

Nevada State Board of **NURSING**



ANNUAL REPORT FISCAL YEAR 2020/2021



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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
NURSING

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

- 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 on disciplinary probation.
- Administering the Board's alternative program for nurses and CNAs recovering from substance use disorders.

NSBN BOARD MEMBERS



**Susan S. VanBeuge, DNP, APRN, FNP-BC,
FAANP, FAAN, Board President**



**Jacob Watts, CNA
Board Vice-President**



**Ovidia McGuinness, LPN
Board Secretary**



Richelle O'Driscoll



**Branden Murphy, MSNed, CPN,
CCRN**



**Cheryl Maes, PH.D.,
APRN, FNP-BC**



**Tracey McCollum, MSN, RN,
CENP, NEA-BC**

MESSAGE FROM THE EXECUTIVE DIRECTOR AND BOARD PRESIDENT

If this year has taught us anything, it is never to expect the expected. While many of us hoped we would see an end to the COVID-19 pandemic, its resurgence has told us that it will not go away easily.

The Nevada State Board of Nursing (NSBN) remained "open" during the pandemic, continuing its daily operations. Board meetings were held primarily in the virtual space through the middle of 2021. A hybrid approach allowed the public and board members to participate virtually or in-person in the middle of the year. We are proud of this new opportunity for the public, which offers alternatives to attend board meetings.

The 81st Legislative session took place, albeit mainly on a virtual platform. The Nursing Licensure Compact (NLC) was introduced as Assembly Bill 142 and sent to the Commerce and Labor Committee from the Assembly floor. After going to the committee, it was never introduced and was timed out without being heard. The NLC was widely supported by nursing organizations, legislators, and nursing in Nevada. Currently, 37 states, including the territory of Guam, are participants in the NLC.

Other pieces of legislation that did pass include Assembly Bill 91, mandating that an Advanced Practice Registered Nurse (APRN) be a member of the NSBN Board. Currently, four of the seven board members must be registered nurses. Although the NSBN is fortunate to have APRNs currently serving appointments on the board, it has not been a requirement until now. There are approximately 4,000 APRNs in Nevada, and their representation on the board is important.

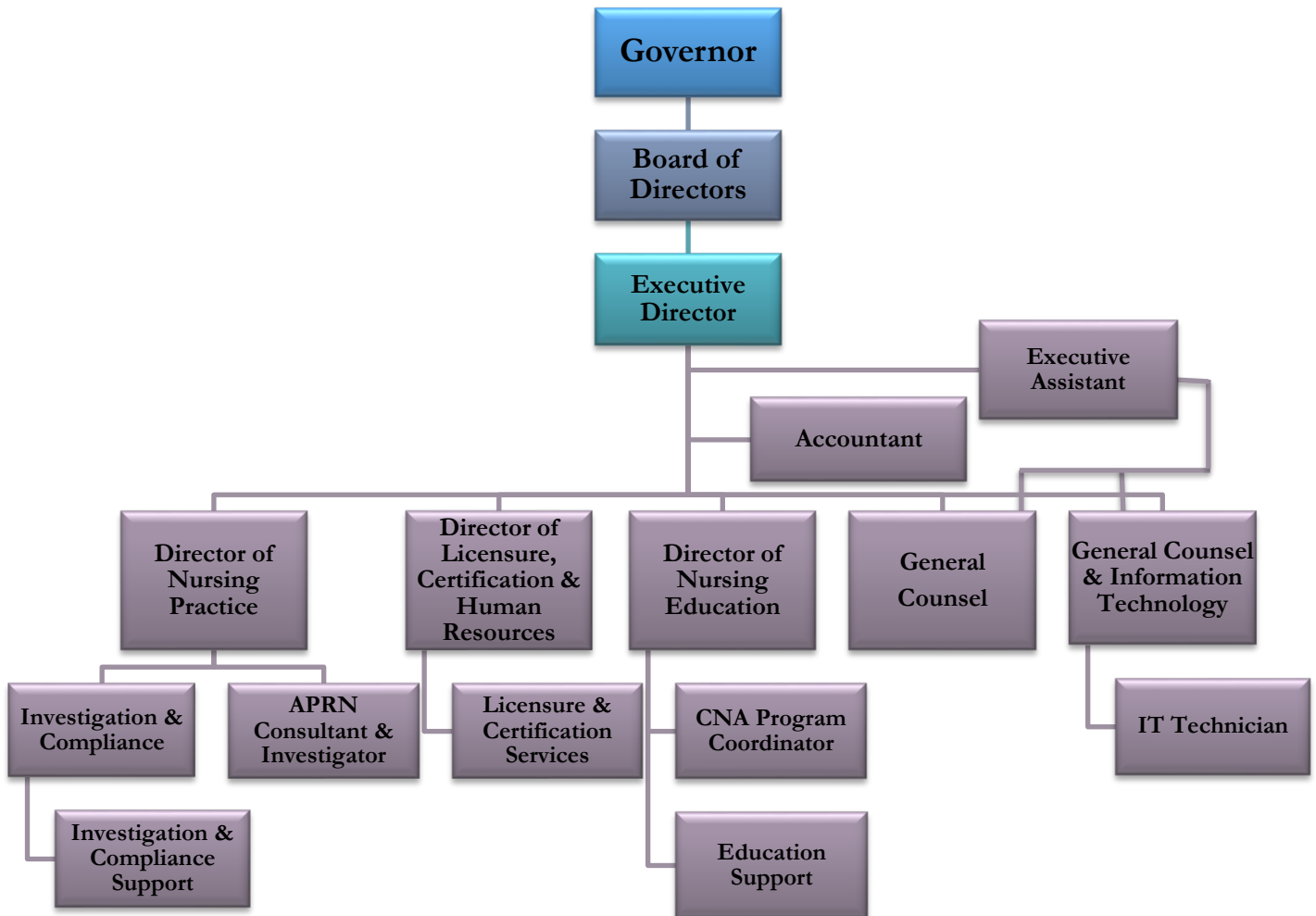
Assembly Bill 327 requires that every licensee holder complete two hours of continuing education regarding Cultural Competency and Diversity, Equity, and Inclusion. This goes into effect on January 1, 2022.

As the year comes to a close, we want to thank all Nevada Nurses for their hard work and dedication during these challenging times and celebrate the work of providing safe and compassionate care.

Cathy Dinawer, MSN, RN, FRE
Executive Director

Susan VanBeuge, DNP, APRN, FNP-BC, FAANP, FAAN
Board President

ORGANIZATIONAL STRUCTURE



BOARD STAFF

Executive Director

Catherine 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, MS, APRN, CPNP-PC

Director of Nursing Education

Gail Trujillo, MS, CPM, SHRM-CP

Director of Licensure and Certification & Human
Resources

Jan Hewitt

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

Cynthia Peterson, RN, CLNC, CHCQM

Nurse Investigator

Elaine Ralph, MSN, RN, FN-CSp

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

Courteney Baccei

Management Assistant

Brittney Hetzer

Management Assistant

Cydnee Cernas (Perez)

Management Assistant

Tamara Pachak, BSN

CNA Program Coordinator

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.

Staff collaborated with state-wide regulatory agencies and other stakeholders to address the COVID-19 pandemic and roll-out of the COVID-19 vaccine.

Staff worked with State Legislators regarding legislative initiatives such as the Nurse Licensure Compact (NLC) and AB91.

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 Nevada Immunization, AARP, the National Council of State Boards of Nursing (NCSBN), Crisis Standards of Care Committee, and the Nevada Action Coalition.

Staff provided presentations to NCSBN, Board of Nursing Investigation training (BONIT) for new regulatory staff.

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 NSBN hired a CNA Coordinator to oversee CNA programs in Nevada.

Fiscal Year 2020/2021 Nursing Programs

- ✓ Fully approved nursing programs in Nevada: 13
- ✓ Programs approved to conduct only the clinical portion of the program in Nevada: 2
- ✓ Programs under Provisional or Conditional Approval*: 4

** 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 2020/2021 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: 90.62%%
- ✓ National NCLEX average pass rate: 83.47%
- ✓ Nevada NCLEX-PN average pass rate: 80.00%
- ✓ National NCLEX-PN average pass rate: 80.02%

Fiscal Year 2020/2021 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. In addition, the Board created a new full-time staff position, a CNA Training Program Coordinator, to assist with surveying, approving, and monitoring CNA training programs.

