Nevada State Board of URSING



ANNUAL REPORT FISCAL YEAR 2019/2020



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OUR 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.



Nevada State Board of URSING

ABOUT THE BOARD

The Nevada State Board of Nursing was established in 1923 by the state legislature to regulate nursing practice. 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 establishes and receives recommendations from seven standing advisory 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 nursing practice innovations, thereby enhancing public protection by ensuring that licensees and certificate holders practice safely, competently, and ethically. The Board's functions include:

Administration

- o Establishing and maintaining minimum practice standards.
- Developing and adopting regulations.
- o Utilizing Board appointed-advisory committees to ensure stakeholder input.
- o Conducting outreach and providing education through publications, presentations, and social media.
- o 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.
- o Adopting exams for licensure/certification.
- Licensing advanced practice registered nurses, registered nurses, and licensed practical nurses.
- o Issuing certificates to nursing assistants and medication-aides certified.
- Certifying registered nurse anesthetists and emergency medical service registered nurses.
- o 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.

NSBN BOARD MEMBERS



Mary-Ann Brown, MSN, RN President, RN Member



Susan S. VanBeuge, DNP, APRN, FNP-BC, FAANP, RN Member



Jacob Watts, CNA Vice-President, CNA Member



Deena McKenzie, MSN, RN RN Member



Ovidia McGuinness, LPN Secretary, LPN Member



Richelle O'Driscoll Consumer Member

NSBN BOARD MEMBERS continued

Thank you, Jay Tan, for your service on the Board.

Welcome, Branden Murphy, the newest member of the Nevada State Board of Nursing



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



Branden Murphy, MSNed, CPN, CCRN, RN Member

MESSAGE FROM THE EXECUTIVE DIRECTOR

The year began, as usual, focusing on developing a strategic plan to enact the Nurse Licensure Compact (NLC) in our state. I started meeting with stakeholders who would support the NLC and help move it forward.

The impact of COVID-19 hit and challenged all of us in ways we could have never imagined. The Governor established several emergency directives that guided the operations of state agencies. Since our computer system is web-based, we could continue processing licenses/certificates without much delay. Most staff began telecommuting so that we could maintain safety precautions. All in all, we were able to continue most Board operations seamlessly.

Conducting board meetings proved to be challenging as we moved quickly into the world of virtual meetings. We were able to run our meetings as scheduled, all virtual. As we navigated this pandemic's uncharted territory, we quickly learned about the challenges facing our healthcare community.

Our Deans and Directors and CNA Program Directors worked with us to identify creative ways to conduct business during the pandemic while adhering to our emergency directives and laws. Fortunately, our Board had the insight to approve extensions of the current simulation policy and allow programs to "think outside the box" when it came to education.

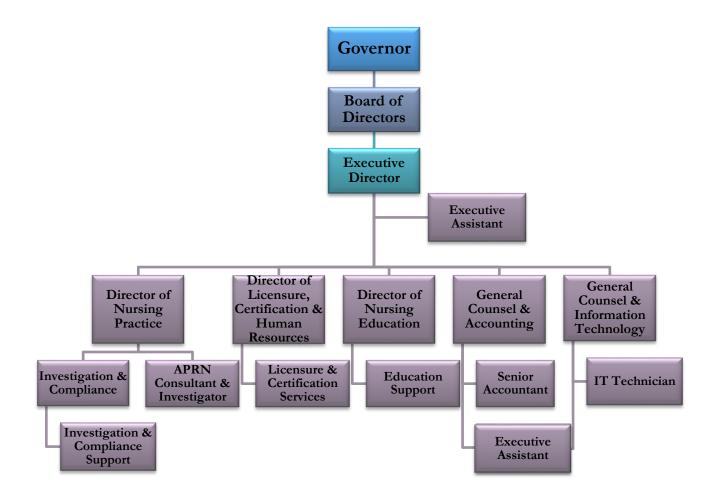
I want to thank all our Board members for their guidance throughout this challenging time. Their leadership has been instrumental in our agency's success and our ability to continue operations throughout the pandemic.

Finally, I would like to thank our Board Presidents, Mary-Ann Brown and Deena McKenzie, for their exceptional leadership. President Brown and McKenzie's tenure did not go unnoticed. I thank them for their leadership and guidance.

Cathy Dinauer, MSN, RN, FRE

Executive Director

ORGANIZATIONAL STRUCTURE



BOARD STAFF

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

Michelle Johnson, EdD, RN, CPNP-PC

Director of Nursing Education

Gail Trujillo, MS, CPM

Director of Licensure and Certification &

Human Resources

Sydney Chappell

Executive Assistant

Investigation & Monitoring

Sally K. Miller, PhD, APRN, FAANP

APRN Consultant & Investigator

C. Ryan Mann, MSN, RN

Application Coordinator

Sherri Twedt, BSN, RN, LNC

Compliance Coordinator

Cindy Peterson, RN, CLNC, CHCQM

Nurse Investigator

Elaine Ralph, BSN, RN

Nurse Investigator

Ray Martinez

Investigator

Licensure & Certification

Patty Towler

Licensure & Certification Coordinator

Ariadna Ramos Zavala

Program Assistant

Sandy Webb

Program Assistant

Support

Kristie Neuhauser

Accountant

Rhoda Hernandez

IT Technician

Christie Daliposon

Discipline Support Investigator

Courtney Baccei

Management Assistant

Marsalena Moore

Management Assistant

Cydnee Cernas

Management Assistant

Customer Service

Representatives

Brenna Stevenson

Arlene Rojas-Guerrero

Corina Jimenez

Lashaun Thompson

OPERATIONS OF THE BOARD

Strategic Goals

- ✓ 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 technology.
- ✓ Participate in and promote state, national, and global nursing regulatory initiatives.
- ✓ Support nursing regulatory activities through quality initiatives.

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

State-wide Accomplishments

Board Staff provided several presentations throughout the state (virtual and face-to-face) regarding nursing regulation, substance use disorders, and the nursing compact. Stakeholders include new graduate nurses, APRN students, and nurses working in various settings, including correctional facilities. Board staff and Board Advisory Committees revised approximately ten practice decisions.

Staff identified a Nurse Licensure Compact (NLC) strategic plan and met with stakeholders to discuss support logistics.

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. A digital copy of the current and past issues of the *Nursing News* magazine is also available on the Board's website.

Professional and Collaborative Relationships

Board staff continues to participate in national and state-wide committees, task groups, and meetings, including the Nevada Veteran groups, Nevada Office of Workforce Development, the National Council of State Boards of Nursing (NCSBN), the Crisis Standards of Care Committee, and the Nevada Action Coalition.

