

Nevada State Board of NURSING



ANNUAL REPORT
FISCAL YEAR 2021/2022



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Nurse and CNA Fraudulent Applications: _____ 267

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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**



**Richelle O'Driscoll
Board Vice-President**



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



Jacob Watts, CNA



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



Ovidia McGuinness, LPN



**Elizabeth Trilops, RN,
MBA/HCM**

MESSAGE FROM THE EXECUTIVE DIRECTOR AND BOARD PRESIDENT

This past year saw us still in the midst of the COVID pandemic. This gave the Board of Nursing an opportunity to evaluate nursing practice and make changes to certain regulations as they pertained to the ongoing pandemic. In early January, we had the opportunity to meet with Nevada healthcare leaders and policymakers to evaluate the current state of healthcare in our state and to look at strategies to curb the nursing shortage. We identified that Apprentice Nurses were perhaps underutilized. Apprentice Nurses (ANs) are student nurses who are employed by facilities to work in the capacity of a student performing those skills learned in the academic setting. In addition, we changed regulations to add locations where an AN may work in Nevada. In February 2022, the State of Nevada approved over \$20,000,000 of American Rescue Plan Act (ARPA) federal dollars to support the Nurse Apprenticeship Program to aid staffing levels at facilities and provide opportunities for nursing students in Nevada. We have several hundred ANs employed around the state.

We also looked at the definition of delegation and supervision. Over the years and throughout the pandemic, caregiver roles changed, and many nurses questioned their role in delegation and supervision. As we looked at the current definition, it was determined that changes were needed to reflect current practice. The board supported the new wording, and regulatory changes went into effect. The new definitions should help nurses have more clarity when delegating a task.

In September, the Board voted to make changes to regulations to revise provisions relating to procedures in venipuncture and intravenous therapy delegable to certain licensed practical nurses. The change in regulation will assist Licensed Practical Nurses (LPNs) when performing certain IV procedures.

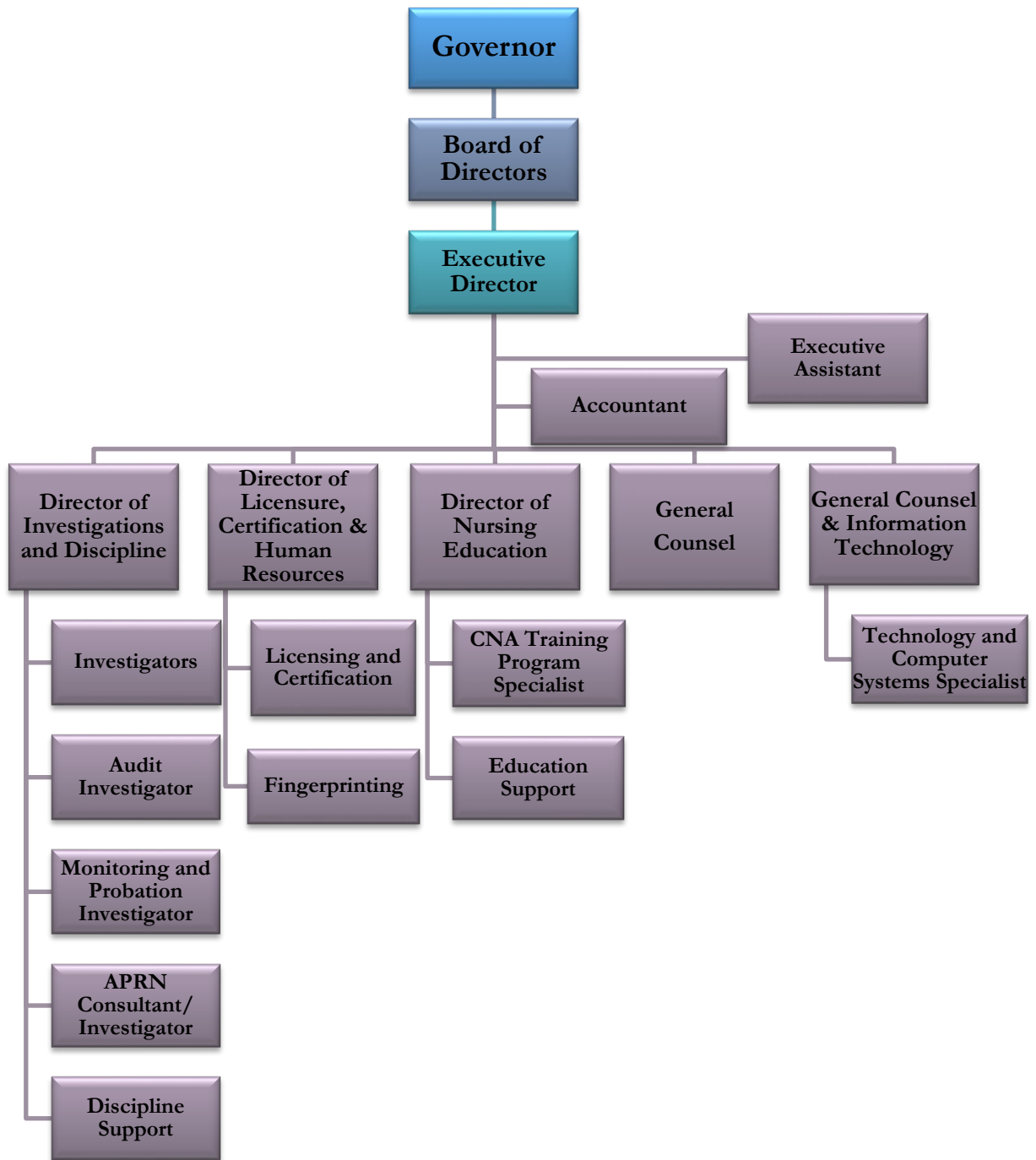
Finally, as we head to the 2023 Legislative session, we are hopeful that the Nurse Licensure Compact (NLC) will gain momentum to be introduced into the 2023 Legislature. During this last year, a survey was conducted of Nevada nurses. Over 92% of those nurses who completed the survey are in favor of having the NLC in Nevada. With this strong support of nurses, the passage of the NLC will allow Nevada to modernize the statute and improve access to care throughout the state.

In closing, we wish you all a prosperous year filled with good health and happiness.

Cathy Dinwauer, 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

Kimberly A. Arguello, Esq.