- ✓ Written exam Nevada pass rate: 81%
- ✓ Skills exam Nevada pass rate: 76%

Graduates from Nevada Nursing Programs	18/19	19/20	20/21
PhD - University of Nevada, Las Vegas	4	4	7
DNP - University of Nevada, Las Vegas	10	10	14
DNP - University of Nevada, Reno	13	19	34
Post MSN certificate - University of Nevada, Las Vegas	2	2	0
Post MSN certificate - University of Nevada, Reno	6	7	18
MSN - University of Nevada, Las Vegas	19	19	0
MSN - University of Nevada, Reno	31	32	29
RN to BSN - Great Basin College	15	32	24
RN to BSN - Nevada State College	78	78	146
RN to BSN - University of Nevada, Reno	24	25	18
BSN- Arizona College	35	61	83
BSN- Chamberlain University	97	81	115
BSN - Nevada State College	176	176	201
BSN - Roseman University	214	214	160
BSN - University of Nevada, Las Vegas	136	146	196
BSN - University of Nevada, Reno	123	125	159
AAS - Altierus Career College, formerly Everest College	50	X	X
AAS - Carrington College, Reno	79	79	164
AAS - College of Southern Nevada	209	209	192
AAS - Great Basin College	30	26	38
AAS- Las Vegas College	X	X	2
ADN - Western Nevada College	52	52	50
AS - Truckee Meadows Community College	55	55	71
LPN - Brightwood College	51	X	X
LPN - College of Southern Nevada	0	0	16
LPN- Unitek College	X	X	11
Total	1,509	1,452	1,748

X=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:

- Aaron Bellow Jr., PhD, APRN, FNP-BC - Henderson - November 2023
- Pamela Burgio, MSN, RN, APRN, PNP - Sparks - November 2023
- Rhone D'Errico, MSN, APRN-BC, FNP-C, PMHNP-BC - Las Vegas - March 2021
- Kelly Jo Fluitt, APRN-C – Carson City – September 2023
- Stephen Ingerson, MSN, APRN, CNS – Henderson-July 2022
- Cheryl A. Maes, PhD, MSN, APRN, FNP-BC - Las Vegas - July 2022
- Kelly Mecham, DNP, MSN, APRN, FNP-BC - Henderson - September 2021
- Jeanine Packham, DNP, ACNP-BC, CCRN-CMC, PHN - Reno - November 2023
- Teresa Praus, MSN, APRN, FNP-BC - Las Vegas, - July 2022
- Patricia Strobehn, MSN, APRN, M FNP-BC - Las Vegas - July 2022
- Dominic M. Etli, FNP-C - Las Vegas – November 2023

Description & Accomplishments:

- 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).
- Reviewed and addressed revisions or updated the following practice decisions:
 - The Role of the RN in Sexual Assault Examination
 - The Role of the RN in Thrombolytic Therapy
 - The RN Scope in Non-Hospital IV Hydration Practice
 - The APRN Scope in Intubation
 - The APRN Scope in Intrauterine Insemination (IUI)

- Reviewed, discussed, and approved recommending to the Board to allow licensed health care providers, in addition to physicians and APRNs, to provide didactic instruction and clinical experiences to APRN students pursuant to NAC 632.260 (1)(a)(1) and NAC 632.260 (2).
- Reviewed, discussed, and approved recommending to the Board to support proposed changes to NRS.442.250 to include APRNs in the definition of practitioners to be authorized to perform abortions.

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 aides-certified.*

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

Members:

- M. Jeanne Hesterlee, RN (Bureau of Health Care Quality and Compliance) - Carson City - Indefinite
- Robert Kidd (Long Term Care) - Reno - September 2021
- Rhonda Meyer, RN, (Division of Healthcare Financing and Policy) - Elko - Indefinite
- Jennifer Williams-Woods (Division of Aging Services) - Reno - Indefinite
- Carla Wright, MSNed, RN (RN member) - North Las Vegas – Indefinite
- Claudette Lachowiz, RN (Home Health Representative) – Las Vegas, January 2022
- Mila Revilla, RN (Acute Care Representative) – Las Vegas – January 2022

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

Description & Accomplishments:

- Pending site visits for all programs.
- Began discussions to hold a CNA Conference.
- Approved CNA programs to utilize simulation.
- The Committee continuously reviewed CNA examination pass rates.
- Reviewed new skills which have been added to certification exam beginning 01/01/2021

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 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:

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

Description & Accomplishments:

- Completed research and development of support strategies for nurses and CNAs in monitoring programs with Substance Use Disorder, mental health disorders, and dual diagnosis.
- 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 education and continuing education matters. The Committee consists of representatives from nursing education, nursing associations, and employers.

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

Members:

- Kimberly Baxter, DNP, APRN, FNP-BC (UNR, Orvis School of Nursing) - Reno - May 2022
- Irene Coons, PhD, RN, CNE (College of Southern Nevada) - Las Vegas - May 2022
- Judith Cordia, EdD, RN (Western Nevada College) - Carson City - July 2020
- Jody Covert, DNP, RN (Truckee Meadows Community College) - Reno - September 2023
- Nancy Hence-Cywinski, RN, BSN, MS, NHA (CCDS) - Las Vegas - May 2022
- Amber Donnelly, PhD, RN, CNE (Great Basin College) - Elko – May 2023
- Brian C. Oxhorn, PhD, RN (Roseman University) - Las Vegas - May 2021
- Kyle Salinas, Student, (Chamberlain University) - Las Vegas - May 2022
- Ruby Wertz, MSHA, BSN, RN (Nevada State College) - Las Vegas - May 2022
- Angela Silvestri-Elmore, PhD, APRN, FNP-BC, CNE – Las Vegas – September 2023
- Michael Johnson, PhD, RN, CNE – Henderson – November 2023
- Susan Drossulis, MSN, RN, OCN-BC – Reno – May 2023
- Vicki Walker, DNP, RN – Las Vegas – January 2022

Description & Accomplishments:

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

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:

- Jessica Carlson, MSN, Ed., Phd ABD, RN-Henderson-July 2022
- Ginger Evors (Fidel), MSN, RN, OCN, CNL-Las Vegas- May 2022
- Mary Field, RN, BSN – Carson City – Indefinite
- Marilyn Jeanne Hesterlee, RN – Carson City – Indefinite
- Greg Highfill-Nursing Student-Minden - July 2022
- Laura Kennedy, BSN, RN, MBA-Sparks - January 2024
- Michelle McNary, LPN-RN-July 2024
- Chelsea Minto, BSN, RN, CNML – Reno – May 2022
- Nicole Sirotek, RN-Elko-May 2022
- Shanna Kennon MSN, RN – Reno – January 2023
- Debra Adornetto-Garcia, DNP, RN, AOCH, NEA-BC – Reno – March 2024

Description & Accomplishments:

- Researched, reviewed, and approved revisions to The Role of the RN in Ultrasound in Antepartum Testing.
- Researched, reviewed, and approved revisions to The Role of the RN in Sexual Assault Examination practice decision.
- Researched, reviewed, and approved the continuance of existing practice decision regarding Administration of Prostaglandins without changes.
- Researched and proposed revisions to the practice decision regarding the Vaginal Speculum Examination practice decision.
- Researched, developed, and approved new practice decision titled Out of Hospital Administration of IV Solutions and Medications (approved by the Board 11/2020)
- Researched, reviewed, and approved revisions to The Role of the RN in Intubation practice decision.
- Researched, reviewed, and approved revisions to The Role of the RN and LPN in Complementary Therapies/Modalities practice decision.
- Researched, reviewed, and approved revisions to Operational definitions for protocol, standing orders, and preprinted order set practice decision