Board staff identified in the NCSBN Taxonomy of Error Root Cause Analysis and Practice (TERCAP) outcomes which identify communication breakdown and errors related to critical thinking and changes to patient conditions. Results were presented to recent graduates.

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. The Board reviews every program application following Nevada Revised Statutes (NRS) requirements 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 enhance the competencies of newly graduated nurses and nursing assistants caring for Nevada citizens.

Fiscal Year 2019/2020 Nursing Programs

- ✓ Fully approved nursing programs in Nevada: 12
- ✓ Programs approved to conduct only the clinical portion of the program in Nevada: 1
- ✓ Programs under Provisional or Conditional Approval*: 3

Fiscal Year 2019/2020 Nursing Examination Pass Rates

The Board annually adopts the National Council Licensure Exam (NCLEX) as determined by NCSBN 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: 93.18%
- ✓ National NCLEX average pass rate: 86.58%
- ✓ Nevada NCLEX-PN average pass rate: 75.00%
- ✓ National NCLEX-PN average pass rate: 83.09%

^{*} Schools with provisional approval meet Nevada laws and regulations' initial requirements to offer a nursing education program 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 with 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 with conditional approval meet complete approval requirements but have not maintained a first-time pass rate of 80 percent or higher on the NCLEX for two consecutive years.

Fiscal Year 2019/2020 Nursing Assistant Examination Pass Rates:

The Board has adopted the Headmaster, LLP examination as the official competency examination for nursing assistant certification (CNA) in Nevada. There are two components to the test:

(1) a written exam, and (2) a skills exam. Students must complete both components with a passing score to qualify for a CNA Certificate in Nevada.

✓ Written exam Nevada pass rate: 78%

✓ Skills exam Nevada pass rate: 74%

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

Graduates from Nevada Nursing Programs	17/18	18/19	19/20
PhD - University of Nevada, Las Vegas	3	4	4
DNP - University of Nevada, Las Vegas	5	10	10
DNP - University of Nevada, Reno	10	13	19
Post MSN certificate - University of Nevada, Las Vegas	*	2	2
Post MSN certificate - University of Nevada, Reno	2	6	7
MSN - University of Nevada, Las Vegas	30	19	19
MSN - University of Nevada, Reno	25	31	32
RN to BSN - Great Basin College	11	15	32
RN to BSN - Nevada State College	58	78	78
RN to BSN - University of Nevada, Reno	23	24	25
BSN- Arizona College	3	35	61
BSN- Chamberlain University	91	97	81
BSN - Nevada State College	177	176	176
BSN - Roseman University	218	214	214
BSN - University of Nevada, Las Vegas	126	136	146
BSN - University of Nevada, Reno	125	123	125
AAS - Altierus Career College, formerly Everest College	57	50	*
AAS - Carrington College, Reno	101	79	79
AAS - College of Southern Nevada	195	209	209
AAS - Great Basin College	26	30	26
AS - Truckee Meadows Community College	52	55	55
AAS - Western Nevada College	41	52	52
LPN - Brightwood College	49	51	*
LPN - College of Southern Nevada	21	0	0
Total	1,449	1,509	1,452

^{*}no data available

COMMITTEES

Board Advisory Committees:

Committee meeting dates, agendas, and minutes are available for review on the Nevada State Board of Nursing website or by calling the Board to request a hard copy.

Advanced Practice Registered Nurse Committee

The Advanced Practice Registered Nurse Committee advises the Nevada State Board of Nursing on matters or issues related to advanced nursing practice.

Committee Chair: Sally K. Miller, PhD, APRN, FAANP, APRN Consultant & Investigator Members:

- o Aaron Bellow Jr., PhD, APRN, FNP-BC Henderson November 2020
- o Pamela Burgio, MSN, RN, APRN, PNP Sparks November 2020
- o Rhone D'Errico, MSN, APRN-BC, FNP-C, PMHNP-BC Las Vegas March 2021
- o Stephen Ingerson, MSN, APRN, CNS Henderson-July 2022
- Cheryl A. Maes, PhD, MSN, APRN, FNP-BC Las Vegas July 2022
- o Kelly Mecham, DNP, MSN, APRN, FNP-BC Henderson September 2021
- o Jeanine Swygman, DNP, ACNP-BC, CCRN-CMC, PHN Reno November 2020
- o Teresa Praus, MSN, APRN, FNP-BC Las Vegas, July 2022
- o Patricia Strobehn, MSN, APRN, M FNP-BC Las Vegas July 2022
- o Maileen Ulep-Reed, MSN, APRN, FNP-BC Las Vegas May 2020

- Received reports from the Director of Nursing Practice regarding scope of practice questions received by board staff that is relevant to APAC practice decisions.
- Reviewed, discussed, and approved recommending to the Board that APRN applicants for prescriptive practice may use specific continuing education courses to satisfy the advanced pharmacotherapeutics requirements contained in NAC 632.257 (1)(c)(II).
- o Reviewed and addressed revisions or updated the following practice decisions:
 - o The Role of the RN in Sexual Assault Examination
 - o The Role of the RN in Thrombolytic Therapy
 - o The RN Scope in Non-Hospital IV Hydration Practice
 - o The APRN Scope in Intubation
 - O The APRN Scope in Intrauterine Insemination (IUI)

CNA & MA-C Advisory Committee

A committee with its membership defined by statute, NRS632.072, to advise and make recommendations to the Board on matters relating to nursing assistants and medication aidescertified.*

Committee Chair: Michelle Johnson, EdD, RN, CPNP-PC, Director of Nursing Education Members:

- o M. Jeanne Hesterlee, RN (Bureau of Health Care Quality and Compliance) Carson City Indefinite
- o Robert Kidd (Long Term Care) Reno September 2021
- o Rhonda Meyer, RN, (Division of Healthcare Financing and Policy) Elko Indefinite
- O Darren Morris, LPN (LPN Member) Pahrump November 2021
- o Jennifer Williams-Woods (Division of Aging Services) Reno Indefinite
- o Carole Wiseman, RN (AARP Member)– Reno March 2020
- o Carla Wright, MSNed, RN (RN member) North Las Vegas Indefinite

- o Pending site visits for all programs.
- O Began discussions to hold a CNA Conference.
- o Approved CNA programs to utilize simulation.
- o The Committee continuously reviewed CNA examination pass rates.

^{*}Medication-aides certified were created by statute, NRS 632.291, in 2011. No MA-Cs have been employed in Nevada, and there are none currently certified in Nevada.