General Counsel & Information Technology

Sam McCord, BSN, RN

Director of Investigations and Discipline

Michelle Johnson, EdD, MS, APRN, CPNP-PC

Director of Nursing Education

Gail Trujillo, MS, CPM, SHRM-CP

Director of Licensure and Certification & Human

Resources

Corina Jimenez

Executive Assistant

Investigation & Monitoring

Barbara Day, MSN, APRN, FNP-BC, OCN, HPCN

APRN Consultant & Investigator

C. Ryan Mann, MSN, RN

Application Eligibility Specialist

Elaine Ralph, MSN, BSN, RN, FN-CSp

Monitoring and Probation Investigator

Cynthia Peterson, RN, CLNC, CHCQM

Investigator

Rebecca Colunga-Garcia, MSN, RN

Investigator

Ray Martinez

Investigator

Christie Daliposon

Audit Investigator

Licensure & Certification

Patty Towler

Licensure and Certification Lead

Ariadna Ramos Zavala

Licensing and Certification Specialist

Sandy Webb

Licensing and Certification Specialist

LaShaun Thompson

Licensing and Certification Technician

Christina Lovato

Licensing and Certification Technician

Madison Webb

Licensing and Certification Technician

Courteney Baccei

Fingerprint Specialist

Support

Kristie Neuhauser

Accountant

Rhoda Hernandez

Technology and Computer Systems Specialist

Hannah Boll-Matulis

Management Assistant

Cydnee Perez

Management Assistant

Tamara Pachak, BSN, RN

CNA Training Program Specialist

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

During the pandemic, the NSBN listened to concerns from nurses and healthcare providers regarding the practice of nursing and the challenges to providing care during the pandemic. This resulted in some changes to nursing regulations.

Board staff made changes to NAC 632.252 Performance of tasks that would expand the location where an Apprentice Nurse can work. Previous regulation only allowed Apprentice Nurses to work in long-term care, acute care, a community health clinic or a health maintenance organization. The new regulation expands the locations to include long-term care and skilled nursing facilities.

The NSBN made changes to NAC 632.222 Delegation and Supervision of Nursing Care. This change was prompted by nurses who were not sure if they could delegate nursing tasks to unlicensed personnel.

In addition, the NSBN made changes to NAC 632.450 regarding provisions related to procedures in venipuncture and intravenous therapy delegable to certain Licensed Practical Nurses (LPNs). The change in regulation provides additional clarity to levels of supervision required for LPNs providing intravenous therapy and assisting the Registered Nurse in the administration of blood and blood products. Revisions were also made to utilize current industry appropriate language/terminology.

The NSBN continues to work with legislators and legislative committees regarding initiatives such as the Nurse Licensure Compact (NLC).

Professional and Collaborative Relationships

Board staff continues to participate in national and state-wide committees, task groups, the National Council of State Boards of Nursing (NCSBN), Crisis Standards of Care Committee, and the Nevada Action Coalition. Staff provided presentations to NCSBN's, 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 training Specialist to oversee CNA programs in Nevada.

Fiscal Year 2021/2022 Nursing Programs

- ✓ Fully approved nursing programs in Nevada: 12
- ✓ Programs approved to conduct only the clinical portion of the program in Nevada: 2
- ✓ Programs under Provisional or Conditional Approval*: 6

** 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 2021/2022 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: 87.40%
- ✓ National NCLEX average pass rate: 80.83%
- ✓ Nevada NCLEX-PN average pass rate: 89.83%
- ✓ National NCLEX-PN average pass rate: 80.05%

Fiscal Year 2021/2022 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: 79%
- ✓ Skills exam Nevada pass rate: 73%

Graduates from Nevada Nursing Programs	19/20	20/21	21/22
PhD - University of Nevada, Las Vegas	4	7	5
DNP - University of Nevada, Las Vegas	10	14	23
DNP - University of Nevada, Reno	19	34	36
Post MSN Certificate- Touro University	*	*	3
Post MSN certificate - University of Nevada, Las Vegas	2	0	0
Post MSN certificate - University of Nevada, Reno	7	18	14
MSN- Roseman University	*	*	20
MSN- Touro University	*	*	51
MSN - University of Nevada, Las Vegas	19	0	35
MSN - University of Nevada, Reno	32	29	27
RN to BSN College of Southern Nevada	*	*	0
RN to BSN - Great Basin College	32	24	26
RN to BSN Truckee Meadows Community College	*	*	6
RN to BSN - Nevada State College	78	146	106
RN to BSN- Touro University	*	*	52
RN to BSN - University of Nevada, Reno	25	18	26
BSN- Arizona College	61	83	135
BSN- Chamberlain University	81	115	170
BSN-Grand Canyon University	X	X	X
BSN - Nevada State College	176	201	254
BSN - Roseman University	214	160	166
BSN- Unitek College	X	X	X
BSN - University of Nevada, Las Vegas	146	196	240
BSN - University of Nevada, Reno	125	159	143
AAS - Altierus Career College, formerly Everest College	50	X	X
AAS - College of Southern Nevada	209	192	109
AAS - Great Basin College	26	38	30
AAS- Las Vegas College	X	2	146
AAS - Western Nevada College	52	50	48
ADN – Carrington College, Las Vegas	X	X	X
ADN- Carrington College, Reno	79	164	126
AS - Truckee Meadows Community College	55	71	69
LPN – Las Vegas College	X	X	9
LPN - College of Southern Nevada	0	16	16
LPN- Unitek College	X	X	32
Total	1,452	1,737	2,115

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: Barbara Day, MSN, APRN, FNP-BC, OCN, CHPN APRN Consultant & Investigator

Members:

- Aaron Bellow Jr., Ph.D., 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 – September 2024
- Kelly Jo Fluitt, APRN-C – Carson City – September 2023
- Stephen Ingerson, MSN, APRN, CNS – Henderson-July 2022
- Cheryl A. Maes, Ph.D., 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
- Gregory Jones CRNA, MS, BSN-Reno-September 2024

Description & Accomplishments:

- Reviewed, and discussed quarterly Scope of Practice reports as they related to APRN practice. The committee discussed and researched information trends in the reports that may warrant changes or updates to regulations or practice decisions.
- Reviewed, discussed, and researched possible changes to Nevada Regulatory Statutes (NRS 632.237) and Nevada Administrative Code (NAC 632.890) as they pertain to advanced practice nursing. Committee and Sub-committee work ongoing at end of FY 2021/22.
- Reviewed and addressed revisions or updated the following practice decisions:
 - The role of the RN in Vaginal Speculum Examination practice decision.
 - The LPN Scope of Practice Regarding Phlebotomy and Blood Sampling Collection.

CNA & MA-C Advisory Committee

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

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 2024
- 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 2025
- Mila Revilla, RN (Acute Care Representative) – Las Vegas – January 2025
- Austin Anderson, CNA (CNA Member) – Incline Village – September 2024
- Gabrielle Collins, CNA (CNA Member) – Las Vegas – September 2024

**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:

- Two new CNA programs were approved.
- A subcommittee was formed to further develop the CNA verification work form.
- Reviewed of current test vendors and contracting for new vendor.
- Continuously reviewed CNA examination pass rates.

