.

Preparing for this launch took several years. It required a complete overhaul of the NSBN IT infrastructure. Nevada was the first state to go-live with this version of ORBS with several states in various stages of implementation.

The web-based program allows for complete digitization of our processes and eliminates the need for paper applications. Nurses and CNAs create a portal account electronically that allows for communication with board staff via the message center. The portal also allows nurses to upload documents directly into their account via the message center, such as continuing education certificates or complete an address and name change.

As with any new IT system, we understand there will be frustrations and challenges in using a new system. Board staff is continuing to work with NCSBN to improve workflow to ensure a smooth transition for all nurses and CNAs in Nevada.

This year has been one of growth and change for Nevada's nurses, who also rose to the occasion on October 1, 2017. This day will be etched in every Nevadan's mind as one of the worst mass shootings in United States history. Thankfully Nevada's nurses worked diligently to take care of the injured even while putting their own safety at risk. Thank you to all nurses for the work that you do to ensure safe delivery of care.

Deena McKenzie, MSN, RN, CNML
PRESIDENT, BOARD OF NURSING

Cathy Dinauer, MSN, RN, FRE
EXECUTIVE DIRECTOR

ORGANIZATIONAL STRUCTURE

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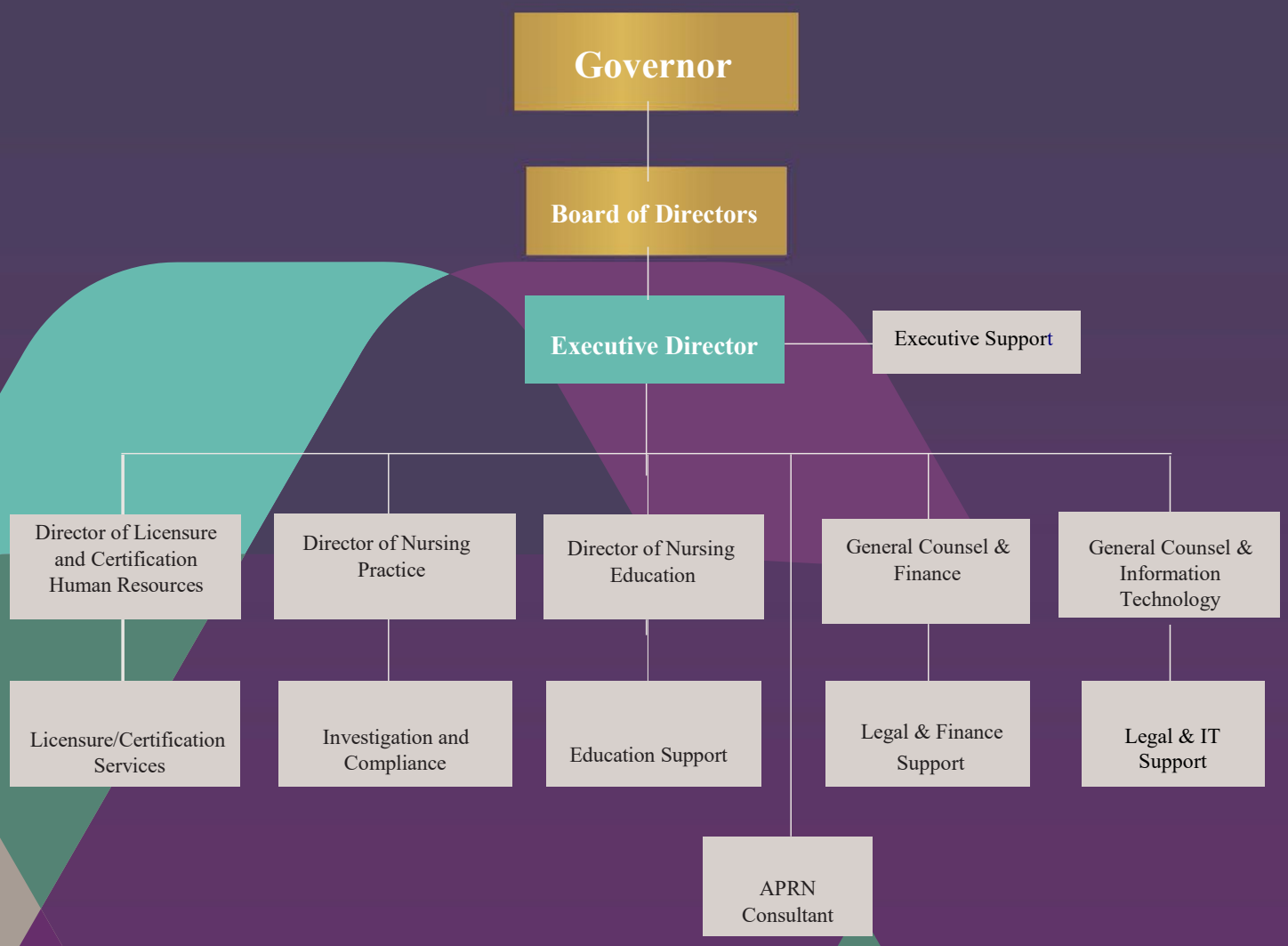


STAFF

As of October 2018

Executive Director

Cathy Dinauer, MSN, RN, FRE

Executive Staff

Fred Olmstead, Esq. General Counsel, Accounting

Kimberly A. Arguello, Esq. General Counsel, Information Technology

Sam McCord, BSN, RN Director of Nursing Practice

Catherine Prato-Lefkowitz, PhD, MSN, RN Director of Nursing Education

Gail Trujillo, CP Director of Licensure and Certification, Human Resources

Sharon Vincello, JD Executive Assistant

Program Staff

Investigations and Monitoring

Sheryl Giordano, DNP, APRN-C APRN Consultant/Investigator

C. Ryan Mann, MSN, RN Application Coordinator

Sherri Twedt, BSN, RN, LNC Compliance Coordinator

Ray Martinez Investigator

Cindy Peterson, RN, CLNC, CHCQM Nurse Investigator

Elaine Ralph, BSN, RN Nurse Investigator

Licensure and Certification

Ariadna Ramos Zavala Program Assistant

Patty Towler Licensure/Certification Coordinator

Sandy Webb Program Assistant

Support

Vickey Alvarez Senior Accountant

Courteney Baccei Management Assistant

Jeannette Calderon Education Support Specialist

Christie Daliposon Discipline Support Specialist

Rhoda Hernandez IT Technician

Stacy Hill Management Assistant

Cydnee Cernas Management Assistant

Customer Service Representatives

Gretchen Caldwell

Cherlyta Rhino

Marsalena Rosborugh

REPORT ON THE OPERATIONS OF THE BOARD

STRATEGIC GOALS ESTABLISHED BY THE BOARD

- Promote a culture of safety for consumers of health care.
- Provide leadership in legislative processes related to health care and nursing.
- Conduct consumer and nurse outreach.
- Promote and collaborate in nursing education, practice and research for evidence based regulation.
- Emphasize transparency of communication and information.
- Support effective utilization of information technology.
- Participate in and promote state, national and global nursing regulatory initiatives.

Protection of the public is at the forefront of all of the Board's decision making processes. The Board continues to remove unnecessary regulatory barriers to practice to facilitate a robust nursing workforce in Nevada.