- Researched, reviewed, and approved revisions to The Role of the RN in Thrombolytic Therapy practice decision
- Reviewed and discussed revisions to the Post-Coital Testing practice decision.
- Researched, reviewed, and approved revisions to The Role of the RN and LPN with Gastrostomy Tubes practice decision.
- Reviewed, researched, and discussed possible revisions to practice decisions titled:
 - Medical Decisions to EMS.
 - Interfacility Transfers
 - Paramedic practice
- Researched, reviewed, and approved revisions to The Practice Guidelines for Telenursing practice decision
- Reviewed and discussed presentation to committee titled Exploring Nurse Jurisprudence and Ethics on Nursing Practice in Nevada Nursing Practice

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:

- Cheri Crumley, LPN - Las Vegas – September 2024
- Daryl Lauffer, LPN - South Lake Tahoe - July 2021
- Kyle McComas, RN - Pahrump - September 2024
- Kathleen Mohn, RN - Las Vegas - September 2024
- Cynthia Morris, LPN - Las Vegas - July 2021
- Dr. Mary Jo Noble, RN - Las Vegas - July 2021
- Carl Balcom, MBA, BSN, RN, NEA-BC, CHE, FACHE – Las Vegas – September 2022
- Christy Coss, RN – Washoe Valley – September 2022

Description & Accomplishments:

- Researched, reviewed, and proposed revisions to The Role of the RN and LPN in Complementary Therapies/Modalities practice decision Reviewed, researched, and approved new practice decision titled LPN Scope of Practice Regarding Assessment and Minimum Data Sets (MDS)/Resident Assessment Inventory (RAI).

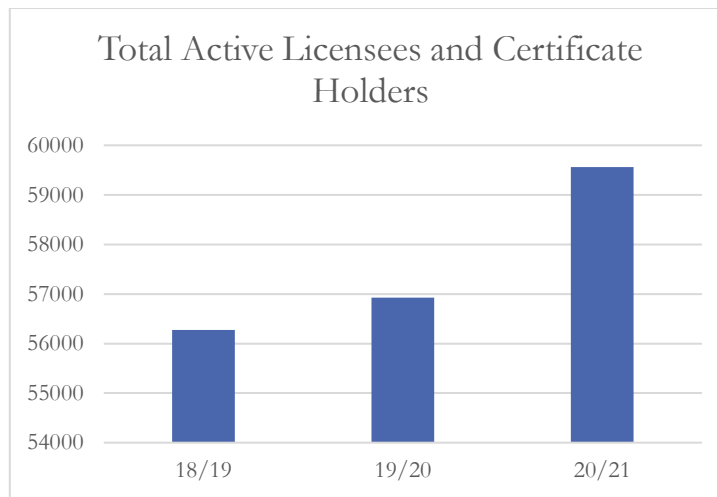
- Researched, reviewed, and approved revisions to The Role of the RN and LPN with Gastrostomy Tubes practice decision.
- Reviewed, researched, and proposed new practice decision titled The LPN Scope of Practice Regarding Phlebotomy and Blood Sampling Collection. Reviewed, discussed, and advised LPN IV certification educational programs conforming to NAC 632.470 and NAC 632.475 using a virtual modality.
- Reviewed, discussed, and advised regarding the role of the LPN and standing orders.
- Reviewed, discussed, and rescinded the Nevada State Board of Nursing Practice decision addressing the LPN and Postmortem Eucleation.

ANNUAL REVIEW BY THE NUMBERS

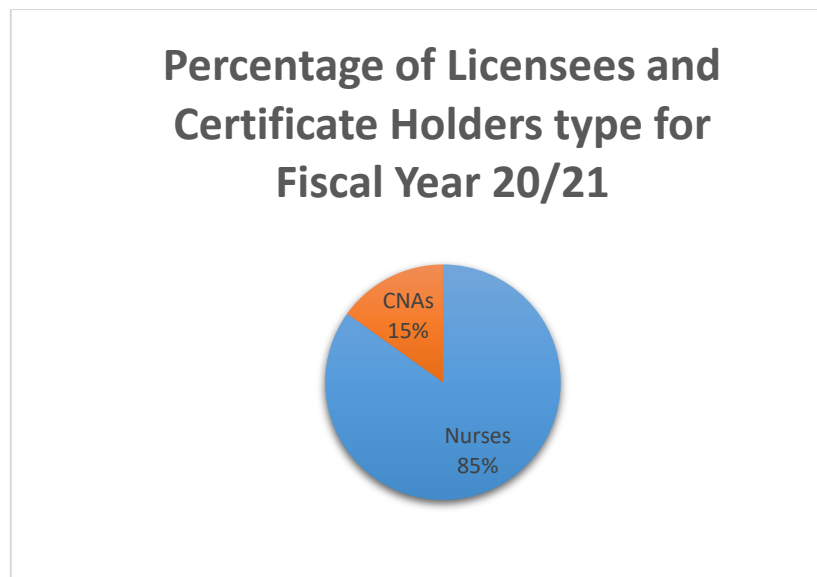
The Board reviews a minimum of three years of statistical data annually to identify trends in licensure, certification, investigation, discipline, continuing education, audits, and compliance. The data is collected contemporaneously throughout the fiscal year, from July 1 through June 30.

Licensure & Certification

Total number of Active Licensees and Certificate Holders



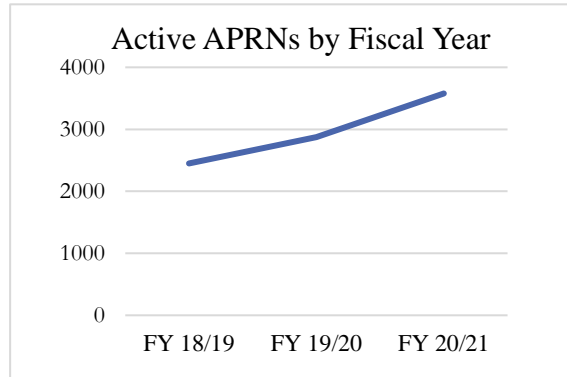
Total number of Licensees and Certificate Holders by license type for Fiscal year 2020/2021:



Advanced Practice Registered Nurses

Number of APRNs with an Active License:

Active APRNs	
FY 18/19	2450
FY 19/20	2872
FY 20/21	3578

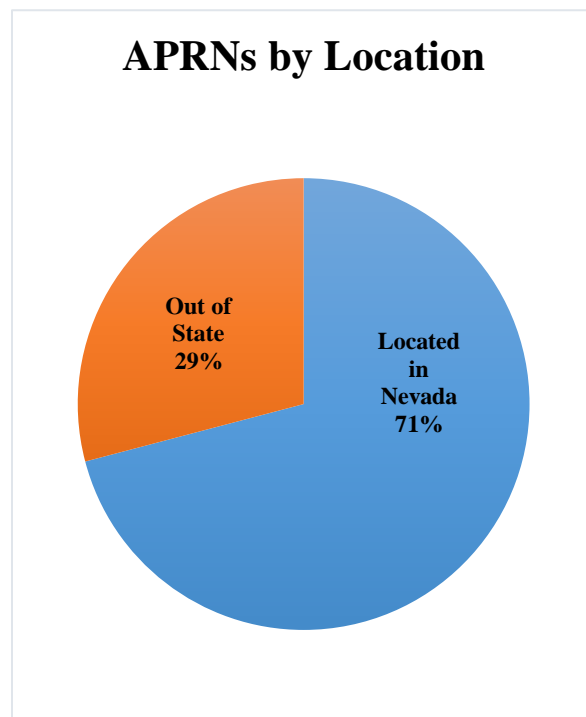


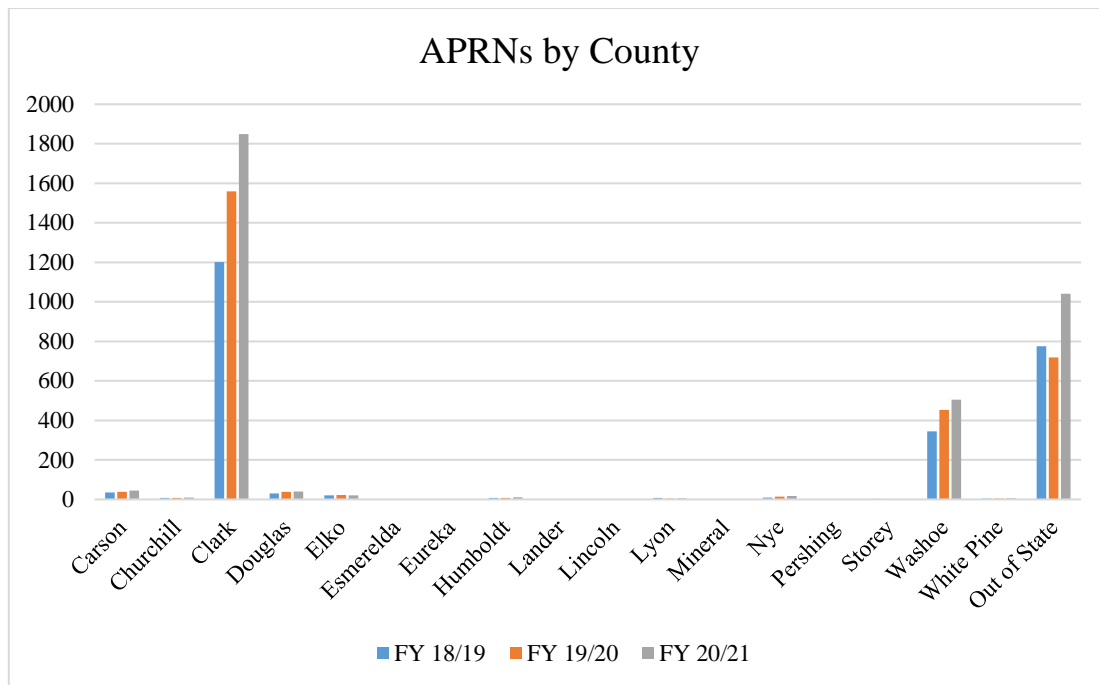
APRNs by Location:

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.

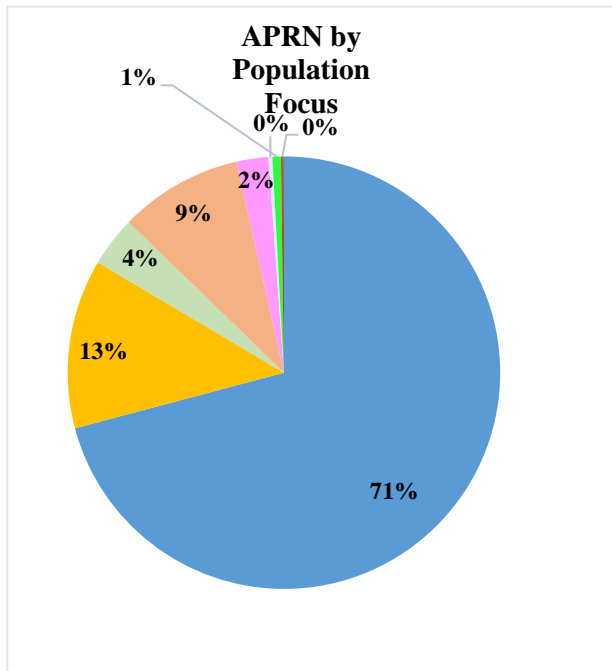
In-state APRNs by County:

APRNs by County			
	FY 18/19	FY 19/20	FY 20/21
Carson	35	39	45
Churchill	7	7	9
Clark	1202	1559	1849
Douglas	30	38	40
Elko	21	22	21
Esmerelda	0	0	0
Eureka	2	2	1
Humboldt	7	7	11
Lander	1	1	1
Lincoln	1	1	2
Lyon	7	4	6
Mineral	0	0	0
Nye	9	14	17
Pershing	1	1	1
Storey	3	1	1
Washoe	345	453	505
White Pine	4	5	6
Out of State	775	718	1041



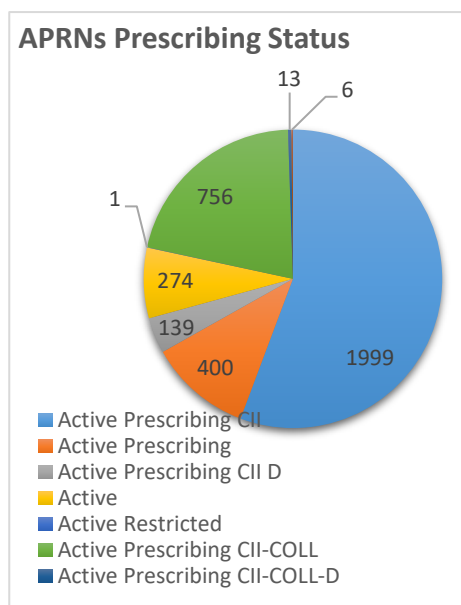


APRNs by Population Focus:



APRNs by Populations of Focus	FY 20/21
Family Nurse Practitioner	2490
Adult-Gerontology Nurse Practitioner	445
Women's Health Care Nurse Practitioner	131
Psychiatric/Mental Health Nurse Practitioner	324
Pediatric Nurse Practitioner	84
Nurse Midwife	10
Neonatal Nurse Practitioner	22
Clinical Nurse Specialist	8

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.
- 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, dispensing, 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.

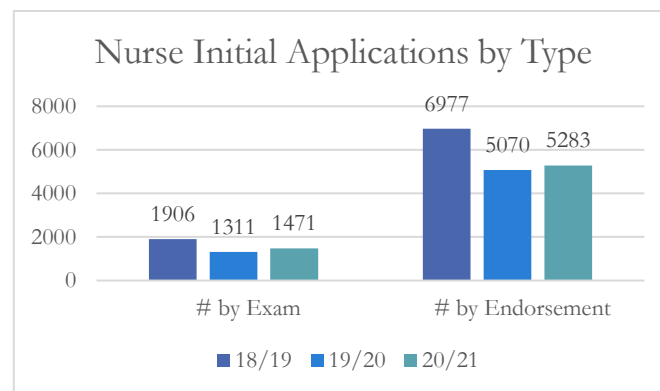
APRNs Prescribing Status	FY 19/20	FY 20/21
Active Prescribing CII	1191	1999
Active Prescribing	260	400
Active Prescribing CII D	72	139
Active	182	274
Active Restricted	0	1
Active Prescribing CII-COLL	260	756
Active Prescribing CII-COLL-D	5	13
Active Prescribing-D	5	6

Applications

The number of applications significantly decreased during FY 2019/2020 and remained lower than usual again in FY 2020/2021. It is likely related to the COVID-19 pandemic. Many travel nurses are allowed to work in Nevada after completing a separate Waiver application without submitting an official endorsement application. In addition, the nursing education programs were affected, resulting in a 30% decrease in exam applicants for the past two years. Though initial applicants have decreased, it is noted that significantly more renewal applications were processed during this fiscal year. Despite the trend noted for many years that even years such as FY 20/21 routinely has more renewal applicants due than in odd years, greater than 5,000 more renewals were processed than in the past even fiscal year of FY 18/19. Staff believes this to be related to the pandemic as many nurses and CNAs have postponed retirement and other reasons for leaving the nursing profession. Many others have returned to nursing to be of service during these trying times.