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: Elaine Ralph, MSN, RN, FN-CSp Monitoring and Probation Investigator

Members:

- Richard Angelastro, MSN, RN - Las Vegas - November 2023
- Peggy Cullum, BSN, RN - Las Vegas -November 2020
- Rebecca Scarpa, DNP, APRN - Reno – July 2023
- Susan Hubbard, MS, BS, RN - Las Vegas - November 2020
- Beth Kiehn, APRN - Reno – September 2024
- Susan O'Day, MEd, RN, CPAN - Reno -November 2020
- Toril Strand, BA, RN-C - Reno - November 2023
- Paul Kapsar, MSN, APRN – Las Vegas – November 2023
- Todd Rush, BSN, RN – Las Vegas – November 2023

Description & Accomplishments:

- Completed research on best practices in substance use treatment programs and monitoring of nurses and CNAs in the Board's Alternative to Discipline Program.
- The Committee's current project is to research and advise the Board on opportunities to educate the nursing professional to identify potential substance use issues early and provide effective interventions to avoid personal and professional negative consequences.

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 2025
- Jody Covert, DNP, RN (Truckee Meadows Community College) - Reno - September 2023
- Nancy Hence-Cywinski, RN, BSN, MS, NHA (CCDS) - Las Vegas - May 2025
- Amber Donnelly, PhD, RN, CNE (Great Basin College) - Elko – May 2023
- Brian C. Oxhorn, PhD, RN (Roseman University) - Las Vegas – September 2024
- 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 2023
- Sharon Radcliffe, DNP, MBA, DIP. H.E. CCPS, CENP, RN – Las Vegas- September 2024
- Jill Rankin, DNP, RN (Arizona College), Las Vegas – May 2025
- Erin Van Kirk, MSN, RN – September 2024

Description & Accomplishments:

- Formed a Simulation Sub-Committee.
- Discussed student ratios with the Nevada Hospital Association.
- Reviewed state and national NCLEX pass rates.
- Reviewed innovative strategies to address clinical rotations during the pandemic.
- Recommended approval of Grand Canyon University Las Vegas Campus.

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 Investigations and Discipline

Members:

- Michelle McNary, LPN-RN-July 2024
- Mary Field, RN, BSN – Carson City – Indefinite
- Laura Kennedy, BSN, RN, MBA-Sparks - January 2024
- Marilyn Jeanne Hesterlee, RN – Carson City – Indefinite
- Ginger Evors (Fidel), MSN, RN, OCN, CNL-Las Vegas- May 2025
- Jessica Carlson, MSN, Ed., Phd ABD, RN-Henderson-July 2022
- Shanna Kennon MSN, RN – Reno – January 2023
- Chelsea Minto, BSN, RN, CNML – Reno – May 2022
- Debra Adornetto-Garcia, DNP, RN, APOCH, NEA-BC – Reno – March 2024
- Nettie Kinder, RN- Las Vegas- May 2025
- Pamela Adzima, MHA, BSN, RN- Las Vegas, May 2025
- Nicole Sirotek, RN-Elko-May 2025
- Greg Highfill-Nursing Student-Minden - July 2022

Description & Accomplishments:

- Researched, reviewed, and approved revisions to The Role of the RN in Non-EMS-RN Interfacility Transfers practice decision.
- Researched, reviewed, and approved revisions to Registered Nurse First Assist and Saphenous Vein Harvesting practice decision.
- Researched, reviewed, and approved the continuance of practice decision the Role of the RN and LPN with Gastrostomy Tubes without changes.
- Researched and drafted proposed revisions to the School Nursing practice decision regarding the addition of the school nurse's ability to delegate the administration of intranasal emergency medications, approved by Board May 19, 2022
- Researched, reviewed, and approved revisions to Epicardial Pacing Wire Removal practice decision, approved by Board September 22, 2022
- Reviewed and discussed revisions to the Collagen Plug practice decision.

- Reviewed, researched updated references pertaining to the RNs Advancing or Withdrawing Endoscopes and Colonoscopes practice decision.
- Reviewed, and researched revisions to the RN assignment of the emptying, measuring, and recording output from a Hemovac and/of Jackson-Pratt surgical drain to a Certified Nursing Assistant 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 Investigations and Discipline

Members:

- Christy Coss, RN- Washoe Valley- September 2022
- Kathleen T. Mohn, MEd, BSN, RN-Las Vegas- September 2024
- Kyle McComas, RN- Pahrump- September 2024
- Carl Balcom, DNP, MBA, RN, NEA-BC, CHE, FACHE-Las Vegas- September 2023
- Michelle McNary, LPN-Reno- January 2025
- Cheri Crumley, LPN-Reno- September 2024

Description & Accomplishments:

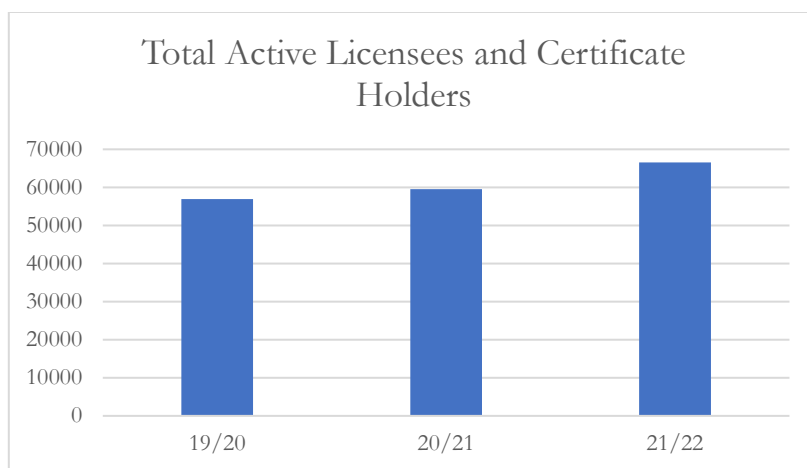
- Researched, reviewed, and drafted a new practice decision titled 'The LPN Scope of Practice Regarding Phlebotomy and Blood Sampling; approved by the Board January 19, 2022
- Researched, reviewed, and proposed revisions to NAC 632.450 to further clarify levels of supervision required for practices by IV certified LPNs; revisions were adopted by the Board September 21, 2022.
- Reviewed, and discussed quarterly LPN scope of practice reports and identify trends that warrant committee attention regarding possible regulation changes and practice decisions.
- Reviewed, discussed, and approved proposed additions to the NSBN School Nursing Practice Decision expanding the school nurse's scope of practice to delegate the emergency administration of intranasal medications.