Disability Advisory Committee

The Disability Advisory Committee advises and reports to the Board regarding Nurses and CNAs with disabilities or practice issues that impact the delivery of safe and effective nursing.

The Disability Advisory Committee is a committee appointed by the Board, consisting of at least six persons who are knowledgeable concerning any condition, diagnosis, or addiction that may affect the safe practice of nursing. The Committee advises and reports to the Board on matters related to the protection of the public through the safe practice of nursing by any person who:

- (a) Has previously practiced nursing while, with or without good cause, the person's physical, mental, or emotional condition has impaired their ability to act in a manner consistent with the established or customary standards of nursing; or
- (b) Is participating in the Alternative Program for Chemically Dependent Nurses established by the Board to serve as an alternative to disciplinary action for persons licensed or certified pursuant to the provisions of chapter 632 of NRS who have a substance use disorder.

Committee Chair: Sherri Twedt, BSN, RN, Compliance Coordinator

Members:

- o Richard Angelastro, MSN, RN Las Vegas November 2020
- o Peggy Cullum, BSN, RN Las Vegas -November 2020
- o Rebecca Scarpa, DNP, APRN Reno March 2023
- O Susan Hubbard, MS, BS, RN Las Vegas November 2020
- o Beth Kiehn, APRN Reno March 2021
- o Susan O'Day, MSEd, RN, CPAN Reno -November 2020
- o Toril Strand, BA, RN-C Reno November 2020

- O Completed research and development of support strategies for nurses and CNAs in monitoring programs with Substance Use Disorder, mental health disorders, and dual diagnosis.
- O The Committee's current project is to research and advise the Board on best practices in substance use treatment programs and monitoring of nurses and CNAs participating in the Board's Alternative to Discipline Program.

Education Advisory Committee

The Education Advisory Committee advises and reports to the Board on matters related to education and continuing education. The Committee consists of representatives from nursing education, nursing associations, and employers.

Committee Chair: Michelle Johnson, EdD, RN, CPNP-PC, Director of Nursing Education

Members:

- o Kimberly Baxter, DNP, APRN, FNP-BC (UNR, Orvis School of Nursing) Reno May 2022
- o Mary Chalfant, MS, RN (Sunrise Hospital & Medical Center) Las Vegas September 2020
- o Irene Coons, PhD, RN, CNE (College of Southern Nevada) Las Vegas May 2022
- o Judith Cordia, EdD, RN (Western Nevada College) Carson City July 2020
- o Jody Covert, MSN, RN (Truckee Meadows Community College) Reno September 2019
- o Nancy Hency Cywinski, RN, BSN, MS, NHA (CCDS) Las Vegas May 2022
- o Amber Donnelli, PhD, RN, CNE (Great Basin College) Elko March 2020
- o Patricia Gatlin, PhD, RN, CNE (University of Nevada, Las Vegas) Las Vegas January 2021
- o Julia Millard, MSN, RN (Brightwood College) Las Vegas July 2020
- o Branden Murphy, MSNed, RN, CPN, CCRN (Arizona College) Las Vegas May 2020
- o Brian C. Oxhorn, PhD, RN (Roseman University) Las Vegas May 2021
- o Kyle Salinas, Student, (Chamberlain University) Las Vegas May 2022
- o Ruby Wertz, MSHA, BSN, RN (Nevada State College) Las Vegas May 2022

- Recommended approval of Roseman University's Practice Partnership with Renown Medical Center.
- o Recommended approval for Las Vegas College curriculum changes.
- O Reviewed state and national NCLEX pass rates.
- O Review of innovative strategies to address clinical rotations during the pandemic.

Nursing Practice Advisory Committee

The Nursing Practice Advisory Committee advises and reports to the Board on establishing a scope of practice for nursing in this state. The Committee consists of at least ten persons knowledgeable in all nursing practice areas in Nevada and trends in national nursing practice.

Committee Chair: Sam McCord, BSN, RN, Director of Nursing Practice Members:

- o Mary Brann, MSN, RN Henderson March 2020
- o Jessica Carlson, MSN, Ed., Phd ABD, RN-Henderson-July 2019
- o Ginger Evors (Fidel), MSN, RN, OCN, CNL-Las Vegas- May 2022
- o Mary Field, RN, BSN Carson City Indefinite
- o Marilyn Jeanne Hesterlee, RN Carson City Indefinite
- o Greg Highfill-Nursing Student-Minden-July 2019
- o Laura Kennedy, BSN, RN, MBA-Sparks-January 2021
- o Leanna Keith, MSN, RN Gardnerville March 2020
- o Michelle McNary, LPN-RN-July 2021
- o Chelsea Minto, BSN, RN, CNML Reno May 2022
- o Nicole Sirotek, RN-Elko-May 2022
- o Sierra West, RN-Las Vegas-May 2022
- o Shanna Kennon MSN, RN Reno January 2023

- o Researched and approved revisions to The RN in Intrauterine Insemination.
- o Researched and approved revisions to The Role of the RN in removing chest tubes.
- o Researched and advised rescinding of The Nurses Role in Removing Respirators.
- o Researched and advised rescinding of The Post-Mortem Enucleation advisory opinion.
- o Researched and proposed revisions to The Role of the RN in Intubation practice decision.
- o Researched and proposed revisions to Antithrombolytic Agents practice decision.
- o Reviewed and approved revisions to LPNs Role in Suprapubic Catherization Care practice decision.
- o Researched, developed and proposed a new IV Hydration practice decision.
- o Reviewed and discussed revisions to Post-Coital Testing practice decision.
- o Researched and proposed revisions to the Prostaglandin Suppositories practice decision.
- o Reviewed and discussed revisions to The RNs and the Suprapubic Catheter practice decision.
- Researched and proposed revisions to The Role of the RN in Ultrasound in Antepartum Testing practice decision.

Licensed Practical Nurse Advisory Committee

The LPN Advisory Committee (LPNAC) advises and reports to the Nevada State Board of Nursing on matters or issues related to the licensed practical nurse. The Committee consists of individuals who are knowledgeable in areas concerning LPN practice.