Nurse initial applications by type:

Endorsement applicants hold 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	18/19	19/20	20/21
Total number of active licenses	46850	47834	50563
# Nurse Initial Applications	8883	6381	6754
# by Exam	1906	1311	1471
# by Endorsement	6977	5070	5283
# with "Yes" Answers	731	727	720
% with "Yes" Answers	8.2%	11.4%	10.7%
# of "Yes" with Discipline	2	11	7
% "Yes" with Discipline	0.3%	1.5%	1.0%
# Potentially Fraudulent	146	116	150
% Potentially Fraudulent	1.6%	1.8%	2.2%
# Found Fraudulent	39	39	43
# Fraudulent with Discipline	0	0	0
No case	8006	5538	5884

"Yes" Dispositions	18/19	19/20	20/21
Accepted by Board	13	19	13
Probation/Monitoring	5	15	9
Denied by Board	1	4	2
Staff Denial Ratified	0	0	0
Staff Denial Overturned	0	0	0
Denied by Staff	0	0	0
Cleared by Staff	747	598	667
Lapsed after one year	38	33	33
Reprimand/Fine/CE	0	0	0
Pending <i>not incl in total dispositions</i>	58	57	63
Total Dispositions	804	669	724

2020/2021 Application Breakdown:

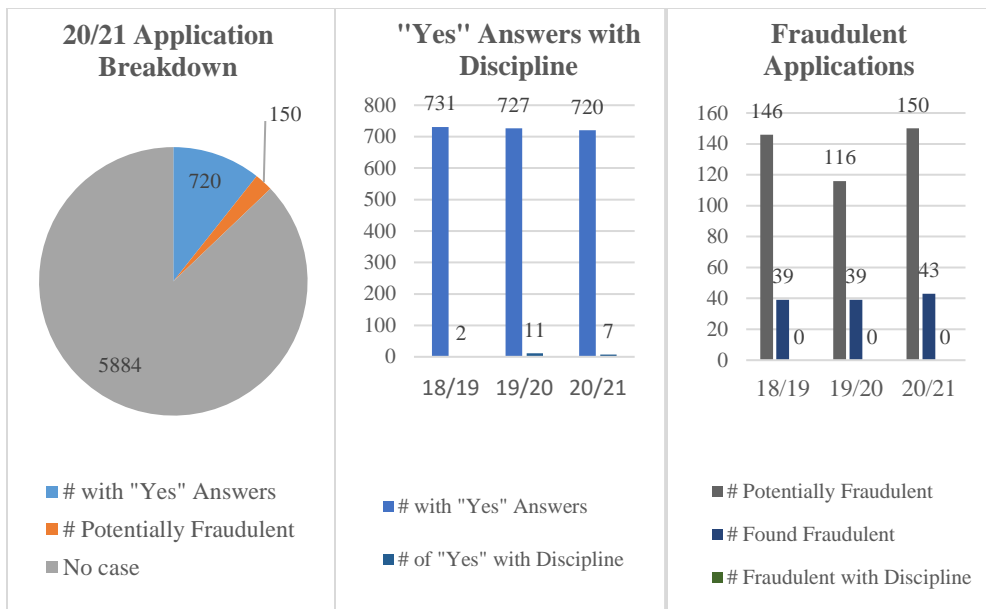
Though the total number of applications has decreased in the past two years, the percentage of "Yes" has increased. This is due to a new report system from ORBS, which includes ALL "Yes" answers, including speeding tickets, previously addressed issues, etc., which were not counted in years past. The greater number of people answering yes also accounts for fewer fraudulent applications. Implementation of ORBS has significantly streamlined the processing of these applications.

The volume of applications being processed within both of the Board's offices remains high. Staff productivity relative to processing applications at all levels remains very effective, as evidenced by the number of licensed/certified and the number of dispositions for those processed through investigations.

Fewer people submitted applications requiring review for possible fraudulent answers in the past two years, though the percentage of those found to be fraudulent was greater. With the implementation of ORBS, the screening questions were slightly reworded, which likely accounts for this shift.

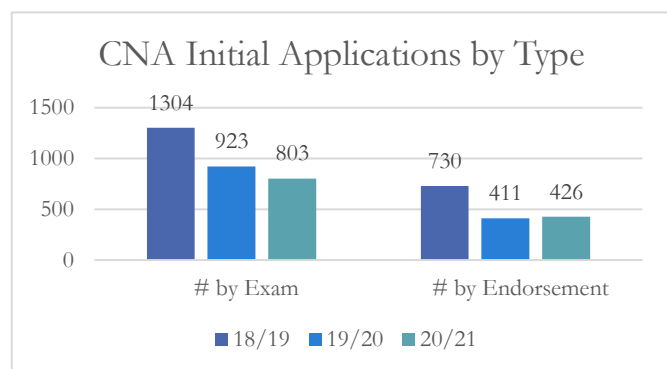
Criminal conviction issues continue to account for the highest numbers of both "Yes" answer and fraudulent applications.

Staff continues to conduct licensure and certification presentations throughout the state to ensure new graduates are well informed of the application and Board processes. These presentations are now being held virtually due to the pandemic.



Nursing Assistant initial applications by type:

Endorsement applicants hold 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. Initial CNA applications continued to decline during this fiscal year. This is likely due to the COVID 19 pandemic, which significantly affected the CNA training programs in Nevada and allowed people to work in Nevada by submitting a Waiver application instead of the customary Endorsement application.



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	18/19	19/20	20/21
Total number of CNAs	9424	9090	8998
# Initial CNA applications	2034	1334	1229
# by Exam	1304	923	803
# by Endorsement	730	411	426
# with "Yes" answers	198	189	150
% with "Yes" answers	9.7%	14.2%	12.2%
# of "Yes" with discipline	3	1	0
% "Yes" with discipline	1.5%	0.5%	0.0%
# potentially fraudulent	109	75	72
% potentially fraudulent	5.4%	5.6%	5.9%
# found fraudulent	32	32	36
# fraudulent with discipline	0	0	0
No case	1727	1070	1007

"Yes" Dispositions	18/19	19/20	20/21
Accepted by Board	3	11	3
Probation/Monitoring	7	3	2
Denied by Board	3	0	0
Staff denial ratified	0	0	0
Staff denial overturned	0	0	0
Denied by Staff	0	0	0
Cleared by Staff	162	167	127
Lapsed after one year	21	30	26
Pending <i>not incl in total dispositions</i>	42	30	27
Total Dispositions	196	211	158

Initial CNA applications continued to decline during this fiscal year. This is likely due to the COVID 19 pandemic, which significantly affected the CNA training programs in Nevada and allowed people to work in Nevada by submitting a Waiver application instead of the customary exam application.

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 fraudulent was greater.

Total Initial Applications	18/19	19/20	20/21
Total of initial applications	10917	7715	8050
Total potentially fraud app	255	191	222
% of potentially fraud apps	2.34%	2.48%	2.76%
Total number found fraudulent	71	71	88
% of apps investigated found fraudulent	27.84%	37.17%	39.64%

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	18/19	19/20	20/21
Total renewal applications	23239	21854	28482
Total "Yes" renewal applications	135	146	279
% with "Yes" renewal applications	0.58%	0.67%	0.98%
Total "Yes" with discipline	2	4	3
Total potentially fraud app	64	22	56
% of potentially fraud apps	0.28%	0.10%	0.20%
Total number found fraudulent	23	13	29
% of apps investigated found fraudulent	35.94%	59.09%	51.79%

Though the total number of applications has decreased in the past two years, the percentage of "Yes" has increased. This is due to a new report system from ORBS, which includes ALL "Yes" answers, including speeding tickets, previously addressed issues, etc., which were not counted in years past. The greater number of people answering yes also accounts for fewer fraudulent applications. Implementation of ORBS has significantly streamlined the processing of these applications.

Complaint Investigation & Discipline

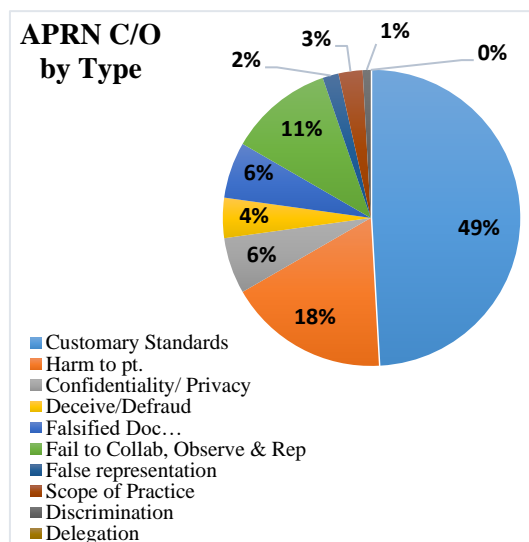
Investigation and discipline support public protection. Complaints submitted to the Board are sent to investigation when there are allegations of alleged violations of the Nevada Nurse Practice Act. When an investigation is initiated, board staff ensure that nurses and nursing assistants (respondents) 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 Active Licensees	18/19	19/20	20/21
Total licensed APRNs	2450	2833	3578
Percent change from previous year	23%	14%	26%
Complaints Received/Investigated	18/19	19/20	20/21
Total complaints received	**	130	88
Total of complaints opened to investigation	80	94	59
Percentage of complaints by total NV APRNs	3.25%	3.30%	2.46%
Discipline Outcome Statistics	18/19	19/20	20/21
Total number of discipline outcomes	6	0	3
Percent of licensees receiving discipline	0.24%	0.00%	0.08%
Percent of discipline to complaints	7.50%	0.00%	3.41%
Days to Open and Resolve Complaints	18/19	19/20	20/21
Average number of days to Case Review	*84	59.1	38.3
Average days for initial review of complaints rec'd	**	1.25	0.93

The number of APRN license holders increased by 26% with the addition of 748, an increase from 579 added in FY 2019/20. The most recent total equates to an addition of 2,163 APRNs entering practice in Nevada since 2016. The number of practice-related complaints opened to investigation was 59, decreasing notably from the previous year's 94 and represents a three-year downward trend. APRN investigations completed in FY 2020/21 totaled 49 and were concluded in an average of 38.3 business days, notably down from 59.1 in FY 2019/20.