ANNUAL REVIEW BY THE NUMBERS

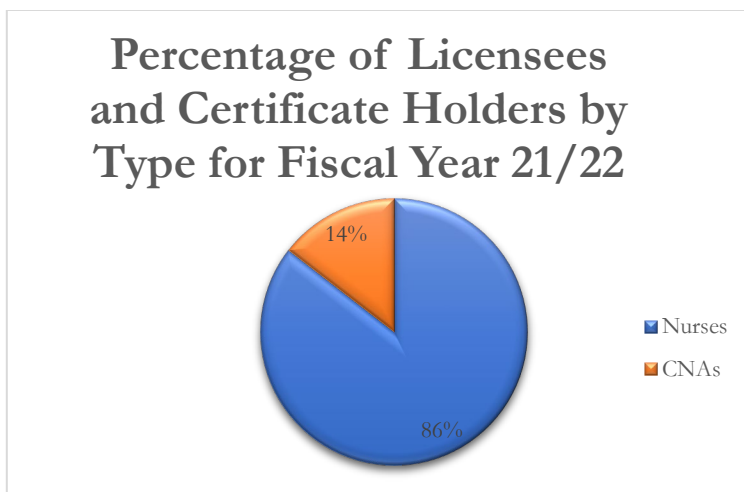
The Board reviews a minimum of three years of statistical data annually to identify trends in licensure, certification, investigation, discipline, continuing education, audits, and compliance. The data is collected contemporaneously throughout the fiscal year, from July 1 through June 30.

Licensure & Certification

Total number of Active Licensees and Certificate Holders



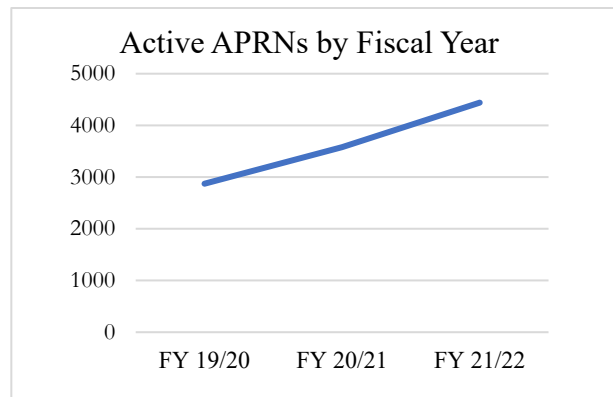
Total number of Licensees and Certificate Holders by license type for Fiscal year 2021/2022:



Advanced Practice Registered Nurses

Number of APRNs with an Active License:

Active APRNs	
FY 19/20	2872
FY 20/21	3578
FY 21/22	4440

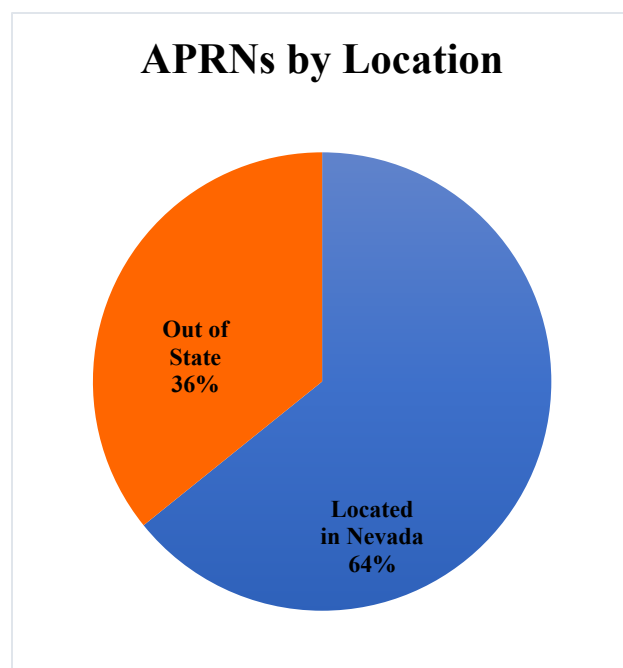


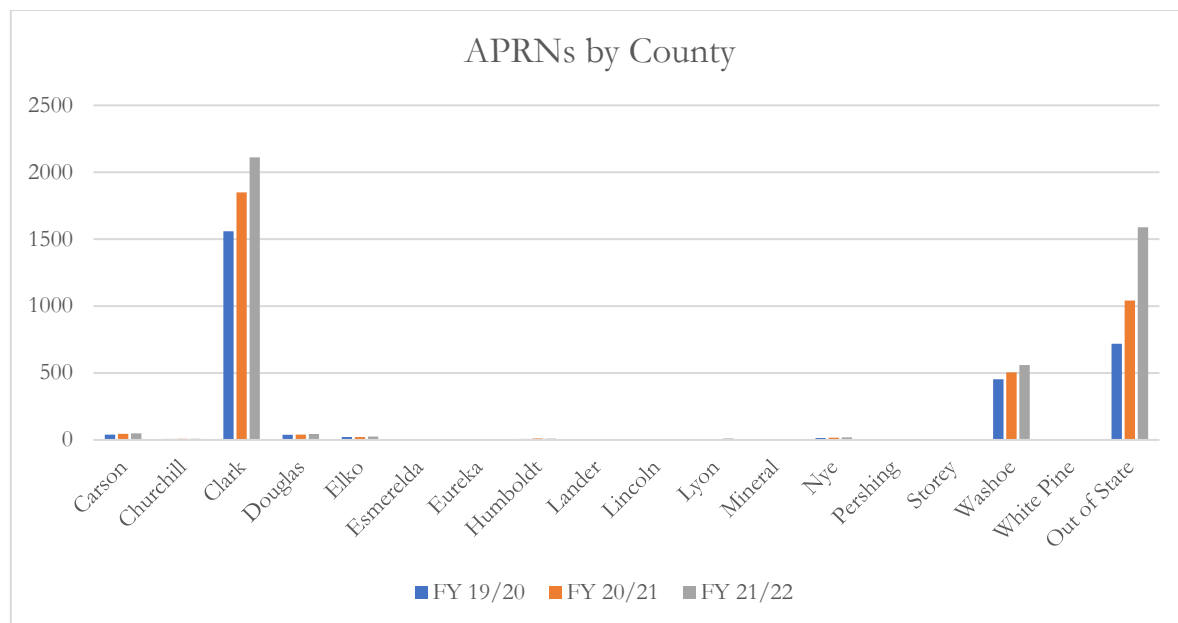
APRNs by Location:

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.