STATE WIDE EDUCATION AND OUTREACH

Board members and staff continue to seek opportunities to educate nurses, nursing students, nursing assistants, instructors and educators, employers, nurse leaders and other health care stakeholders on regulatory matters affecting nursing practice in Nevada. Board members and staff provided several presentations on topics including substance use disorder and addiction, nursing regulation, APRN scope of practice issues and the nursing compact.

The board publishes the Nevada State Board of Nursing News magazine quarterly, at no cost to the board, with news and information about Board actions, regulations, and activities with hard copies mailed to all schools of nursing, hospitals, and health care facilities across the state. An ePublication of the current and of past issues of the Nursing News magazine are also available on the board's website.

PROFESSIONAL AND COLLABORATIVE RELATIONSHIPS

Board staff continue to participate in national and statewide committees, task groups and meetings including the Occupational Licensing Consortium, the Governor's Opioid Taskforce, NCLEX committee and NCLEX item review committee,

Board staff work collaboratively with other state and national regulatory agencies and healthcare and nursing organizations including, the National Council of State Boards of Nursing, the Nevada Nurses Association, The Western Regional Advanced Practice Nurses Network, the Nevada Advanced Practice Nurses Association, the Nevada Organization of Nurse Leaders, the Nevada Action Coalition and the Nevada Hospital Association. The board is committed to establishing and maintaining these valuable relationships that further public protection.

NURSING EDUCATION PROGRAMS

The Board of Nursing has jurisdiction over nursing education and training programs that prepare students for initial nursing licensure or CNA certification. Every program application is reviewed by the Board in accordance with requirements established by Nevada Revised Statutes (NRS) and Nevada Administrative Code (NAC) regulations. The Board maintains jurisdiction, oversight and conducts periodic reviews of existing programs. Board oversight and collaboration with these programs enhances competencies of newly graduated nurses and nursing assistants caring for Nevada citizens.

FY 17/18 Nursing Programs:

- 12 – Fully approved nursing programs in Nevada.
- 1 – Approved to conduct only the clinical portion of their program in Nevada.
- 1 – Provisional or Conditional approval*

FY 17/18 Nursing Examination Pass Rates:

The Board annually adopts the National Council Licensure Exam (NCLEX) exam as determined by National Council of State Boards of Nursing as the official competency examination for registered nurse (RN) and practical nurse (LPN) licensure in the state of Nevada.

- Nevada NCLEX-RN average pass rate 92.0%
- National NCLEX-RN average pass rate 87.11%

- Nevada NCLEX-PN average pass rate 88.71%
- National NCLEX-PN average pass rate 83.84%

FY 17/18 Nursing Assistant Examination Pass Rates:

The Board of Nursing has adopted the Headmaster, LLC examination as the official competency examination for nursing assistant certification (CNA) in Nevada. There are two components to the examination, a written exam and a skills exam. Both components must be passed to qualify for a CNA certificate in Nevada.

- Written Exam – Nevada pass rate 79%
- Skills Exam – Nevada pass rate 75%

* *Schools that have provisional approval meet the initial requirements of Nevada laws and regulations to offer a program of nursing education in Nevada. To obtain full approval, they must gain national accreditation (which they cannot do until after their first class is graduated), and they must achieve a first- time pass rate of 80 percent or higher on the NCLEX (an annual average).*

* *Graduates from a school that has provisional rather than full approval will be eligible for Nevada licensure; however, graduates will have to check with other states regarding their licensure requirements.*

* *Schools that have conditional approval meet requirements for full approval but have not maintain a first- time pass rate of 80 percent or higher on the NCLEX for two consecutive years.*

NURSING EDUCATION PROGRAMS - continued

Total Number of Degrees, Diplomas or Certificates Awarded from Nevada Nursing Programs

Graduates from Nevada Nursing Programs (post licensure and graduate programs are not regulated by the Board)	**FY 15/16**	**FY 16/17**	**FY 17/18**
PhD - University of Nevada, Las Vegas	7	4	3
DNP - University of Nevada, Las Vegas	*	*	5
DNP - University of Nevada, Reno	17	16	10
Post MSN certificate - University of Nevada, Las Vegas	1	*	*
Post MSN certificate - University of Nevada, Reno	7	7	2
MSN - University of Nevada, Las Vegas	22	35	30
MSN - University of Nevada, Reno	35	32	25
RN to BSN - Great Basin College	27	23	11
RN to BSN - Nevada State College	51	40	58
RN to BSN - University of Nevada, Reno	19	22	23
BSN- Arizona College	*	*	3
BSN- Chamberlain University	*	15	91
BSN - Nevada State College	78	99	177
BSN - Roseman University	166	163	218
BSN - University of Nevada, Las Vegas	128	132	126
BSN - University of Nevada, Reno	125	126	125
AAS - Altierus Career College formerly Everest College	39	24	57
AAS - Carrington College, Reno	94	124	101
AAS - College of Southern Nevada	174	195	195
AAS - Great Basin College	16	26	26
AAS - Truckee Meadows Community College	43	57	52
AAS - Western Nevada College	43	45	41
LPN - Brightwood College	48	63	49
LPN - College of Southern Nevada	23	13	21
Total	**1,163**	**1,246**	**1,449**

* No information is available

Post licensure and graduate programs are not regulated by the Board.

COMMITTEES

COMMITTEES

Board Advisory Committees

Committee meeting dates, agendas and minutes are available for review on the board's website or by calling the board to request a hard copy

ADVANCED PRACTICE REGISTERED NURSE COMMITTEE

"The mission of the Advanced Practice Registered Nurse Advisory Committee is to advise Nevada State Board of Nursing on matters or issues related to advanced nursing practice."

Sheryl Giordano, DNP, APRN-C, APRN Consultant/Investigator - Committee Chair

Members:

Aaron Bellow Jr., PhD, RN, APRN, FNP-BC

Pamela Burgio, MSN, RN, APRN, PNP

Paul Kapsar Jr, MSN, RN, APRN, FNP-BC

Rhone D'Errico, MSN, APRN-BC, FNP-C, PMHNP-BC

Cheryl A. Maes, PhD, MSN, APRN, FNP-BC

Teresa Praus, MSN, APRN, FNP-BC

Patricia Strobehn, MSN, APRN, FNP-BC

Maileen Ulep-Reed, MSN, APRN, FNP-BC

Jeanine Packham, DNP, ACNP-BC, CCRN-CMC, PHN

Significant matters referred to the committee included:

- Created a work group for the revision of Scope of Practice Decision Tree
- Review SB227, signature authority implementation on certain forms
- Review AB105 suicide prevention and mandatory continuing education (CE) requirements
- Review AB474 implementation requirements and mandatory CE – dispensers/prescribers
- Update APRN audit procedure

CNA AND MA-C ADVISORY COMMITTEE

*A committee with its membership defined by statute (NRS 632.072) to advise and make recommendations to the Board on matters relating to nursing assistants and medication aides-certified.**

Catherine Prato-Lefkowitz, PhD, MSN, RN - Committee Chair

Members:

- Tracy Gentry, CNA - CNA Member
- Rhonda Meyer, RN - Division of Health Care Financing and Policy
- Carole Wiseman, RN - AARP Member
- Carla Wright, MSNed, RN - RN Member, Work Group Chair
- M. Jeanne Hesterlee, RN - Bureau of Health Care Quality and Compliance
- Robert Kidd, Long Term Care
- Jennifer Williams-Woods, Division of Aging Services

Significant matters referred to the committee included:

- Evidenced-based review of current faculty ratio regulation
- Facilitate utilization of national best practices by faculty
- Facilitate collaborative faculty/ facility partnerships
- Assess the use of electronic databases to consolidate clinical paperwork to facilities and streamline education programs and facility interface
- On-going review of simulation in Nevada nursing programs

Certified Nursing Assistant Advisory Committee Description

The Certified Nursing Assistant Committee is developed by statue (NRS.632.072). The CNA Advisory Committee consists of 11 members representing a specific area of expertise. For example, there is a member from the Bureau of Health Care Quality and Compliance, and a member from Long-term Care, a certified nurse assistant, a representative of medical facilities which provide acute care, a representative of agencies to provide nursing care in the home, a representative from the Division of Aging Services and a representative of the American Association of retired Persons (AARP). The focus of this Committee is to identify and discuss any issues related to CNA practice in Nevada. There is a sub-group of the CNA Committee which identifies the CNA programs who are not teaching to the 80% passing requirement on the CNA State Certification Examination administered by Headmaster. The subcommittee reaches out to those programs to offer support in terms of tools or workshops available to help them become more effective programs. The CNA Committee reviews the Headmaster year-to-date scores and discusses any areas that are determined to be weak. For example, the committee identified that the lowest performing skill in Nevada on the test is the manual blood pressure skill. Interventions have been discussed by committee members on how to increase this skill passing rate. Another charge of the committee is to review potential CNA programs wishing to be established in Nevada. The potential CNA programs come before the committee to introduce their program and feedback is given so the programs are successful. A highlight of last year was that the committee identified that many high school students were not taking the Headmaster certifying examination due to financial hardships. The Office of Workforce Innovation (OWINN), through the Governor's office, has provided all testing fees to be provided to high school CNA students. This funding has been distributed so the students graduating in the Fall of 2019 will have access to those funds. There should be an uptick increase of high school students testing in the future.

** Medication-aides certified were created by statute (NRS 632.291) in 2011. No MA-C's have been employed in Nevada and there are none currently certified in Nevada.*

DISABILITY ADVISORY COMMITTEE

Advises and makes recommendations to the Board on matters related to substance use disorder in nursing and/or mental health issues that may impair nursing practice

Sherri Twedt, RN, LNC – Committee Chair

Active Members:

Richard Angelastro, MSN, RN

Rebecca Gebhardt, APRN, FNE

Susan Hubbard, MS, BS,RN

Peggy Cullum, BSN, RN

Beth Kiehn, APRN

Susan O'Day, MSNed, RN, CPAN

Toril Strand, BA, RN-C

Activities of the committee included:

- Recommendations regarding drug testing participants in monitoring/probation programs
- Review, revision, and recommendation for changes in criteria related to stipulations in monitoring/probation programs

EDUCATION ADVISORY COMMITTEE

Advises and makes recommendations to the Board with regard to matters relating to education and continuing education of nurses and nursing assistants.

Catherine Prato-Lefkowiz, PhD, MSN, RN - Committee Chair

Members:

Kimberly Baxter, DNP, APRN, FNP-BC

Mary Chalfant, MS, RN

John Coldsmith, RN, MSN, DNP, NEA-BC

Irene Coons, PhD, RN, CNE

Judith Cordia, EdD, RN

Jody Covert, MSN, RN

Amber Donnelli, PhD, RN, CNE

Josh Hamilton, DNP, RN-BC, FNP-C, PMHNP-BC, CNE

Patricia Gatlin, PhD, RN, CNE

Andrea Highfill, MSN, RN

Judith Hightower, PHD, Med, RN

Julia Millard, MSN, RN

Branden Murphy, BSN, RN, CPN

Brian C. Oxhorn, PhD, RN

Marianne Tejada, DNP, MSN, RN, PHN

Education Advisory Committee Description

The Education Advisory Committee (EAC) is comprised of educators throughout Nevada whose charge is to identify issues affecting nursing education in Nevada. The EAC reviews all year-to-date NCLEX scores, reviews applications for all potential nursing programs wishing to enter the state, and provides feedback and perspectives on issues and potential challenges Nevada nursing programs are facing. There are a few workgroups through the EAC that work together to find evidence based interventions for issues affecting Nevada education. The workgroups are charged with enhancing clinical and faculty partnerships in Nevada, creating Nevada specific simulations for all Nevada nursing programs, creating online modules for new clinical faculty to view to help introduce them to the clinical teaching environment, and identifying evidence based movements throughout the nation which could affect Nevada nursing programs. The EAC members continue to work together to ensure Nevada nursing students are receiving high quality education so the graduates can meet the needs of Nevada residents.

Significant matters referred to the committee included:

- Evidenced-based review of current faculty ratio regulation
- Facilitate utilization of national best practices by faculty
- Facilitate collaborative faculty/ facility partnerships
- Assess the use of electronic databases to consolidate clinical paperwork to facilities and streamline education programs and facility interface
- On-going review of simulation in Nevada nursing programs

NURSING PRACTICE ADVISORYCOMMITTEE

Advises and makes recommendations to the Board with regard to matters relating to establishing and maintaining scope of practice for nursing in Nevada

Sam McCord, BSN, RN, Director of Nursing Practice – Committee Chair

Members:

Mary Brann, MSN, RN

Jessica Carlson, MSN, Ed., Phd ABD, RN

Mary Field, BSN, RN

Marilyn Jeanne Hesterlee, RN

Greg Highfill-Nursing student

Laura Kennedy, BSN, RN, MBA

Leanna Keith, MSN, RN

Chelsea Minto, BSN, RN, CNML

Lori Roorda, BSN, RN-BC, CEN, CCRN

Anne Patriche, BSN, RN, CHPN

Abbie Purney, MSN, APRN, CCNS

Nursing Practice Advisory Committee Description and Accomplishments

The Nursing Practice Advisory Committee (NPAC) advises and reports to the Board on matters related to the establishment of state standards of nursing practice. The committee consists of at least 10 persons who are knowledgeable in all areas of general nursing practice in Nevada and trends in national nursing practice.

The NPAC met on all scheduled dates for FY 17/18, a quorum was met at every meeting. The committee added three new members that contributed the broad range of practice knowledge and clinical experience so necessary to the committee's effectiveness. Four members completed their terms on the committee. The membership to date stands at 11 and met the regulatory requirement mandating at least 10 members without exception throughout FY 17/18.