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

Members:

- o Cheri Crumley, LPN Las Vegas July 2021
- o Daryl Lauffer, LPN South Lake Tahoe July 2021
- o Kyle McComas, RN Pahrump July 2021
- o Kathleen Mohn, RN Las Vegas July 2021
- Cynthia Morris, LPN Las Vegas July 2021
- o Dr. Mary Jo Noble, RN Las Vegas July 2021

- o LPN Scope of Practice Regarding Suprapubic Catheter Replacement.
- o Reviewed, discussed, and researched the LPN role in peritoneal and hemodialysis.
- Reviewed, discussed, and researched LPN scope of practice regarding change and or removal of PICC lines.
- Reviewed, discussed, and rendered advisement regarding LPN students completing clinical hours in outpatient centers.
- Reviewed, discussed, and researched other state program definitions for temporary central venous lines as they pertain to Nevada LPN IV certification.
- Reviewed, discussed, and researched clarification of NAC 632.450 (1)(d), the mixing of intravenous fluids and medications.

ANNUAL REVIEW BY THE NUMBERS

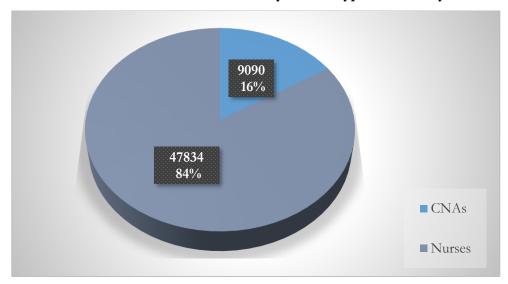
The Board reviews a minimum of three years of statistical data annually to identify trends in licensure, certification, investigation, discipline, continuing education, audits, and compliance. The data is collected contemporaneously throughout the fiscal year, which runs from July 1 through June 30.

Licensure & Certification

Total number of Active Licensees and Certificate Holders

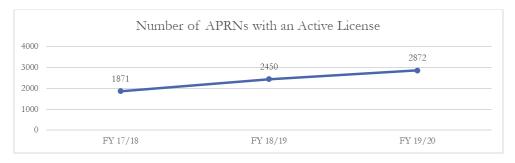


Total number of Licensees and Certificate Holders by license type for Fiscal year 2019/2020:



Advanced Practice Registered Nurses

Number of APRNs with an Active License:

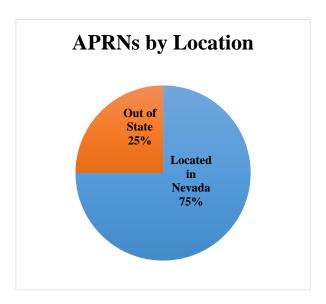


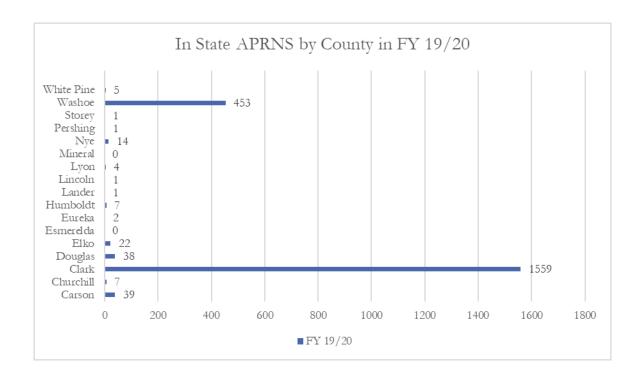
APRNs by Location:

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

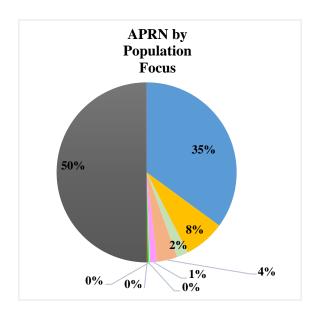
In-state APRNs by County:

	FY 17/18	FY 18/19	FY 19/20
Carson	32	35	39
Churchill	4	7	7
Clark	1037	1202	1559
Douglas	33	30	38
Elko	22	21	22
Esmerelda	0	0	0
Eureka	2	2	2
Humboldt	6	7	7
Lander	3	1	1
Lincoln	1	1	1
Lyon	5	7	4
Mineral	0	0	0
Nye	6	9	14
Pershing	2	1	1
Storey	1	3	1
Washoe	339	345	453
White Pine	4	4	5
Out of State	374	775	718
Total	1871	2450	2872



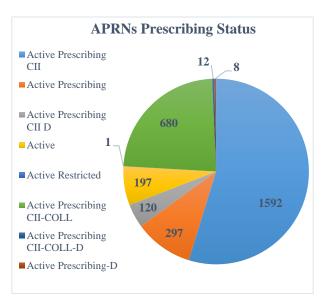


APRNs by Population Focus:



APRNs by Populations of Focus	FY 19/20
Family Nurse Practitioner	2014
Adult-Gerontology Nurse Practitioner	424
Women's Health Care Nurse Practitioner	119
Psychiatric/Mental Health Nurse Practitioner	209
Pediatric Nurse Practitioner	73
Nurse Midwife	6
Neonatal Nurse Practitioner	18
Clinical Nurse Specialist	9
Total (as of June 30, 2020)	2872

APRNs by Prescribing Privilege Status:



NSBN has collaborated with the Nevada State Board of Pharmacy to ensure APRNs meet legal requirements to prescribe medications and controlled substances, with or without a collaborative agreement with a physician, and qualify to dispense medications 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.
- o Active Prescribing an APRN qualified for licensure and prescribing controlled substances only in schedule III, IV, and V.
- Active Prescribing CII an APRN qualified for licensure and prescribing controlled substances in schedules II, III, IV, and V.
- Active Prescribing CII D an APRN qualified for licensure and prescribing controlled substances in schedules II, III, IV, and V.
- Any prescribing status including "COLL" an APRN
 is qualified for licensure and prescribing or
 dispensing as identified above under a collaborative
 agreement with a physician.

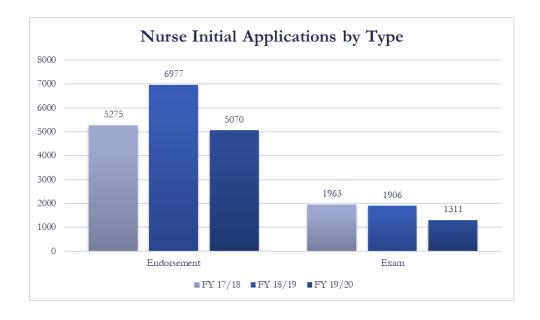
APRNs Prescribing Status	FY 18/19	FY 19/20
Active Prescribing CII	1243	1592
Active Prescribing	252	297
Active Prescribing CII D	101	120
Active	156	197
Active Restricted	2	1
Active Prescribing CII-COLL	683	680
Active Prescribing CII-COLL-D	14	12
Active Prescribing-D	8	8

Applications

The number of applications significantly decreased during FY 2019/2020. This reduction is likely related to the COVID-19 pandemic. Instead of submitting an endorsement application, out-of-state nurses and certified nursing assistants could work in Nevada after completing a waiver of licensure/certification form pursuant to Governor Sisolak's Directive 011, which temporarily suspended licensure requirements in Nevada, which resulted in a 29% decrease in endorsement applications. In addition, exam applications decreased by 30% during this fiscal year due to the pandemic creating challenges for nursing schools and training programs to safely offer classes and clinical opportunities. Regardless, the volume of applications processed within both board offices remains high. Staff productivity remains very effective, as evidenced by the number of licensed/certified and in the number of dispositions for those processed through investigations.