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

*Data from FY2018/19 reflected higher total days to completion as those years included the time period for final resolution after investigations were completed.

**This category was new to FY2019/20, and comparative data from the previous period was unavailable.

*There were no notable changes in the origin of complaints compared to FY 2019/20. Consumer-driven complaints and referrals from other Government Agencies remained the most common. Complaints from anonymous sources decreased moderately from 10 to 4.

*The most notable changes in complaints by type received were: An increase in Harm to Patient complaint allegations and decreases in Deceive/Defraud and Scope of Practice allegations. There were no significant changes or trends in all other types of complaint allegations.

Nurse Complaint Investigations & Discipline Statistics:

During the previous three years, the number of license holders has been steadily increasing 2 to 5%. This consistent increase is supported by increases in initial exam, endorsement, and renewal applications. The number of practice-related complaints opened to investigation was 280, a moderate decrease from the previous year's 380. RN and LPN investigations completed in FY 2020/21 totaled 161 out of 198 opened to an investigation. The average days to completion of investigations (RN/LPN only) decreased slightly to 58.7 business days.

Total Number of Active Licensees	18/19	19/20	20/21
Total licensed nurses (LPN, RN)	46850	47834	50563
Percent change from previous year	5%	2%	5%
Complaints Received/Investigated	18/19	19/20	20/21
Total complaints received (LPN, RN)	**	380	280
Total of complaints opened to investigation	336	233	198
Percentage of complaints by total NV nurses	0.72%	0.48%	0.39%
Discipline Outcome Statistics	18/19	19/20	20/21
Total discipline outcomes	103	69	63
Percent of licensees receiving discipline	0.21%	0.14%	0.12%
Percent of discipline to complaints	28%	30%	23%
Days to Open and Resolve Complaints	18/19	19/20	20/21
Average number of days to Case Review	*103	61.3	58.7
Average days for initial review of complaints rec'd	**	1.25	0.93

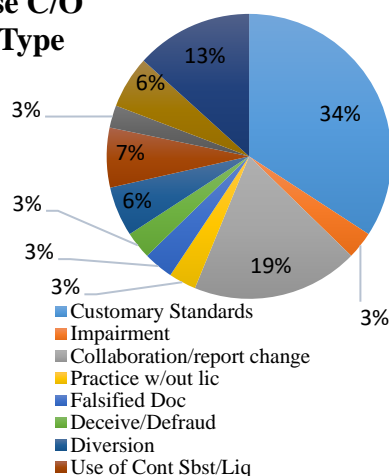
*Data from FY2018/19 reflected higher total days to completion as those years included the time period for final resolution after investigations were completed.

**This category was new to FY2019/20, and comparative data from the previous period was unavailable. Data not available.

*Notable changes in the origin of complaints were decreased in Employer-driven complaints at 45 (FY 2019/20 totaled 75). Consumer-driven complaints remained the second most common type and represented a slightly larger percentage of total complaints than in FY 2019/20. Self-reports decreased notably from 11 to 5. The origin of all other complaints did not change markedly. There were no significant changes or trends in all other types of complaint allegations.

*The most notable changes in complaints by type received were: Increases in allegations regarding Failure

**Nurse C/O
by Type**



**Types of Nurse
Complaints**

Customary Standards	121
Impairment	11
Collaboration/report change	67
Practice w/out license	11
Falsified Doc	12
Deceive/Defraud	11
Diversion	20
Use of Controlled Substance	24
Privacy/Confidentiality	9
Scope of Practice	21
Harm	47

to Collaborate with the Healthcare Team and Failure to Observe and Report Significant Change in Condition at 67 (FY 2019/20 totaled 38). Combined, these two violations remained the second-highest type allegation investigated two years running. Compared to the previous year's complaint allegations regarding Impairment, increased from 8 to 11. Using any Controlled Substance, Dangerous drug, or Intoxicating Liquor increased from 7 to 24 and Diversion of a Controlled Substance from 5 to 20. There were no significant changes or trends in all other types of complaint allegations.

CNA Complaint Investigations & Discipline Statistics:

During the past two years, Nevada's number of active certificate holders has decreased by over 4%. This was following an increase in FY 2018/19 of only 1%, when increases were usually 3 to 6 percent each year. The declared state of emergency allowing for waivers to practice from other states without a Nevada certificate may have contributed to this decrease. The number of practice-related complaints opened to investigation was 60, remaining constant compared to the previous two years. CNA investigations completed in FY 2020/21 totaled 42 and were concluded in an average of 47.7 business, a notable decrease from the prior year's 61.3 days.

Total Number of Active Certificate Holders	18/19	19/20	20/21
Total certificated CNAs	9424	9090	8998
Percent increase from previous year	0.95%	-3.50%	-1.01%
Complaints Received/Investigated	18/19	19/20	20/21
Total complaints received	**	76	78
Total of complaints opened to investigation	69	67	60
Percentage of complaints by total NV CNAs	0.80%	0.73%	0.87%
Discipline Outcome Statistics	18/19	19/20	20/21
Total discipline outcomes	29	13	24
Percent of certificate holders receiving discipline	0.31%	0.14%	0.27%
Percent of discipline to complaints	42.02%	19.00%	30.77%
Days to Open and Resolve Complaints	18/19	19/20	20/21
Average total days from Opened to Case Review	*93	61.3	47.7
Average days for initial review of complaints rec'd	N/A	1.25	0.93

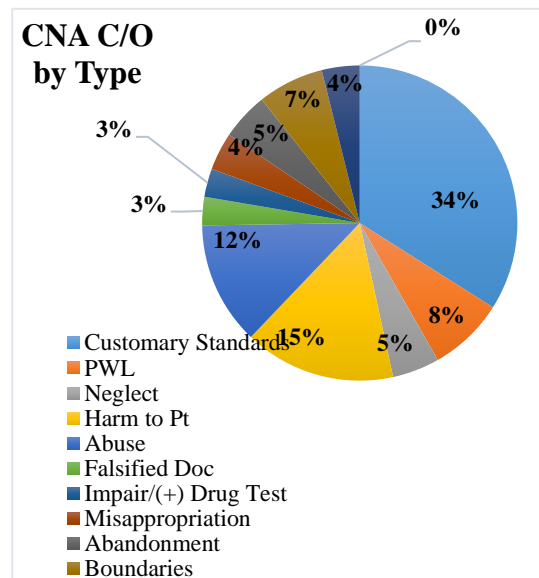
*Data from FY 2018/19 reflected higher total days to completion as those years included the time period for final resolution after investigations were completed.

**These categories were new to FY2019/20, and comparative data from the previous period was unavailable.

*The origin of complaints did not vary notably from FY 2020/21. Facility-driven complaints remained the most common at 48% of all complaints.

*The most notable changes in complaints by type received were decreases in Practice Without a License complaint (by over 50%) and Failure to Collaborate. No complaints were received (FY 2019/20 totaled 7). Complaints related to Confidentiality, Abandonment, Abuse, and Harm to Patients continued to be among the highest number received.