The activities, actions and accomplishments of the NPAC for FY 17/18:

- Established process for review, revision and updates of long standing practice decisions to ensure their relevance, accuracy and that they are current with accepted national standards of practice. Additionally, a standardized format for Practice decisions was established.
- Received reports from the committee chair regarding scope of practice questions received by board staff that are relevant to NPAC practice decisions.
- Addressed the following Practice decision requests:
    - The Role of the RN in Moderate/Procedural Sedation, Revised and Adopted by Board 5/16/18
    - Sexual Assault Nurse Examiner (SANE) Practices and Qualifications, Revised and adopted by Board 3/23/18
- Reviewed and updated the following NPAC Practice decisions:
    - Rapid Sequence Intubation (RSI) Guidelines, Revised and Adopted by the Board 5/16/18
    - RNs Advancing or Withdrawing Endoscopes and Colonoscopes, Revised and Adopted by the Board 3/23/18
    - Insertion of External Jugular Peripherally Inserted Central Catheters (EJ PICC) and External Jugular Peripheral Intravenous Catheters (EJ PIV), Revised and Adopted by the Board 3/23/18
    - Role of LPN with Nasogastric Tubes and RNs with Gastrostomy Tubes, Revised pending Board adoption
    - Role of RN with Intraosseous Catheter Placement and Infusion, Revised pending Board adoption

NPAC Goals for FY 17/18:

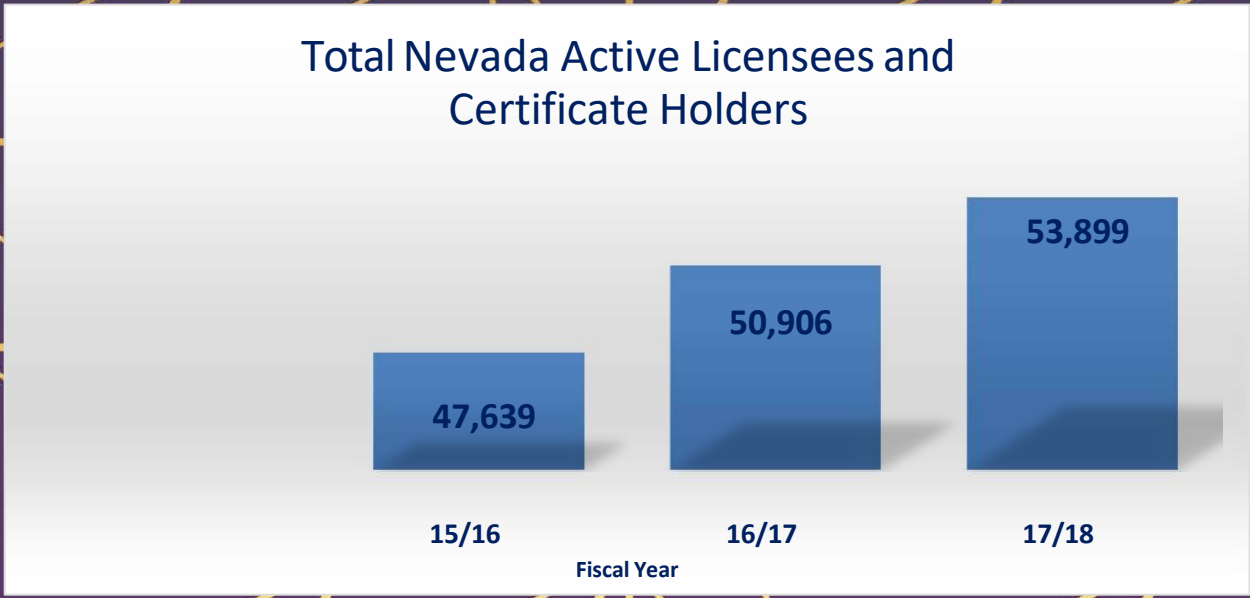
- Review, revise and update no less than two standing Practice Decisions per NPAC meeting to meet a total of 12 at end of FY 17/18
- Review scope of practice statistics and trends as reported by committee chair and identify at least two practice related safety topics the NPAC can address and educate nurses in the practice setting.
    - All updated Practice Decisions to be sent to Nevada facilities and hospitals via the Bureau of Healthcare Quality and Compliance facility mailing system.

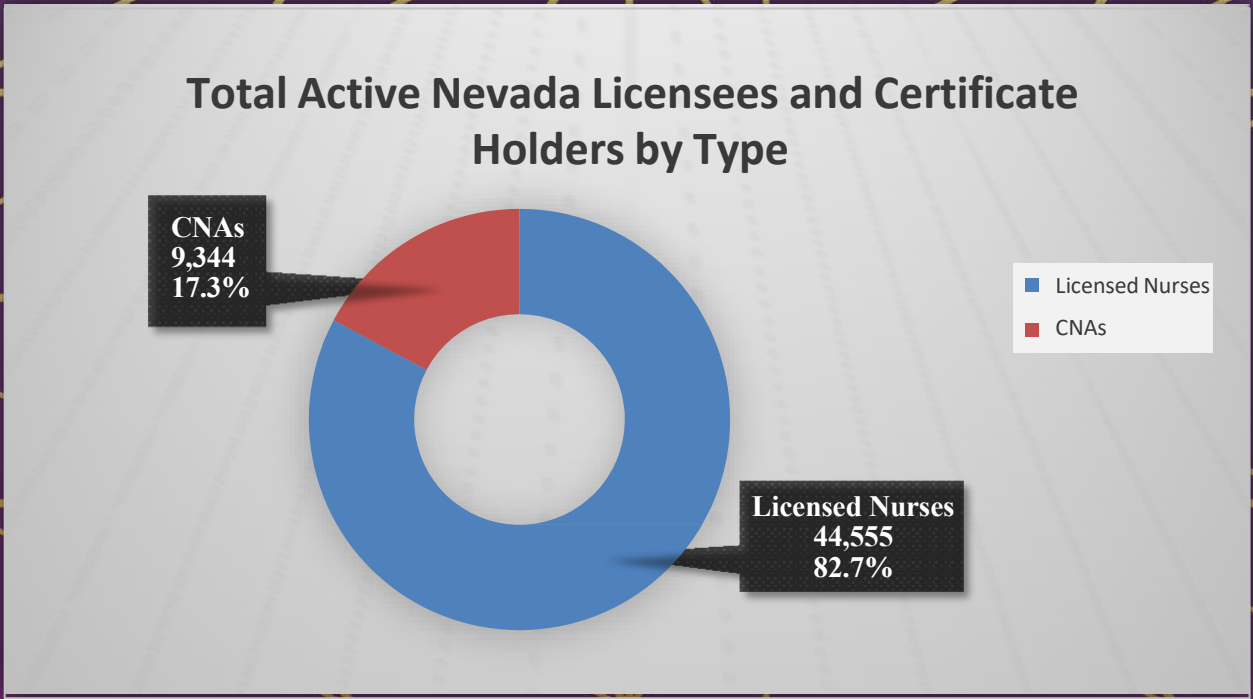
Annual Review by the Numbers

Annual Review by the Numbers

Board Process:

The Board reviews a minimum of three years of statistical information on an annual basis to identify trends in licensure, certification, investigation and discipline, continuing education audits, and compliance. The data is collected on the last day of the fiscal year which runs from July 1, through June 30.