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 recent graduates applying for a nursing license for the first time in any state.



Nurse initial applications by outcome:

Applications are sent to investigation if the applicant answers "Yes" to one or more of the eligibility screening questions, if the criminal background check is positive, or if any other 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 to be placed on a term of monitoring or probation. When an investigation results in no violations found, the applicant is cleared for processing.

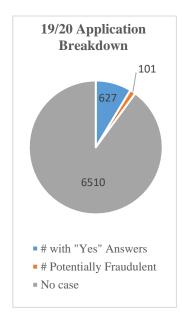
Applications are valid for one year from the date received by the Board. Failure to submit all required documentation within a year results in a lapsed status. Pending applications remain in process on the last day of the fiscal year.

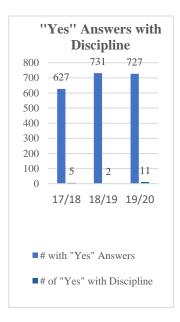
Total Initial Nurse Applications	17/18	18/19	19/20
Total number of active licenses	44555	46850	47834
# Nurse Initial Applications	7238	8883	6381
# by Exam	1963	1906	1311
# by Endorsement	5275	6977	5070
# with "Yes" Answers	627	731	727
% with "Yes" Answers	8.7%	8.2%	11.4%
# of "Yes" with Discipline	5	2	11
% "Yes" with Discipline	0.8%	0.3%	1.5%
# Potentially Fraudulent	101	146	116
% Potentially Fraudulent	1.4%	1.6%	1.8%
# Found Fraudulent	27	39	39
# Fraudulent with Discipline	0	0	0
No case	6510	8006	5538

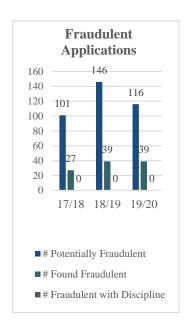
"Yes" Dispositions	17/18	18/19	19/20
Accepted by Board	16	13	19
Probation/Monitoring	10	5	15
Denied by Board	2	1	4
Staff Denial Ratified	0	0	0
Staff Denial Overturned	0	0	0
Denied by Staff	3	0	0
Cleared by Staff	536	747	598
Lapsed after one year	42	38	33
Reprimand/Fine/CE	0	0	0
Pending not incl in total dispositions	130	58	57
Total Dispositions	609	804	669

2019/2020 Application Breakdown:

Although 28% fewer people applied for Nevada Nursing licensure during this fiscal year, our total number of active licensees continues to grow to an all-time high of 47,834. We continue to review approximately 13% of licensure applications for "yes" answers or possible fraudulent answers.



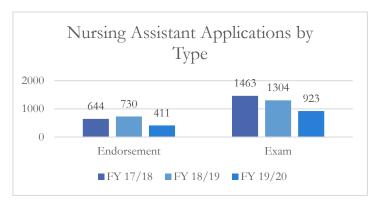




Nursing Assistant initial applications by type:

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

Nevada. Exam applications decreased by 34% during this fiscal year, primarily due to the pandemic creating challenges for training programs to conduct classes and offer clinical opportunities safely.



Nursing Assistant initial applications by outcome:

Applications are valid for one year from the date received by the Board. Failure to submit all requested documentation within that year results in the application lapsed status. 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 a certificate, formal disciplinary action, or ordering the certificate holder to be placed on a term of monitoring or probation. When an investigation results in no violations found, the applicant is cleared for processing. Pending applications remain in process on the last day of the fiscal year.

Total CNA Applications	17/18	18/19	19/20
Total number of CNAs	9344	9424	9090
# Initial CNA applications	2127	2034	1334
# by Exam	1463	1304	923
# by Endorsement	664	730	411
# with "Yes" answers	177	198	189
% with "Yes" answers	8.3%	9.7%	14.2%
# of "Yes" with discipline	3	3	1
% "Yes" with discipline	1.7%	1.5%	0.5%
# potentially fraudulent	102	109	75
% potentially fraudulent	4.8%	5.4%	5.6%
# found fraudulent	40	32	32
# fraudulent with discipline	2	0	0
No case	1848	1727	1070

"Yes" Dispositions	17/18	18/19	19/20
Accepted by Board	4	3	11
Probation/Monitoring	9	7	3
Denied by Board	3	3	0
Staff denial ratified	0	0	0
Staff denial overturned	0	0	0
Denied by Staff	1	0	0
Cleared by Staff	140	162	167
Lapsed after one year	33	21	30
Pending not incl in total dispositions	34	42	30
Total Dispositions	190	196	211

CNA exam applications have decreased by 34%, and endorsement applications decreased by 44%. This decrease is likely due to the COVID-19 pandemic. Nearly 20% of CNA Initial applications include "Yes" answers or require investigation of possible fraudulent responses.

Nurse and CNA Fraudulent Applications:

Fewer people submitted applications requiring review of possible fraudulent answers over the past year, though the percentage of those found to be fraudulent was greater.

Total Initial Applications	17/18	18/19	19/20
Total of initial applications	10256	10917	7715
Total potentially fraud app	203	255	191
% of potentially fraud apps	1.98%	2.34%	2.48%
Total number found fraudulent	67	71	71
% of apps investigated found fraudulent	33.00%	27.84%	37.17%

Nurse and CNA 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 a certificate, formal disciplinary action, or ordering the certificate holder to be placed on a term of monitoring or probation. When an 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 fiscal year.