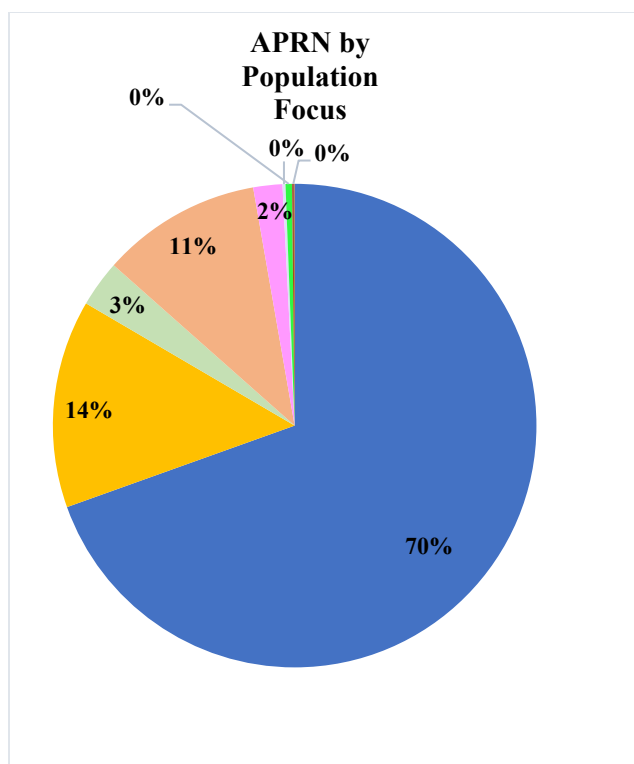
APRNs by County:

APRNs by County			
	FY 19/20	FY 20/21	FY 21/22
Carson	39	45	49
Churchill	7	9	9
Clark	1559	1849	2111
Douglas	38	40	44
Elko	22	21	25
Esmerelda	0	0	0
Eureka	2	1	1
Humboldt	7	11	10
Lander	1	1	2
Lincoln	1	2	4
Lyon	4	6	11
Mineral	0	0	0
Nye	14	17	19
Pershing	1	1	1
Storey	1	1	1
Washoe	453	505	560
White Pine	5	6	4
Out of State	718	1041	1589



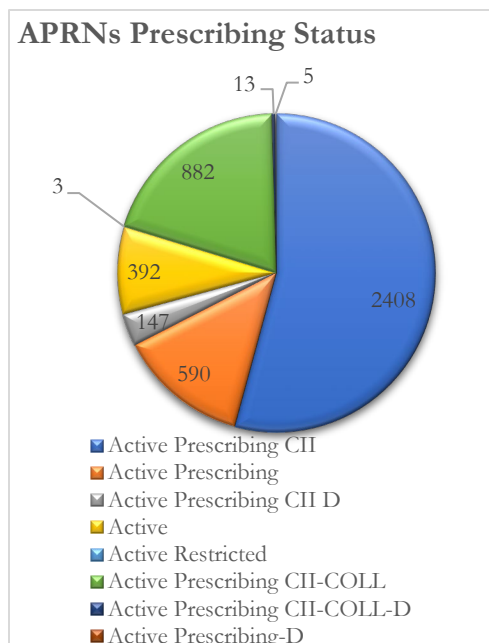


APRNs by Population Focus:



APRNs by Populations of Focus	FY 21/22
Family Nurse Practitioner	3110
Adult-Gerontology Nurse Practitioner	622
Women's Health Care Nurse Practitioner	139
Psychiatric/Mental Health Nurse Practitioner	479
Pediatric Nurse Practitioner	87
Nurse Midwife	9
Neonatal Nurse Practitioner	19
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.

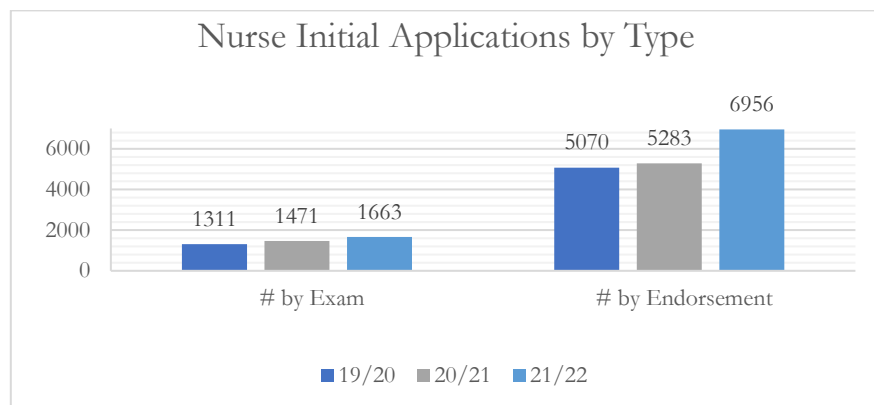
APRNs Prescribing Status	FY 19/20	FY 20/21	FY 21/22
Active Prescribing CII	1191	1999	2408
Active Prescribing	260	400	590
Active Prescribing CII D	72	139	147
Active	182	274	392
Active Restricted	0	1	3
Active Prescribing CII-COLL	260	756	882
Active Prescribing CII-COLL-D	5	13	13
Active Prescribing-D	5	6	5

Applications

The number of applications submitted significantly decreased during FY 19/20 and FY 20/21. It is likely related to the COVID-19 pandemic. Many travel nurses were allowed to work in Nevada after completing a separate Waiver application without submitting an official endorsement application. The Waiver application was discontinued in May 20, 2022, resulting in many remaining travel nurses being required to follow the traditional licensure application process, thereby increasing our initial applications to pre-pandemic rates. In addition, the nursing education programs were affected by the pandemic, resulting in a 30% decrease in exam applicants for the past three years. Though initial applicants have decreased since the pandemic, it is noted that significantly more renewal applications continue to be processed during this fiscal year. Despite the trend noted for many years that odd years such as FY 21/22 routinely have fewer renewals come due than in even years, greater than 5000 more renewals were processed than in the past odd fiscal year of FY 19/20.

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.

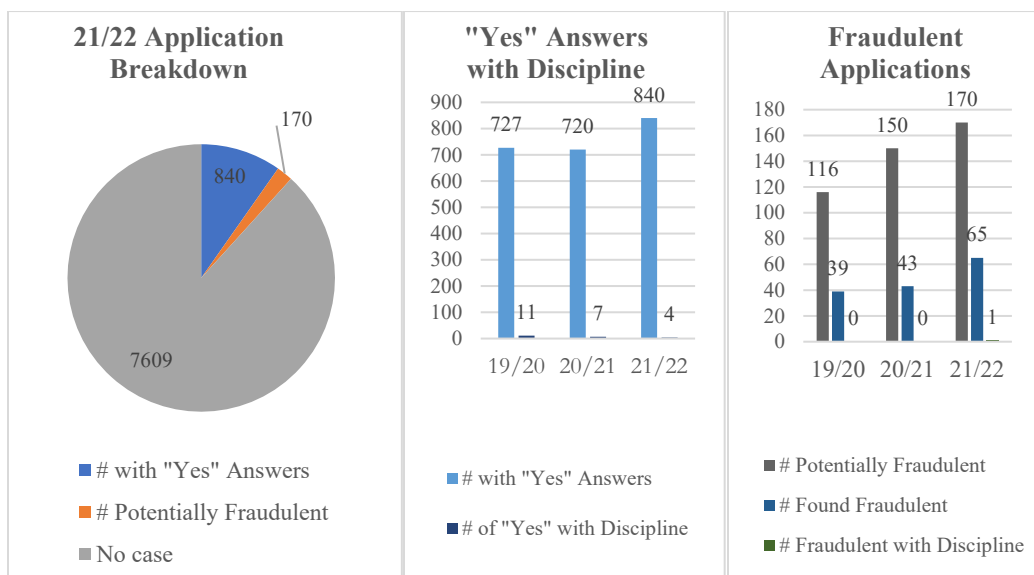
Applications are valid for one year from the date received by the Board. Failure to submit all required documentation within one-year results in a lapsed status. Pending applications remain in process on the last day of the fiscal year.