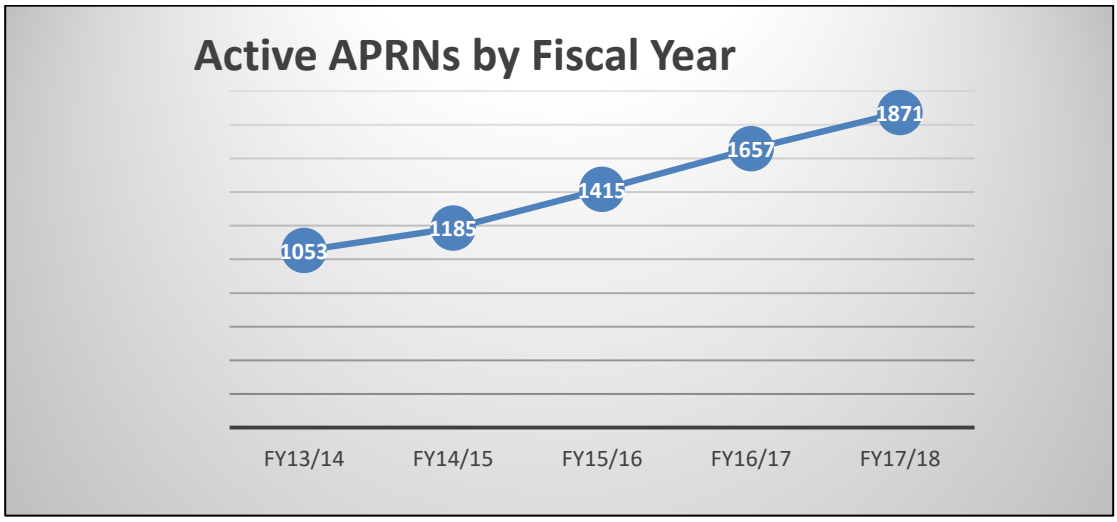




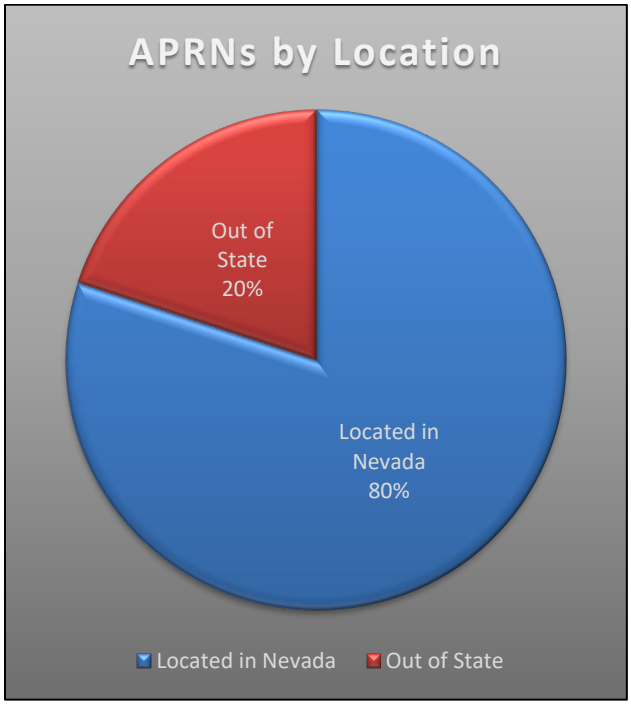
Advanced Practice Registered Nurses (APRNs)

Number of APRNs with an active license:

The data demonstrates a 13% increase in active APRNs from the prior year.

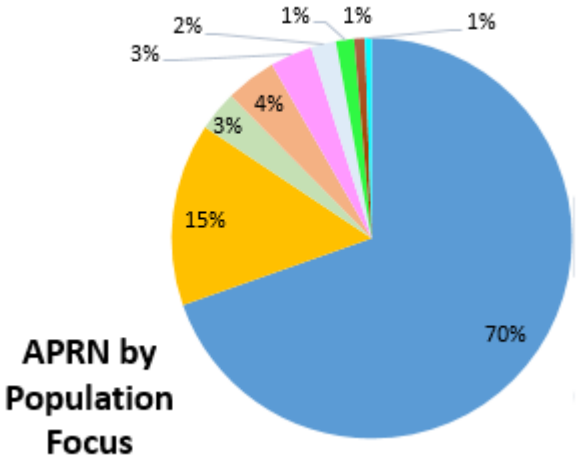


Although NSBN does not keep statistical data regarding APRN practice locations, the address of record provided to the Board indicates a county of residence. This information is helpful in reviewing the locations of APRNs with active Nevada licensure.



APRNs by County			
	FY 15/16	FY 16/17	FY 17/18
Carson	25	31	32
Churchill	4	4	4
Clark	794	929	1037
Douglas	27	30	33
Elko	17	19	22
Esmerelda	0	0	0
Eureka	0	0	2
Humboldt	6	6	6
Lander	3	2	3
Lincoln	1	1	1
Lyon	6	6	5
Mineral	0	0	0
Nye	3	5	6
Pershing	1	2	2
Storey	2	2	1
Washoe	289	326	339
White Pine	2	3	4
Out of State	235	291	374
Total	1415	1657	1871

APRNs by Populations of Focus	FY 17/18
Family Nurse Practitioner	1290
Adult Nurse Practitioner	274
Women's Health Care Nurse Practitioner	60
Psychiatric/Mental Health Nurse Practitioner	76
Pediatric Nurse Practitioner	63
Nurse Midwife	38
Neonatal Nurse Practitioner	27
Clinical Nurse Specialist	16
Geriatric Nurse Practitioner	10
Total (as of May 30, 2018)	1854

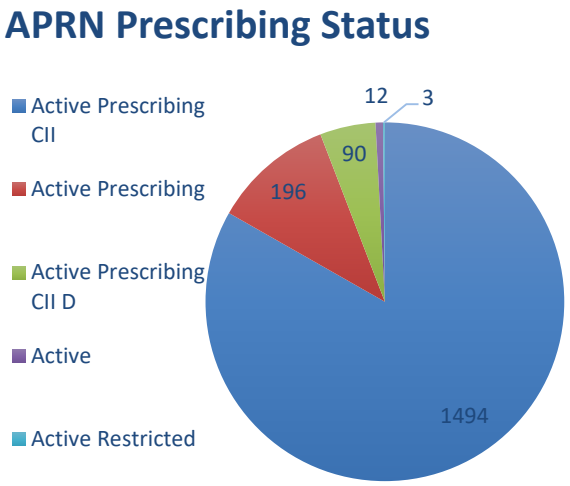


APRNs by Prescribing Privilege Status:

The NSBN has collaborated with the Nevada State Board of Pharmacy to ensure APRNs meet legal requirements to prescribe medications and/or controlled substances, with or without a collaborative agreement with a physician, and if they qualify to dispense medications and/or controlled substances if they choose. All APRN licenses indicate prescribing status as follows:

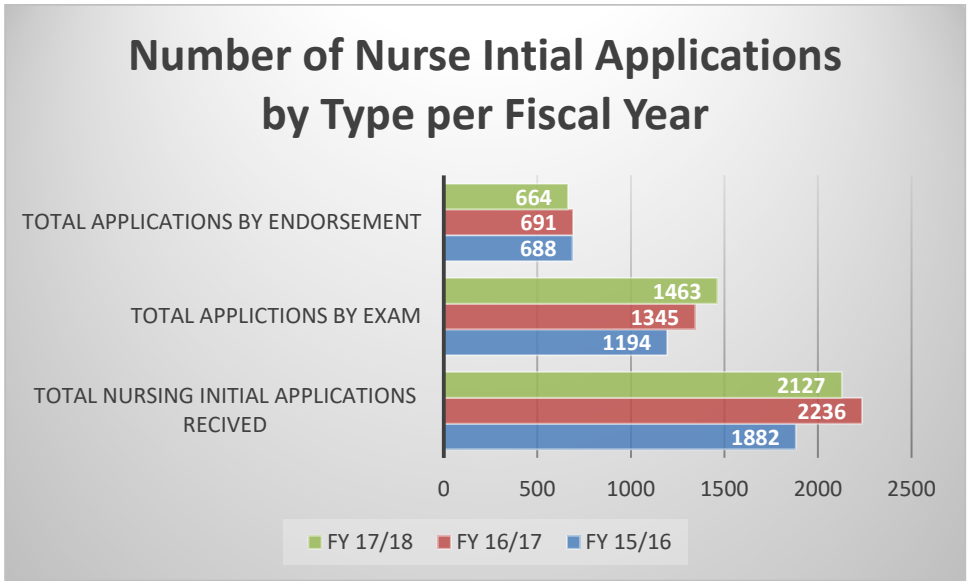
- Active - an APRN qualified for licensure but has not met requirements or chooses not to prescribe medications.
- Active Restricted - an APRN qualified for licensure with a restricted license as a disciplinary measure
- Active Prescribing - an APRN qualified for licensure and to prescribe controlled substances only in schedule III, IV, and V.
- Active Prescribing CII - an APRN qualified for licensure and to prescribe controlled substances in schedules II, III, IV, and V with or without a collaborative agreement with a physician.
- Active Prescribing CII D - an APRN qualified for licensure and to prescribe controlled substances in schedules II, III, IV, and V with or without a collaborative agreement with a physician, and to dispense those medications.

APRN Prescribing Status	FY 16/17	FY 17/18
Active Prescribing CII	1364	1494
Active Prescribing	153	196
Active Prescribing CII D	77	90
Active	59	12
Active Restricted	2	3
Total	1657	1871



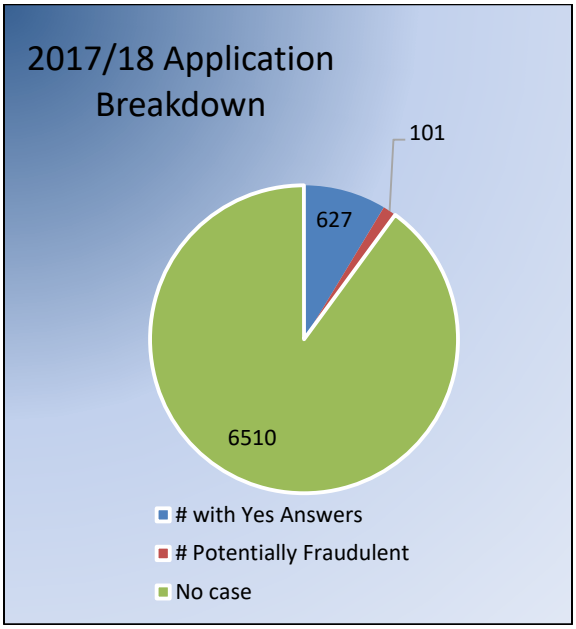
Nurse initial applications by type:

Endorsement applicants are those holding an active license in another state or jurisdiction seeking licensure in Nevada. Exam applicants are new graduates applying for a nursing license for the first time in any state.



Nurse licensee initial applications by outcome:

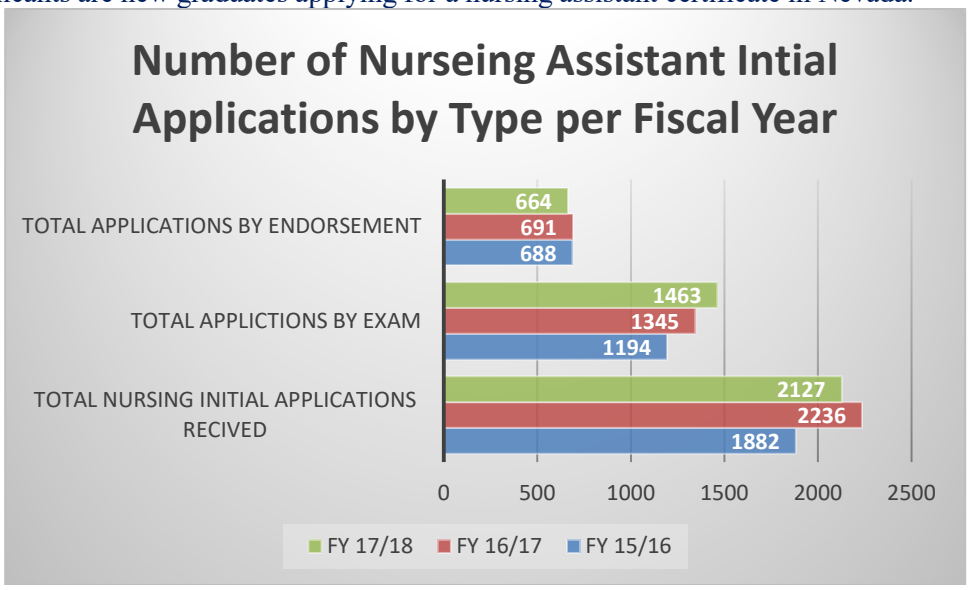
Applications are valid for one year from the date received by the Board or the application is considered incomplete and lapsed. An application may be sent to investigation if the criminal background check is positive, if the applicant answers "Yes" to one or more of the eligibility screening questions, or if evidence is discovered that indicates the application is potentially fraudulent. The Board may sanction an applicant in the form of denial of licensure, formal disciplinary action, or ordering the licensee be placed on a term of monitoring or probation. When an application is denied per policy the applicant is given the opportunity to reapply. When investigation results in no violations found the applicant is cleared for processing. Pending applications remain in process on the last day of the FY.



	FY 15/16	FY 16/17	FY 17/18
Total number of active licenses	39182	42154	44555
# Nurse Initial Applications	6609	7066	7238
# by Exam	1607	1773	1963
# by Endorsement	5002	5293	5275
# with Yes Answers	590	595	627
% with Yes Answers	8.9%	8.4%	8.7%
# of Yes with Discipline	7	3	5
% Yes with Discipline	1.2%	0.5%	0.8%
# Potentially Fraudulent	167	189	101
% Potentially Fraudulent	2.5%	2.7%	1.4%
# Found Fraudulent	23	33	27
# Fraudulent with Discipline	2	1	0
No case	5852	6282	6510

Nursing assistant initial applications by type:

Endorsement applicants are those holding an active certificate in another state or jurisdiction seeking certification in Nevada. Exam applicants are new graduates applying for a nursing assistant certificate in Nevada.



Nursing Assistant initial applications by outcome:

Applications are valid for one year from the date received by the Board or the application is considered incomplete and lapsed. An application may be sent to investigation if the criminal background check is positive, if the applicant answers "Yes" to one or more of the eligibility screening questions, or if evidence is discovered that indicates the application is potentially fraudulent. The Board may sanction an applicant in the form of denial of certificate, formal disciplinary action, or ordering the licensee be placed on a term of monitoring or probation. When an application is denied per policy the applicant is given the opportunity to reapply. When investigation results in no violations found the applicant is cleared for processing. Pending applications remain in process on the last day of the FY.