Total Renewal Applications	17/18	18/19	19/20
Total renewal applications	21427	23239	21854
Total "Yes" renewal applications	117	135	146
% with "Yes" renewal applications	0.55%	0.58%	0.67%
Total "Yes" with discipline	3	2	4
Total potentially fraud app	43	64	22
% of potentially fraud apps	0.20%	0.28%	0.10%
Total number found fraudulent	16	23	13
% of apps investigated found fraudulent	37.21%	35.94%	59.09%

Though it appears that renewal applications have decreased, this is a trend that has been established for many years. Fewer licensees and certificate holders come due for renewal during odd years, such as FY 2019/2020, than they do during even years.

Complaint Investigation & 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.

After 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 & Discipline Statistics:

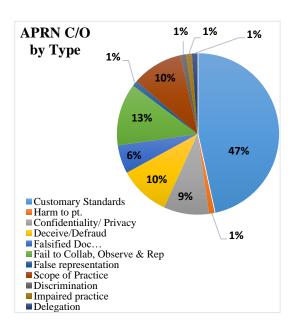
Total Number	of Acti	ve Licensees	17/18	18/19	19/20
Total licensed APRNs	S		1871	2450	2833
Percent change from	previous	year	13%	23%	14%
Complaints Ro	eceived	/Investigated	17/18	18/19	19/20
Total complaints rece	ived		**	**	130
Total of complaints o	pened to	investigation	**	80	94
Percentage of compla	ints by t	otal NV APRNs	4.00%	3.25%	3.30%
Discipline O	utcom	e Statistics	17/18	18/19	19/20
Total number of disci	pline ou	tcomes	5	6	0
Percent of licensees i	receiving	g discipline	0.26%	0.24%	0.00%
Percent of discipline	to comp	laints	6.30%	7.50%	0.00%
Days to Open an	d Reso	lve Complaints	17/18	18/19	19/20
Average number of da	ys to ca	se resolution	*91	*84	59.1
Average days for initial re	eview of	complaints rec'd	**	**	1.25

During the previous fiscal year, the number of APRN license holders increased by 23%, with an additional 579 licensees. The increase in FY 2019/2020 of 14% added 383 licensees. This increase was more consistent with the growth seen in years prior to FY 2019/2020. The number of practice-related complaints opened to investigation was 94, increasing moderately from the previous year's 80 investigations. APRN

investigations completed in FY 2019/2020 totaled 93. Investigations included those completed from the previous fiscal year and were concluded in an average of 59.1 business days.

*Data from FY 2017/2018 and FY 2018/2019 reflected higher total days to completion as those years included the time-period for final resolution taking place after investigations closed.

The origin of complaints did not change from those reported for FY 2018/2019. The two most common categories, Consumers and Government Agency, accounted for 61%. Changes in the type of complaints were increases in allegations regarding Scope of Practice and failure to Collaborate with the Healthcare Team and Observing and Reporting Change in Condition. Complaint allegations related to Patient Harm and False Representation decreased in FY 2019/2020.



Types of APRN Complaints		
Customary Standards	41	
Harm to pt.	1	
Confidentiality/ Privacy	8	
Deceive/Defraud	9	
Falsified Doc	5	
Fail to Collab, Observe & Rep	11	
False representation	1	
Scope of Practice	9	
Discrimination	1	
Impaired practice	1	
Delegation	1	

Nurse Complaint Investigations & Discipline Statistics:

During the previous two years, the number of license holders increased consistently by 5%. The number of license holders in FY 2019/2020 decreased by 2%. This decrease may have resulted from the declared state of emergency allowing for nurses licensed in another state to practice in Nevada, under a waiver, and without a Nevada license. The number of practice-related complaints opened to investigation was 233, decreasing from the previous year's 336. APRN, CRNA, RN, and LPN investigations completed in FY 2019/2020 totaled 309. Investigations included those completed from the prior fiscal year and were concluded in an average of 61.3 business days.

^{**} This category is new to FY 2019/2020, and comparative data from the previous period is not available.

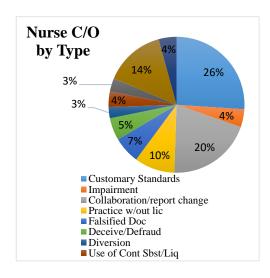
^{*}Data from FY 2017/2018 and FY 2018/2019 reflected higher total days to completion as those years included the time for final resolution taking place after investigations concluded.

^{**} This category is new to FY 2019/2020, and comparative data from the previous period is not available.

The origin of complaints did not change markedly from those reported for FY 2018/2019. The two most common categories remained Employers and Consumers, which accounted for 57% of all complaints opened to investigation. Self-reports decreased notably from 41 to 11. Complaints from government agencies and other boards decreased notably from 22 to 7.

Changes in the type of complaints were increases in allegations regarding Failure to Collaborate with the Healthcare Team and Failure to Observe and Report Significant Change in Condition. When combined, these two violations trended up to the second-highest type of allegation investigated. Allegations regarding Impairment and Using any Controlled Substance, Dangerous Drug, or Intoxicating Liquor also increased in FY 2019/2020. Complaint allegations related to Diversion and Confidentiality both decreased in FY 2019/2020.

Total Number	of Acti	ive Licensees	17/18	18/19	19/20
Total licensed nurses	(LPN, R	RN, CRNA, APRN)	44555	46850	47834
Percent change from	previous	s year	5%	5%	2%
Complaints Ro	eceived	/Investigated	17/18	18/19	19/20
Total complaints received	(LPN, R	RN, CRNA, APN)	**	**	380
Total of complaints of	pened to	investigation	**	336	233
Percentage of compla	ints by t	total NV nurses	**	0.72%	0.48%
Discipline O	utcom	e Statistics	17/18	18/19	19/20
Total discipline outco	mes		97	103	69
Percent of licensees i	eceiving	g discipline	0.21%	0.21%	0.14%
Percent of discipline	to comp	olaints	15%	28%	30%
Days to Open an	d Reso	lve Complaints	17/18	18/19	19/20
Average number of da	ys to ca	se resolution	94	103	61.3
Average days for initial re	eview of	complaints rec'd	**	**	1.25



Types of Nurse Complaints		
Customary Standards	49	
Impairment	8	
Collaboration/report change	38	
Practice w/out lic	18	
Falsified Doc	12	
Deceive/Defraud	10	
Diversion	5	
Use of Cont Sbst/Liq	7	
Privacy/Confidentiality	6	
Scope of Practice	27	
Document Narc	8	

CNA Complaint Investigations & Discipline Statistics:

During the past two years, the number of active certificate holders in Nevada has increased by nearly 7%. The number of certificate holders in FY 2019/2020 decreased by 3.5 %. This decrease follows a slowing increase in the number of CNA certificate holders noted in the FY 2018/2019 when the number of certificate holders increased by only 1%. The declared state of emergency allowing certificate holders certified in another state to practice in Nevada under a waiver without a Nevada certificate may have contributed to this decrease.