Total Initial Nurse Applications	19/20	20/21	21/22
Total number of active licenses	47834	50563	56911
# Nurse Initial Applications	6381	6754	8619
# by Exam	1311	1471	1663
# by Endorsement	5070	5283	6956
# with "Yes" Answers	727	720	840
% with "Yes" Answers	11.4%	10.7%	9.7%
# of "Yes" with Discipline	11	7	4
% "Yes" with Discipline	1.5%	1.0%	0.5%
# Potentially Fraudulent	116	150	170
% Potentially Fraudulent	1.8%	2.2%	2.0%
# Found Fraudulent	39	43	65
# Fraudulent with Discipline	0	0	1
No case	5538	5884	7609

"Yes" Dispositions	18/19	19/20	20/21
Accepted by Board	19	13	9
Probation/Monitoring	15	9	4
Denied by Board	4	2	0
Staff Denial Ratified	0	0	0
Staff Denial Overturned	0	0	0
Denied by Staff	0	0	0
Cleared by Staff	598	667	787
Lapsed after one year	33	33	39
Reprimand/Fine/CE	0	0	0
Pending <i>not incl in total dispositions</i>	57	63	71
Total Dispositions	669	724	839

2021/2022 Application Breakdown:

An increase of 24% in endorsement applications is noted, and thought to be due to many travel nurses and telehealth nurses who were able to begin work in Nevada with the emergency Waiver license, which was discontinued in May 20, 2022. The travel and telehealth nurses who chose to continue practicing in Nevada were required to submit the standard application for Nevada licensure. The total number of active licensees continued to grow substantially during the pandemic, reaching greater than 50,000 last year for the first time in Nevada history, however, 56,911 is a far more accurate representation of practicing nurses since the Waiver is no longer in effect. We continue to review approximately 12% of licensure applications for "Yes" answers, or possibly fraudulent answers.



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.

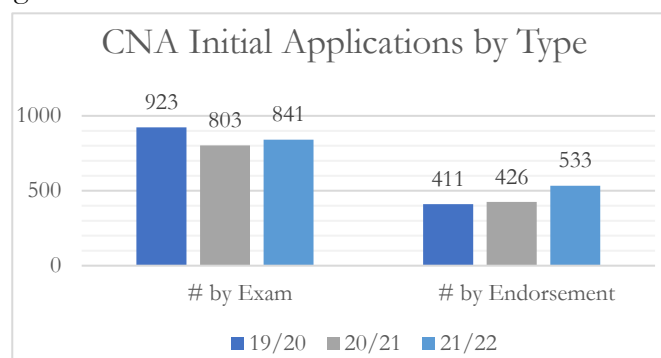
This is likely due to the COVID 19 pandemic, which

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	19/20	20/21	21/22
Total number of CNAs	9090	8998	9648
# Initial CNA applications	1334	1229	1374
# by Exam	923	803	841
# by Endorsement	411	426	533
# with "Yes" answers	189	150	179
% with "Yes" answers	14.2%	12.2%	13.0%
# of "Yes" with discipline	1	0	0
% "Yes" with discipline	0.5%	0.0%	0.0%
# potentially fraudulent	75	72	141
% potentially fraudulent	5.6%	5.9%	10.3%
# found fraudulent	32	36	41
# fraudulent with discipline	0	0	0
No case	1070	1007	1054

"Yes" Dispositions	19/20	20/21	21/22
Accepted by Board	11	3	3
Probation/Monitoring	3	2	2
Denied by Board	0	0	0
Staff denial ratified	0	0	0
Staff denial overturned	0	0	0
Denied by Staff	0	0	0
Cleared by Staff	167	127	141
Lapsed after one year	30	26	13
Pending <i>not incl in total dispositions</i>	30	27	20
Total Dispositions	211	158	179

The rate of initial CNA application submissions continues at a significantly lower rate since the start of the pandemic (approximately 35% fewer applications than in pre-pandemic years). The CNA training programs were significantly affected by the pandemic, and now face additional challenges due to clinical sites that have become ineligible to host students.

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	19/20	20/21	21/22
Total of initial applications	7715	8050	9993
Total potentially fraud app	191	222	352
% of potentially fraud apps	2.48%	2.76%	3.52%
Total number found fraudulent	71	88	106
% of apps investigated found fraudulent	37.17%	39.64%	30.11%

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	19/20	20/21	21/22
Total renewal applications	21854	28482	27138
Total "Yes" renewal applications	146	279	282
% with "Yes" renewal applications	0.67%	0.98%	1.04%
Total "Yes" with discipline	4	3	4
Total potentially fraud app	22	56	75
% of potentially fraud apps	0.10%	0.20%	0.28%
Total number found fraudulent	13	29	30
% of apps investigated found fraudulent	59.09%	51.79%	40.00%

A trend has been noted in past years regarding renewal applications. More people come due for renewal during even years, than in odd years such as FY 21/22. Therefore, it is expected that fewer renewals were submitted than last year, however, it is noteworthy that 475 more CNA renewal applications were submitted than in FY 19/20, and nearly 300 more than FY 17/18 (prepandemic). The ongoing COVID-19 pandemic is thought to be the reason for this. Fortunately, the increase in renewals has outweighed the decline in initial applicants, thereby increasing the total number of certificate holders in Nevada.

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.

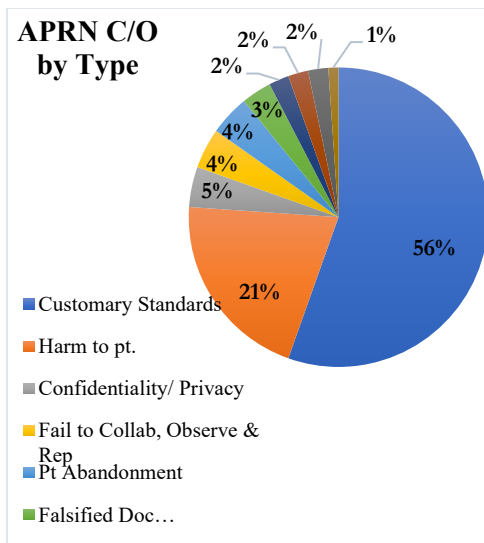
APRN Complaint Investigations & Discipline Statistics:

Total Number of Active Licensees	19/20	20/21	21/22
Total licensed APRNs	2833	3578	4440
Percent change from previous year	14%	26%	24%
Complaints Received/Investigated	19/20	20/21	21/22
Total complaints received	130	88	97
Total of complaints opened to investigation	94	59	59
Percentage of complaints by total NV APRNs	3.30%	2.46%	2.18%
Discipline Outcome Statistics	19/20	20/21	21/22
Total number of discipline outcomes	0	3	3
Percent of licensees receiving discipline	0.00%	0.08%	0.07%
Percent of discipline to complaints	0.00%	3.41%	3.09%
Days to Open and Resolve Complaints	19/20	20/21	21/22
Average number of days to Case Review	59.1	38.3	59.5
Average days for initial review of complaints rec'd	1.25	0.93	0.97

The number of APRN license holders increased by 24% with the addition of 862, an increase from 748 added in FY 2020/21. This, most recent, total equates to an addition of 2,163 APRNs entering practice in Nevada since FY 2019/20.