Fraudulent Dispositions	FY 15/16	FY 16/17	FY 17/18
Total Number New Investigations	163	111	109
Closed	76	51	61
Board Denied	1	1	1
Lapsed	40	60	29
Staff Denied	25	31	39
Staff Denial Ratified	2	1	2
Staff Denial Overturned	0	0	0
Probation/Monitoring	0	0	0
Pending	81	49	26
Total Number Dispositions	**144**	**144**	**132**

Yes Dispositions	FY 15/16	FY 16/17	FY 17/18
Accepted by Board	6	4	4
Probation/Monitoring	5	3	9
Denied by Board	3	0	3
Staff Denial Ratified	3	0	0
Staff Denial Overturned	0	0	0
Denied by Staff	2	1	1
Cleared by Staff	165	159	140
Lapsed after one year	37	48	33
Pending	75	51	34
Total Dispositions	**184**	**167**	**190**

Nurse and CNA Certificate Renewal Applicants

Renewal applications by outcome:

An application may be sent to investigation if the criminal background check is positive, if the applicant answers "Yes" to one or more of the eligibility screening questions, or if evidence is discovered that indicates the application is potentially fraudulent. The Board may sanction an applicant in the form of denial of certificate, formal disciplinary action, or ordering the certificate holder to be placed on a term of monitoring or probation. When investigation results in no violations found the applicant is cleared for processing. Applications are valid for one year from the date received by the Board or the application is considered incomplete and lapsed. Pending applications remain in process on the last day of the FY.

Fiscal Year	Total Nurse Renewal Applications Received	Qualified for Renewal	Sent to Investigation	Applicant Sanctioned by Board	Cleared after Investigation	Application Lapsed Incomplete after 1 year	Application Pending
15/16	15246	15149	109	20	78	7	27
16/17	16622	16522	100	12	70	8	35
17/18	17862	17749	91	19	78	3	22

Fiscal Year	Total CNA Renewal Applications Received	Qualified for Renewal	Sent to Investigation	Applicant Sanctioned by Board	Cleared after Investigation	Application Lapsed Incomplete after 1 year	Application Pending
15/16	3285	3226	68	6	32	1	24
16/17	3523	3477	46	8	26	9	19
27/18	3565	3518	47	11	28	6	16

Complaint Investigation Statistics

Complaint Investigation and Discipline:

Investigation and discipline support public protection. Complaints submitted to the board are sent to investigation when there are allegations of alleged violations of the Nevada Nurse Practice Act. When an investigation is initiated, board staff ensure that nurses and nursing assistants (respondents) are given due process, which requires adequate notice and description of the charges, the right to hire an attorney at their own expense, and to have a hearing or the opportunity for a hearing. Respondents also have the right not to respond to allegations, not to participate in settlement negotiations, not to sign anything, the right to see the complaint, and the right to appeal any Board action.

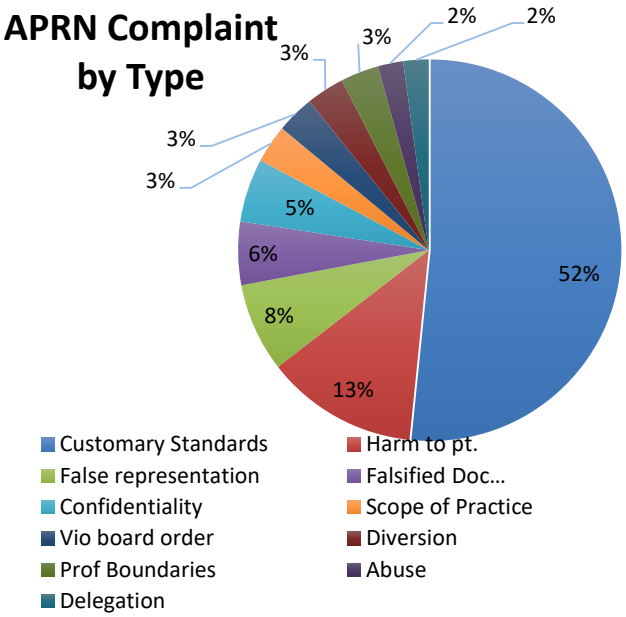
At the conclusion of a thorough investigation the board may: Close a complaint with no further action; Offer remediation generally in the form of targeted education to address the practice breakdown; Offer or order a non-disciplinary program such as practice monitoring; Discipline the respondent via an application denial, a reprimand, a fine, a term of probation, a term of suspension, revocation or voluntary surrender of license/certificate.

APRN Complaint Investigations by Fiscal Year:

Fiscal Year	Complaint Investigations Opened	Complaint Investigations Pending at End of FY	Percentage of Actively Licensed Nevada Nurses Investigated
15/16	41	19	3.00%
16/17	71	28	5.00%
17/18	79	27	4.00%

Nature of APRN Complaint Investigations for FY 17/18:

Types of APRN Complaints	
Customary Standards	48
Harm to patient	12
False Representation	7
Falsified Documentation	5
Confidentiality	5
Scope of Practice	3
Violation Board Order	3
Diversion	3
Professional Boundaries	3
Abuse	2
Delegation	2



Outcomes of APRN Complaint Investigations by FY 17/18:

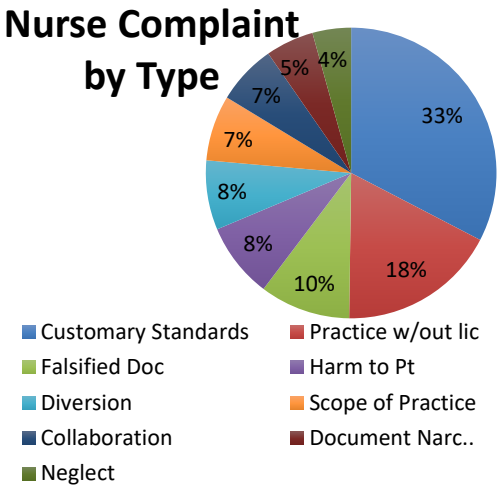
Fiscal Year	Number of Complaint Investigations	Complaints Closed after Investigation	License Disciplined by Board	Board Remediation or Non-Disciplinary Program	Complaint Investigations Pending at End of FY
15/16	45	37	1	3	**19**
16/17	81	64	2	5	**28**
17/18	79	NO DATA	5	NO DATA	**27**

Nurse Complaint Investigation Statistics

Nature of FY 17/18 Nurse Complaints:

The nature is the alleged violation of the Nurse Practice Act by the licensee. The following is a summary of the types of complaints submitted to the Board by total received.