Types of CNA Complaints	
Customary Standards	35
PWL	8
Neglect	5
Harm to Pt	16
Abuse	13
Falsified Doc	3
Impair/(+) Drug Test	3
Misappropriation	4
Abandonment	5
Boundaries	7
Scope of Practice	4
Fail to Collaborate	0

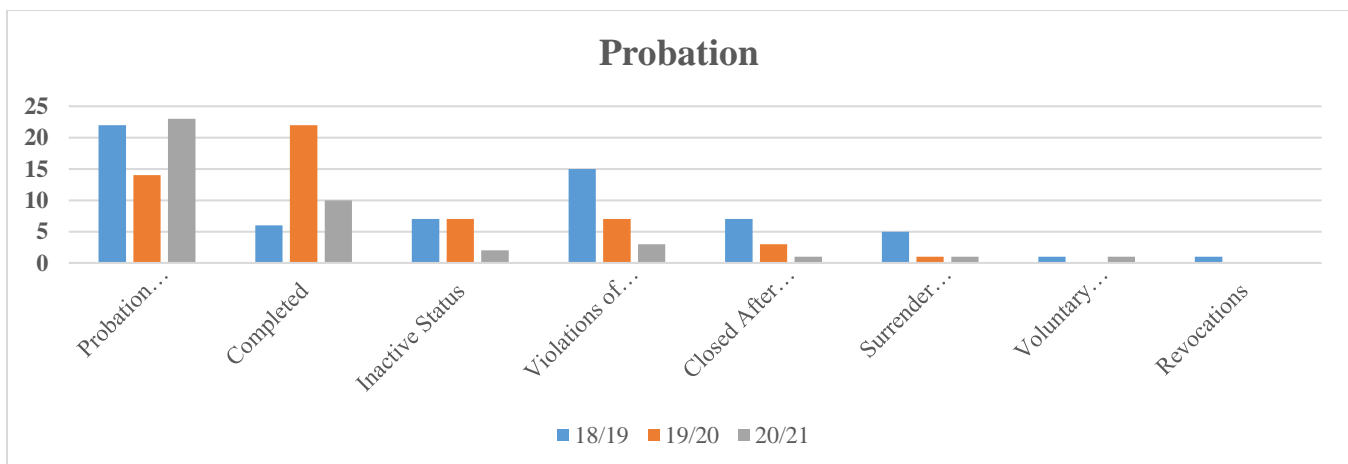


Compliance & Monitoring

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. Participants' ebb and flow of program completion relate to the length of the order/agreement and 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.

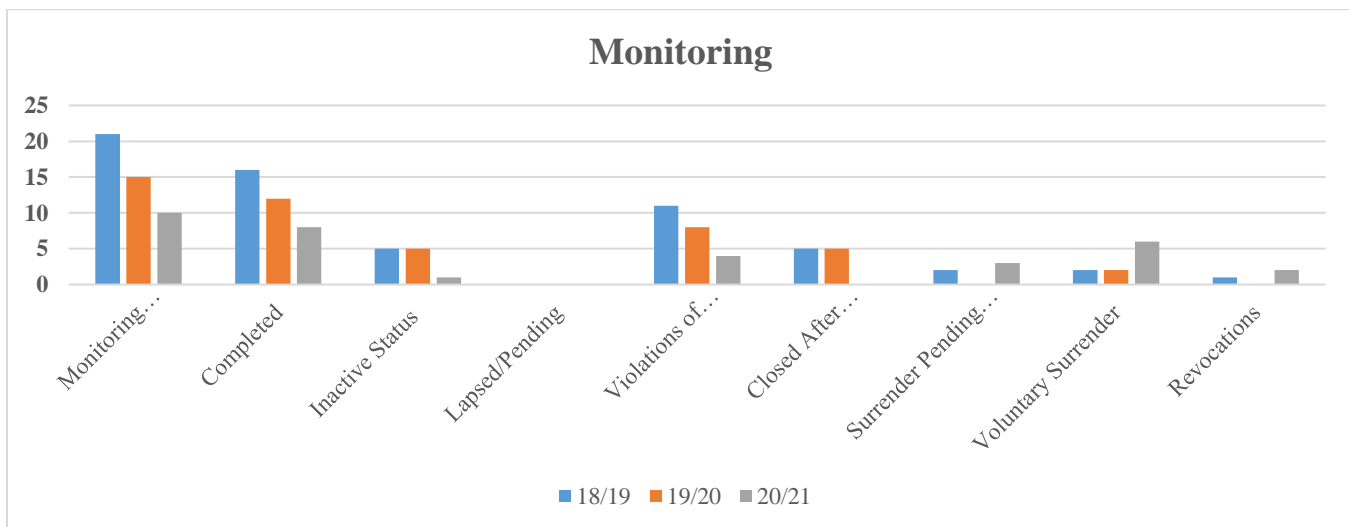
Probation Status	18/19	19/20	20/21
Probation Agreement/Order	22	14	23
Completed	6	22	10
Inactive Status	7	7	2
Violations of Board Orders	15	7	3
Closed After Investigation ***	7	3	1
Surrender Pending Hearing	5	1	1
Voluntary Surrender	1	0	1
Revocations	1	0	0
Total Participants on Probation	76	68	81

***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.

Nine (9) CNAs and seventy-four (74) nurses are active in the Monitoring Program.



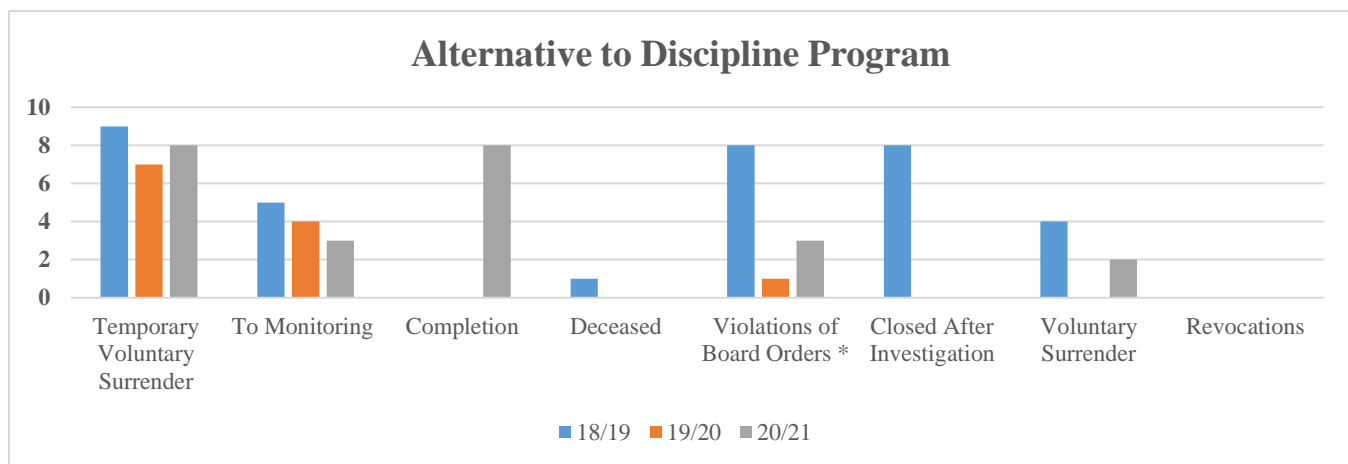
Monitoring Status	18/19	19/20	20/21
Monitoring Agreement/Order	21	15	10
Completed	16	12	8
Inactive Status	5	5	1
Lapsed/Pending	0	0	0
Violations of Board Orders *	11	8	4
Closed After Investigation **	5	5	0
Surrender Pending Hearing	2	0	3
Voluntary Surrender	2	2	6
Revocations	1	0	2
Total Participants on Monitoring	89	90	83

*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 completing 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 monthly or quarterly.



Zero (0) nursing assistants and eleven (11) nurses are currently active in the Alternative Program.

NA is data that was not previously captured on this report.