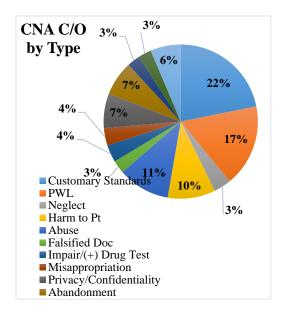
The number of practice-related complaints opened to investigation was 67, remaining constant from the previous year's 69. CNA investigations completed in FY 2019/2020 totaled 55 and were concluded in an average of 61.3 business days.

The origin of complaints did not vary notably from FY 2018/2019, with facility-driven complaints remaining the most common at 51% of all complaints. Changes in the type of complaints were decreases in allegations of neglect and increases in allegations related to Confidentiality, Abandonment, and Failure to Collaborate with the Healthcare Team.

Total Number of Active Certificate Holders	17/18	18/19	19/20
Total certificated CNAs	9344	9424	9090
Percent increase from previous year	6.76%	0.95%	-3.50%
Complaints Received/Investigated	17/18	18/19	19/20
Total complaints received	**	**	76
Total of complaints opened to investigation	**	69	67
Percentage of complaints by total NV CNAs	**	0.80%	0.73%
Discipline Outcome Statistics	17/18	18/19	19/20
Total discipline outcomes	42	29	13
Percent of certificate holders receiving discipline	0.44%	0.31%	0.14%
Percent of discipline to complaints	#####	#####	19.00%
Days to Open and Resolve Complaints	17/18	18/19	19/20
Average total days from Opened to Case Review	*94	*93	61.3
Average days for initial review of complaints rec'd	**	N/A	1.25

^{*}Data from FY 2017/2018 and FY 2018/2019 reflected higher total days to completion as those years included the time-period for final resolution taking place after investigations were completed.

^{**} This category is new to FY 2019/2020, and comparative data is not available from the previous period.



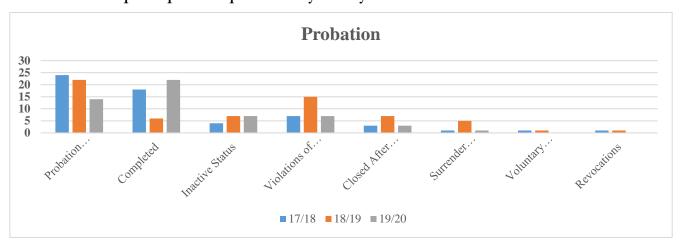
Types of CNA Compl	aints
Customary Standards	24
PWL	19
Neglect	4
Harm to Pt	11
Abuse	12
Falsified Doc	3
Impair/(+) Drug Test	4
Misappropriation	4
Privacy/Confidentiality	8
Abandonment	8
Boundaries	3
Scope of Practice	3
Fail to Collaborate	7

Compliance & Monitoring

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 if qualified, to re-enter nursing practice when a substance use disorder has been identified.

Probation may be 1-5 years in length and may require substance use disorder stipulations, practice stipulations or a combination of both depending on the nature of the violation. Program completion by participants relates to the length of the order/agreement or violations leading to surrender or revocation of certificate/license.

Total number of participants on probation by fiscal year:



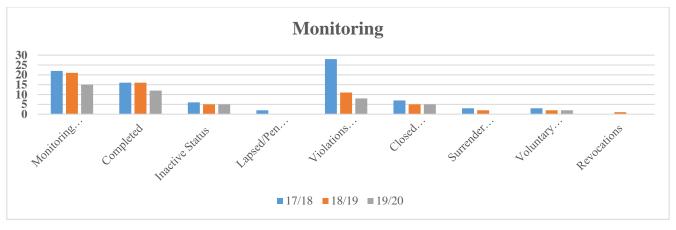
Eight (8) nursing assistants and sixty (60) nurses are on Probation by Agreement or by Board Order.

Probation Status	17/18	18/19	19/20
Probation Agreement/Order	24	22	14
Completed	18	6	22
Inactive Status	4	7	7
Violations of Board Orders	7	15	7
Closed After Investigation ***	3	7	3
Surrender Pending Hearing	1	5	1
Voluntary Surrender	1	1	0
Revocations	1	1	0
Total Participants on Probation	62	76	68

^{***}An investigation of an order violation is closed after the violation has been resolved. Examples include failing to submit reports or failing to attend ordered meetings. The investigation is closed after the nurse complies with the stipulation.

Total number of participants on monitoring by fiscal year:

Monitoring may be 1 - 5 years in length and may include some or all substance use disorder stipulations. Five (5) nursing assistants and eighty-five (85) nurses are currently active in the Monitoring Program.



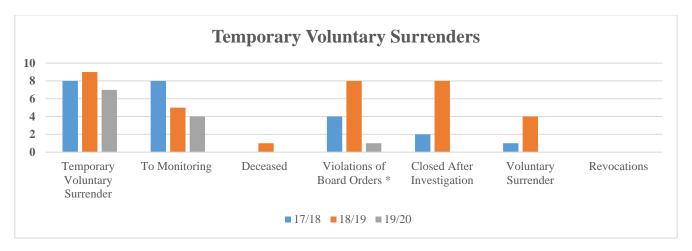
Monitoring Status	17/18	18/19	19/20
Monitoring Agreement/Order	22	21	15
Completed	16	16	12
Inactive Status	6	5	5
Lapsed/Pending	2	0	0
Violations of Board Orders *	28	11	8
Closed After Investigation **	7	5	5
Surrender Pending Hearing	3	2	0
Voluntary Surrender	3	2	2
Revocations	0	1	0
Total Participants on Monitoring	87	89	90

^{*}The primary violations of Board Orders included positive drug tests, failing to submit quarterly reports, and failing to attend meetings. Our current system allows us to identify violations earlier and allows the participant to promptly address the violation, reducing the need to open a complaint.

^{**}An investigation of an order violation is closed after the violation has been resolved. Examples include failing to submit reports or failing to attend ordered meetings. The investigation is closed after the nurse complies with the stipulation.