Customary Standards	152
Practice without a license	82
Falsified Documentation	47
Harm to Patient	39
Diversion	36
Scope of Practice	34
Collaboration	31
Document Narcotics	25
Neglect	20
Observe/report	12



Nurse Complaint Investigation Outcomes by Fiscal Year:

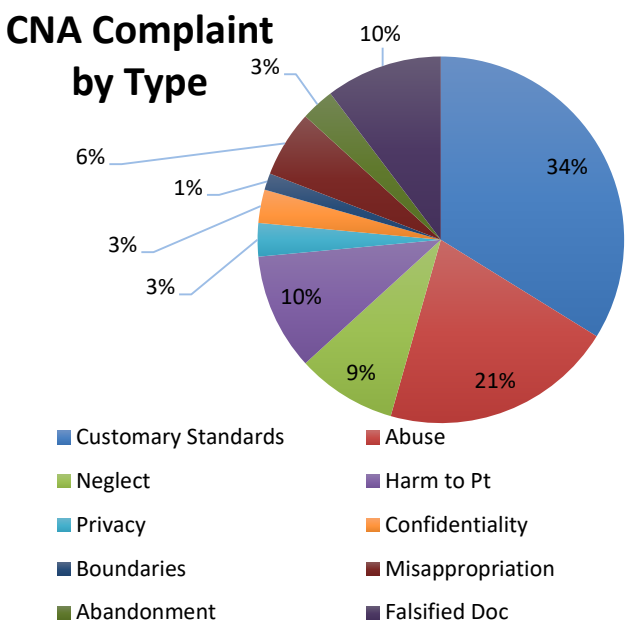
Discipline outcome statistics	FY 15/16	FY 16/17	FY 17/18
Number of discipline outcomes	117	93	97
Percent of licensees receiving discipline	0.30%	0.22%	0.21%
Percent of discipline to complaints	15.90%	13.20%	15%

CNA Complaint Investigation Statistics

Nature of FY 17/18 CNA Complaints:

The nature is the alleged violation of the Nurse Practice Act by the certificate holder. The following is a summary of the types of complaints submitted to the Board by total received.

Types of CNA Complaints	
Customary Standards	23
Abuse	14
Neglect	6
Harm to Patient	7
Privacy	2
Confidentiality	2
Boundaries	1
Misappropriation	4
Abandonment	2
Falsified Documents	7



CNA Complaint Investigation Outcomes by Fiscal Year:

Discipline outcome statistics	FY 15/16	FY 16/17	FY 17/18
Number of discipline outcomes	70	50	42
Percent of certificate holders receiving discipline	0.82%	0.57%	0.44%
Percent of discipline to complaints	20.11%	16%	13.80%

Compliance Statistics

The Board may place an individual on disciplinary probation or non-disciplinary monitoring with limitations or restrictions on practice to remediate and improve practice, to enhance public safety, and/or if qualified, to re-enter nursing practice when a substance use disorder has been identified.

Total number of participants on probation or monitoring by FY.

Compliance Outcome Statistics	FY 15/16	FY 16/17	FY 17/18
Probation participants	54	59	62
Alternative Program/Monitoring participants	98	103	82
Total probation/monitoring participants	163	162	144

APRN, RN and LPN Continuing Competence Audits

Nurse CE Audits and Outcomes:

To be eligible for license renewal, RNs and LPNs must complete 30 continuing education (CE) credits within the previous twenty-four months in addition to having completed a one-time board approved 4 CE bioterrorism course in addition to meeting all other renewal requirements. APRNs must complete 45 CEs directly related to his/her role or population focus, and Certified Registered Nurse Anesthetists (CRNAs) must complete 45 CEs related to practice as a nurse anesthetist in addition to meeting all other renewal requirements. The Board audits a minimum of 10% of all nurse renewal applicants each month to ensure compliance with continuing education/competence requirements as attested to on each renewal application.

Fiscal Year	Total Audited by Board	Total Complaints Failure to Comply with Audit	Closed - Completed Audit Within 30 Days of Complaint	Discipline by Board	Hearing Costs Only	Complaint Pending
2015/16	1803	135	117	14	1	16
2016/17	1981	171	132	12	0	23
2017/18	1879	169	131	23	0	38

CNA Continuing Education/Training Audits

CNA CE Audits and Outcomes:

To be eligible for renewal of a certificate CNAs must successfully complete 24 CE credits or training within the previous twenty-four months in addition to meeting other renewal requirements. The Board audits a minimum of 10% of all CNA renewal applicants each month to ensure compliance with continuing education/competence requirements as attested to on each renewal application.

Fiscal Year	Total Audited by Board	Total Complaints Failure to Comply with Audit	Closed - Completed Audit Within 30 Days of Complaint	Discipline by Board	Hearing Costs Only	Complaint Pending
2015/16	446	103	47	31	0	24
2016/17	441	90	49	29	0	25
2017/18	358	119	76	30	0	38

1915
First of four attempts to legislate nurse registration in Nevada.

1919
Sadie Hurst, assemblywoman from Washoe County, introduced nurse exam and licensure legislation which passed but was vetoed by the Governor. "The greatest opposition to the bill came from nurses who had attended training schools but did not receive diplomas."

1922
Last class graduated from St. Mary's Hospital Training Program. "The decision to close the school was prompted by the failure of the Nevada legislature to pass a Nurse Registration Act and, without the law, nurses could not obtain reciprocal registration with other states..."

1923
Nevada legislature established Board of Nurse Examiners, Mary Evans, the first president, was issued Nevada license #1. Between 1923 and 1931, there were 196 licenses issued.

1947
The Board of Nurse Examiners is given authority to accredit nursing schools. The number of Board members was increased to five RNs.

1949
Professional Nurse Practice Act amended to reinforce mandatory registration and provide penalties for violations. Legislation passed to regulate practice of practical nursing.

1949
The Board of Nurse Examiners given authority to regulate practical nurses.

1963
Two LPN members added to the Board. LPN Board members restricted to deciding matters pertaining to practical nursing.

1963
Amendment to the Nurse Practice Act directing the governor to solicit names for the Board of Nurse Examiners from the Nevada Nurses Association.

1973
One consumer member added to the Board. All Board members now have the same decision making authority as the RN members.

1977
Number of Board members reduced by one RN. Board now consisted of four RNs, two LPNs and one member of the general public.

1979
The Nevada State Board of Nursing (NSBN) is given authority to regulate advanced practitioners of nursing.

1982
30 hours of continuing education became mandatory for re-licensure in nursing.

1989
NSBN given the authority to regulate certified nursing assistants.

1994
NSBN begins fingerprinting all initial applicants for licensure and certification.

1995
One CNA member added to the Board, replacing one LPN member. The Board now consisted of four RNs, one LPN, one CNA and one member of the general public.

2003
Nevada legislature passed Assembly Bill 250 requiring nurses to take four hours of continuing education relating to the medical consequences of an act of terrorism that involves the use of a weapon of mass destruction.

2010
NSBN joins National Council of State Boards of Nursing's Nursys Database.
NSBN begins fingerprinting applicants on renewal.

2012
NSBN given authority to regulate medication-aides certified.

2013
AB 170 passed allowing full practice authority for Nevada APRNs.
NSBN celebrated 90 years of service to the residents of Nevada.

2016
AB 105 passed, revises continuing education requirements related to suicide prevention and awareness.
AB 474 passed in response to the opioid epidemic, provides specific guidelines for APRN prescribing.
SB 227 passed allowing qualified APRNs to sign, certify, stamp, verify or endorse certain documents requiring an MD signature.

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