The number of practice related complaints opened to investigation was 59, which was consistent with FY 2020/21.

APRN investigations completed in FY2020/21 totaled 44 and were concluded in an average of 59.5 business days. The three-year average is 52.3 business days.



Types of APRN Complaints	
Customary Standards	51
Harm to pt.	19
Confidentiality/ Privacy	4
Fail to Collab, Observe & Rep	4
Pt Abandonment	4
Falsified Doc...	3
Deceive/Defraud	2
False representation	2
Delegation	2
Exploration	1

There were no notable changes in the origin of complaints when compared to FY 2020/21. Consumer driven complaints and referrals from other Government Agencies remained the most common. Complaints from anonymous sources remained the same at 4.

The most notable changes in complaints by type received were:

- A small increase in complaints related to Delegation and Exploitation.
- A decrease in complaints related to Scope of Practice, Failure to Collaborate with the Healthcare Team and violations related to Confidentiality.
- All other types of complaints were consistent with FY 2020/21

Nurse Complaint Investigations & Discipline Statistics:

RN and LPN investigations completed in FY2021/22 totaled 138 and were concluded in an average of 85.2 business days, representing an increase of 25 days when compared to the average from the previous two periods. This increase was influenced by the significant increase in complaints received, and subsequent case load increases per investigator. Cases addressing immediate public safety were given priority and were completed in less time than the average of 85.2 business days.

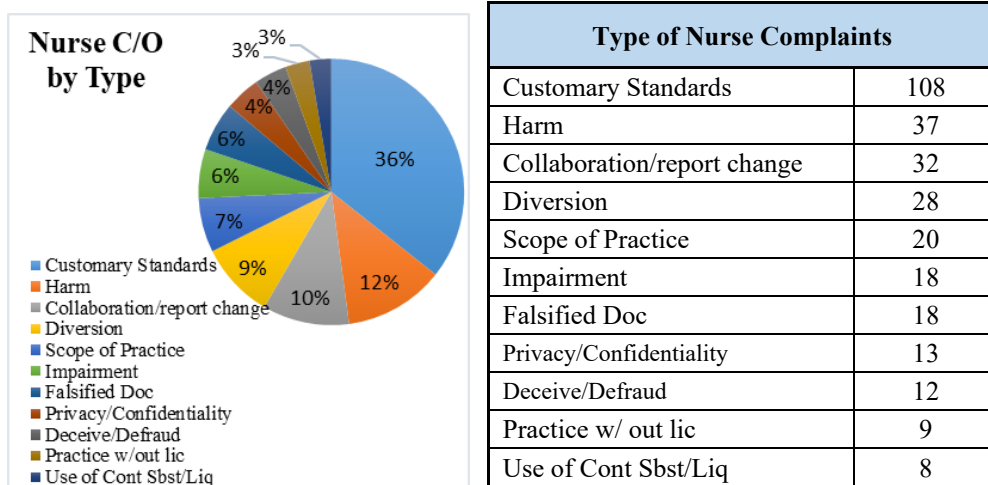
Total Number of Active Licensees	19/20	20/21	21/22
Total licensed nurses (LPN, RN)	47834	50563	56911
Percent change from previous year	2%	5%	11%
Complaints Received/Investigated			
Total complaints received (LPN, RN)	380	280	362
Total of complaints opened to investigation	233	198	191
Percentage of complaints by total NV nurses	0.48%	0.39%	0.34%
Discipline Outcome Statistics			
Total discipline outcomes	69	63	37
Percent of licensees receiving discipline	0.14%	0.12%	0.07%
Percent of discipline to complaints	30%	23%	10%
Days to Open and Resolve Complaints			
Average number of days to Case Review	61.3	58.7	85.2
Average days for initial review of complaints rec'd	1.25	0.93	0.97

The average days for initial complaint review at 0.97 was consistent with three-year average of 1.05 Business days. Notable changes in the origin of complaints were increases in complaints by employers from 47 to 75 and a significant decrease in complaints by coworkers from 26 to 4.

Complaints from consumers decreased from 32 to 21 while self-reports remained constant at 5.

The most notable changes in complaints by type were:

- An increase Impairment, Diversion of Controlled Substance, and Falsified Documentation.
- A decrease in complaints related to Patient Harm, and Collaboration with the Healthcare team (50% less than FY 2020/21).
- Substance, Dangerous Drug or Intoxicating Liquor, complaints decreased from 24 to 8, nearly identical to FY 2019/20.



CNA Complaint Investigations & Discipline Statistics:

During the two years prior to FY 2021/22, the number of active Certified Nursing Assistants (CNA) in Nevada decreased by over 4%. In FY 2021/22 the number of CNAs increased by 7%. This resulted in a net increase of 558 active CNAs since FY 2019/20.

The number of practice related complaints opened to investigation was 61, remaining constant when compared to the previous two years. CNA investigations completed in FY 2021/22 totaled 34 and were concluded in an average of 75.2 business days. The three-year average time to completion of investigations was 61.4 business days.

The average days for initial complaint review at 0.97 was consistent with the three-year average of 1.05 business days.

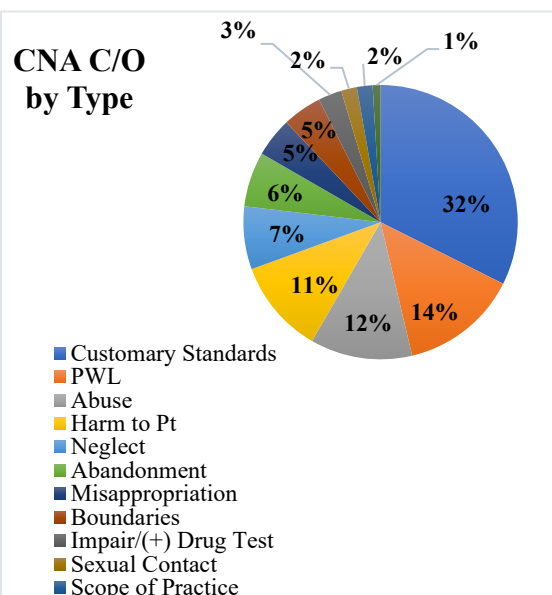
The origin of complaints did not vary notably from FY 2020/21. Facility driven complaints remained the most common and increases to 54% as compared to the previous 48%. Complaints of an anonymous origin increased from 2 to 4 (50%).