Temporary voluntary surrender statistics by fiscal year:

The Alternative Program requires the nurse or CNA to sign a temporary voluntary surrender of license to begin the program, which requires, completion of a Board approved treatment program, attendance at ninety (90) AA/NA meetings for ninety (90) days in a row, abstinence and drug testing, submission of monthly self, counselor, and sponsor reports. After completion of treatment, the nurse or CNA may request to return to practice. Once they have completed all requirements and have submitted a fitness for duty report from their provider, indicating they are safe to return to practice, they are placed on a five (5) year period of monitoring with stipulations that include abstinence and drug testing, counseling, attendance at AA/NA and nurse support group meetings, and sponsorship. The nurse or CNA must submit counselor, sponsor, supervisor, and self-reports to the Board on a monthly or quarterly basis.



Zero (0) nursing assistants and twelve (12) nurses are currently active in the Alternative Program.

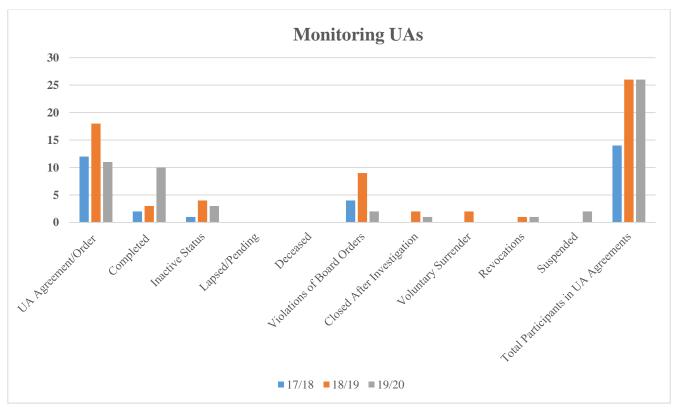
A decrease in transition from Temporary Voluntary Surrender to Monitoring is related to violations resulting in the voluntary surrender of license or probation of license and the increased amount of time nurses allow themselves to return to practice.

Temporary Voluntary Surrender Status	17/18	18/19	19/20
Temporary Voluntary Surrender	8	9	7
To Monitoring	8	5	4
Deceased	0	1	0
Violations of Board Orders *	4	8	1
Closed After Investigation	2	8	0
Voluntary Surrender	1	4	0
Revocations	0	0	0
Current Temporary Voluntary Surrenders	10	9	12

^{*}Violations of the Temporary Voluntary Surrender are related to positive drug tests or self-report of relapse.

Monitoring Urine Analysis Statistics:

Monitoring UAs require abstinence and drug screens only. Seven (7) nursing assistants and nineteen (19) nurses are being monitored for abstinence and UAs only.



Monitoring UA Status	17/18	18/19	19/20
UA Agreement/Order	12	18	11
Completed	2	3	10
Inactive Status	1	4	3
Lapsed/Pending	0	0	0
Deceased	0	0	0
Violations of Board Orders	4	9	2
Closed After Investigation	0	2	1
Voluntary Surrender	0	2	0
Revocations	0	1	1
Suspended	0	0	2
Total Participants in UA Agreements	14	26	26

^{*}There has been an increase in offering this type of agreement related to the triage process in the application department and the case review process.

^{**}A decreasing number of completed UA agreements is related to increasing the agreements' length of time from one (1) year to up to three (3) years.

Continuing Education Audits

Nurse Continuing Education 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 completing a one-time board-approved 4 CE bioterrorism course and meeting all other renewal requirements. APRNs must complete 45 CEs directly related to their role or population focus. Certified Registered Nurse Anesthetists (CRNAs) must complete 45 CEs related to practice as a nurse anesthetist and meet 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.

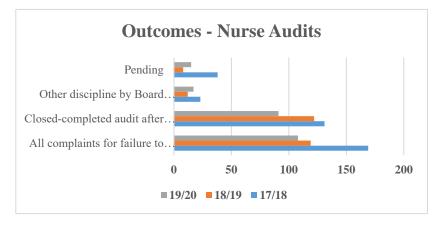
Nurse Audits				
Timeline-Fiscal Year	17/18	18/19	19/20	
Total Audits Completed	1879	667	1701	
Total Successfully Completed Requirements	1710	548	1593	
Total Complaints Opened for Failing to Comply	169	119	108	

*FY18/19 The transition to a new licensure system resulted in the number of audits decreasing.

Outcomes-Complaints Based on Failure to Meet Audit Requirements			
Timeline-Fiscal Year	17/18	18/19	19/20
All complaints for failure to comply with audit	169	119	108
Closed-completed audit after complaint opened	131	122	91
Other discipline by Board (Reprimand, fine, CE)	23	12	17
Pending	38	8	15

Percentage of All Renewal Applicants			
Timeline-Fiscal Year	17/18	18/19	19/20
Nurses Audited	10.0%	3.4%	9.2%
Completed without Investigation	91.0%	82.2%	93.7%

Percentage of Nurse Audit Complaints			
Timeline-Fiscal Year	17/18	18/19	19/20
Leading to investigation	9.0%	17.8%	6.3%
Closed after complaint opened	77.5%	102.5%	84.3%
Other discipline by Board	13.6%	10.1%	15.7%



CNA Continuing Education Audits and Outcomes:

To be eligible for renewal of a certificate, CNAs must 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.

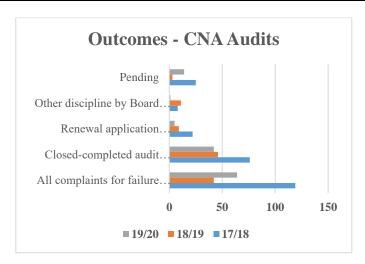
CNA Audits			
Timeline-Fiscal Year	17/18	18/19	19/20
Total Audits Completed	358	97	286
Total Successfully Completed Requirements	224	55	222
Total Complaints Opened for Failing to Comply	119	42	64

Outcomes-Complaints Based on Failure to Meet Audit Requirements			
Timeline-Fiscal Year	17/18	18/19	19/20
All complaints for failure to comply with audit	119	42	64
Closed-completed audit after complaint opened	76	46	42
Renewal application denied by Board	22	9	5
Other discipline by Board (Reprimand, fine, CE)	8	11	1
Pending	25	3	14

^{*}FY 2018/2019 The transition to a new licensure system resulted in the number of audits decreasing.

Percentage of All Renewal Applicants			
Timeline-Fiscal Year	17/18	18/19	19/20
CNAs Audited	10.0%	2.5%	8.5%
Completed without Investigation	62.6%	56.7%	77.6%

Percentage of CNA Audit Complaints			
Timeline-Fiscal Year	17/18	18/19	19/20
Leading to investigation	33.2%	43.3%	22.4%
Closed after complaint opened	63.9%	109.5%	65.6%
Other discipline by Board	6.7%	26.2%	1.6%



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