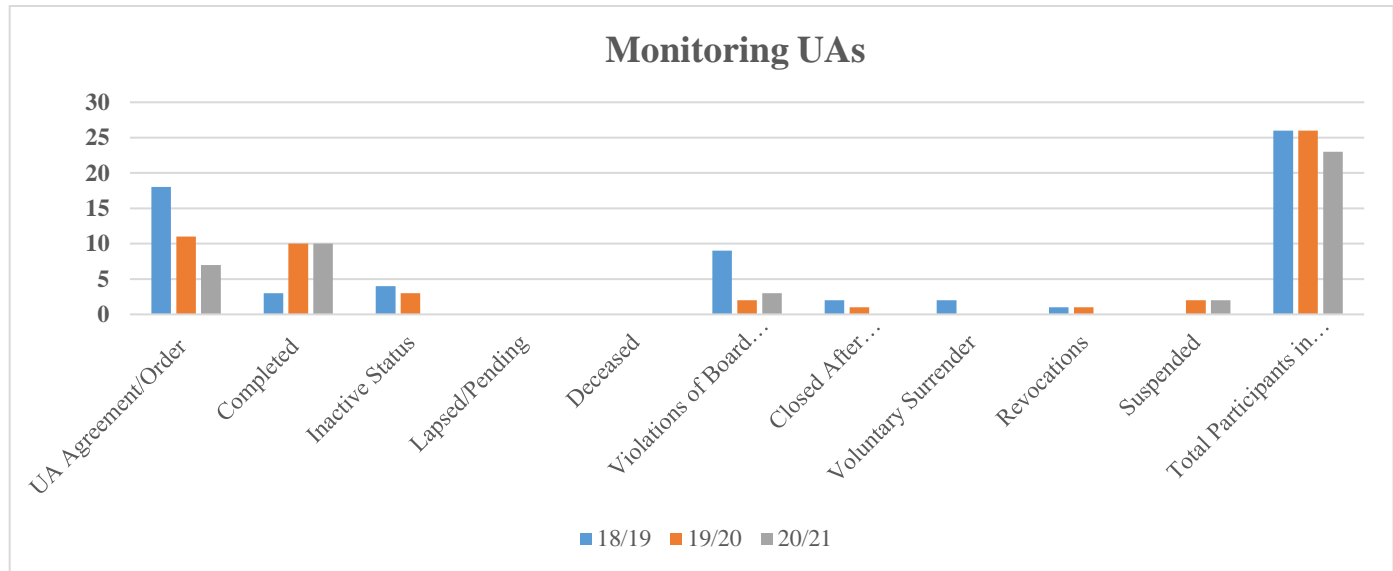
Violations of the Temporary Voluntary Surrender are related to positive drug tests or self-report of relapse.

Temporary Voluntary Surrender Status	18/19	19/20	20/21
Temporary Voluntary Surrender	9	7	8
To Monitoring	5	4	3
Completion	NA	NA	8
Deceased	1	0	0
Violations of Board Orders *	8	1	3
Closed After Investigation	8	0	0
Voluntary Surrender	4	0	2
Revocations	0	0	0
Current Participants in the ATD Program	9	12	11

*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.



Monitoring UA Status	18/19	19/20	20/21
UA Agreement/Order	18	11	7
Completed	3	10	10
Inactive Status	4	3	0
Lapsed/Pending	0	0	0
Deceased	0	0	0
Violations of Board Orders	9	2	3
Closed After Investigation	2	1	0
Voluntary Surrender	2	0	0
Revocations	1	1	0
Suspended	0	2	2
Total Participants in UA Agreements	26	26	23

*Six (6) CNAs and seventeen (17) nurses are monitored for urine abstinence and drug testing only.

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.

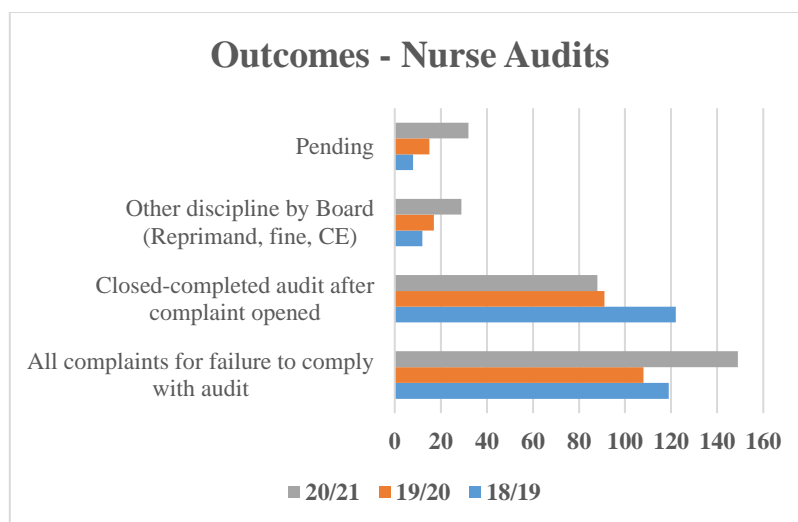
Nurse Audits			
Timeline-Fiscal Year	18/19	19/20	20/21
Total Audits Completed	667	1701	2415
Total Successfully Completed Requirements	548	1593	2266
Total Complaints Opened for Failing to Comply	119	108	149

*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	18/19	19/20	20/21
All complaints for failure to comply with audit	119	108	149
Closed-completed audit after complaint opened	122	91	88
Other discipline by Board (Reprimand, fine, CE)	12	17	29
Pending	8	15	32

Percentage of All Renewal Applicants			
Timeline-Fiscal Year	18/19	19/20	20/21
Nurses Audited	3.4%	9.2%	10.1%
Completed without Investigation	82.2%	93.7%	93.8%

Percentage of Nurse Audit Complaints			
Timeline-Fiscal Year	18/19	19/20	20/21
Leading to investigation	17.8%	6.3%	6.2%
Closed after complaint opened	102.5%	84.3%	59.1%
Other discipline by Board	10.1%	15.7%	19.5%



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.

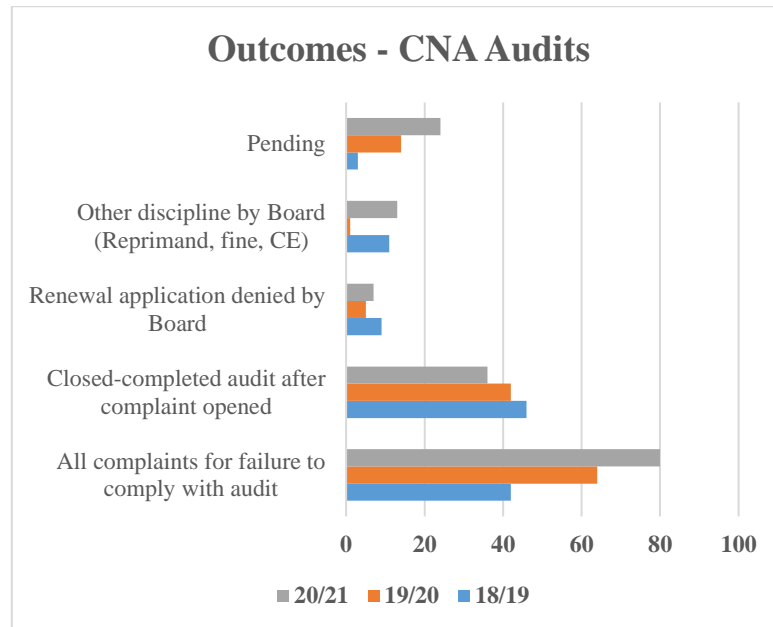
CNA Audits			
Timeline-Fiscal Year	18/19	19/20	20/21
Total Audits Completed	97	286	419
Total Successfully Completed Requirements	55	222	339
Total Complaints Opened for Failing to Comply	42	64	80

Outcomes-Complaints Based on Failure to Meet Audit Requirements			
Timeline-Fiscal Year	18/19	19/20	20/21
All complaints for failure to comply with audit	42	64	80
Closed-completed audit after complaint opened	46	42	36
Renewal application denied by Board	9	5	7
Other discipline by Board (Reprimand, fine, CE)	11	1	13
Pending	3	14	24

*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	18/19	19/20	20/21
CNAs Audited	2.5%	8.5%	9.4%
Completed without Investigation	56.7%	77.6%	80.9%

Percentage of CNA Audit Complaints			
Timeline-Fiscal Year	18/19	19/20	20/21
Leading to investigation	43.3%	22.4%	19.1%
Closed after complaint opened	109.5%	65.6%	45.0%
Other discipline by Board	26.2%	1.6%	16.3%



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