The most notable changes in complaints by type received were:

- An increase in Practice Without a License (active certificate) complaints (by over 50%).
- A small increase in complaints related to patient Neglect, Abuse and Misappropriation.
- A small decrease in complaints related to Boundary violations and Failure to Collaborate violations.

Total Number of Active Certificate Holders	19/20	20/21	21/22
Total certificated CNAs	9090	8998	9648
Percent increase from previous year	-3.50%	-1.01%	7.22%
Complaints Received/Investigated	19/20	20/21	21/22
Total complaints received	76	78	69
Total of complaints opened to investigation	67	60	61
Percentage of complaints by total NV CNAs	0.73%	0.87%	0.72%
Discipline Outcome Statistics	19/20	20/21	21/22
Total discipline outcomes	13	24	12
Percent of certificate holders receiving discipline	0.14%	0.27%	0.12%
Percent of discipline to complaints	19.00%	30.77%	17.39%
Days to Open and Resolve Complaints	19/20	20/21	21/22
Average total days from Opened to Case Review	61.3	47.7	75.2
Average days for initial review of complaints rec'd	1.25	0.93	0.97

Types of CNA Complaints	
Customary Standards	35
PWL	15
Abuse	13
Harm to Pt	12
Neglect	8
Abandonment	7
Misappropriation	5
Boundaries	5
Impair/(+) Drug Test	3
Sexual Contact	2
Scope of Practice	2
Privacy	1

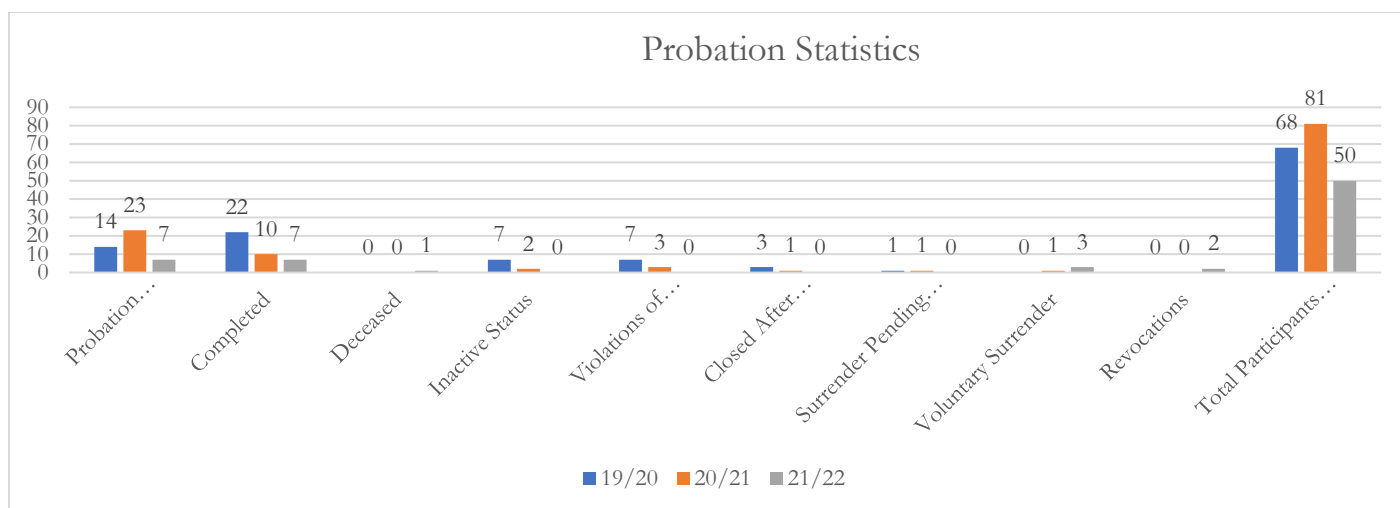


Compliance & Monitoring

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:



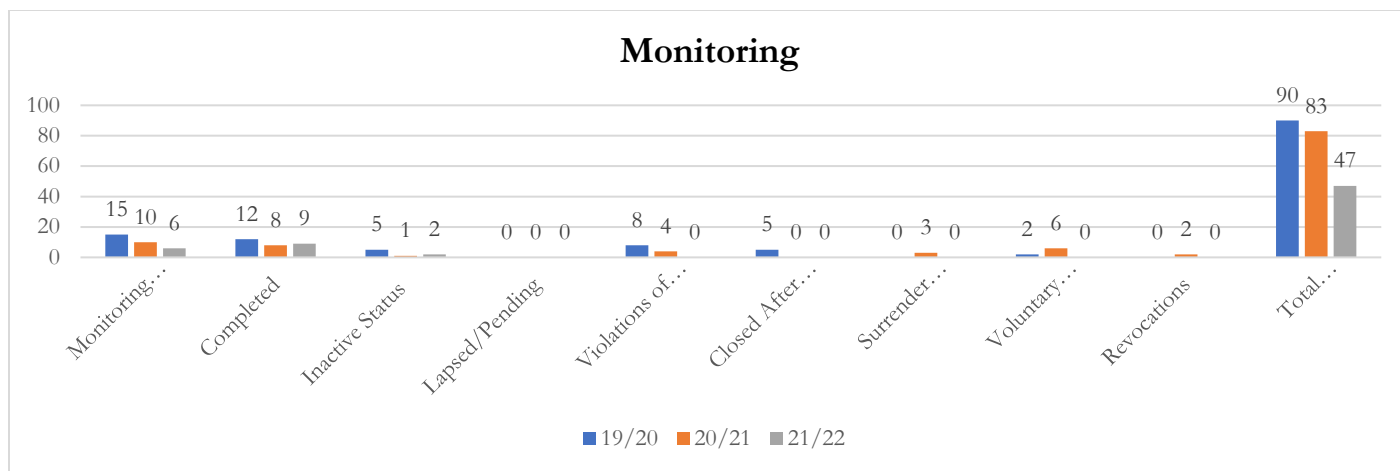
Probation Status	19/20	20/21	21/22
Probation Agreement/Order	14	23	7
Completed	22	10	7
Deceased	0	0	1
Inactive Status	7	2	0
Violations of Board Orders	7	3	0
Closed After Investigation *	3	1	0
Surrender Pending Hearing	1	1	0
Voluntary Surrender	0	1	3
Revocations	0	0	2
Total Participants on Probation **	68	81	50

*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.

*As of FY 21/22, this number reflects the total participants currently on probation (excluding those who participated for only a portion of the FY).

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.



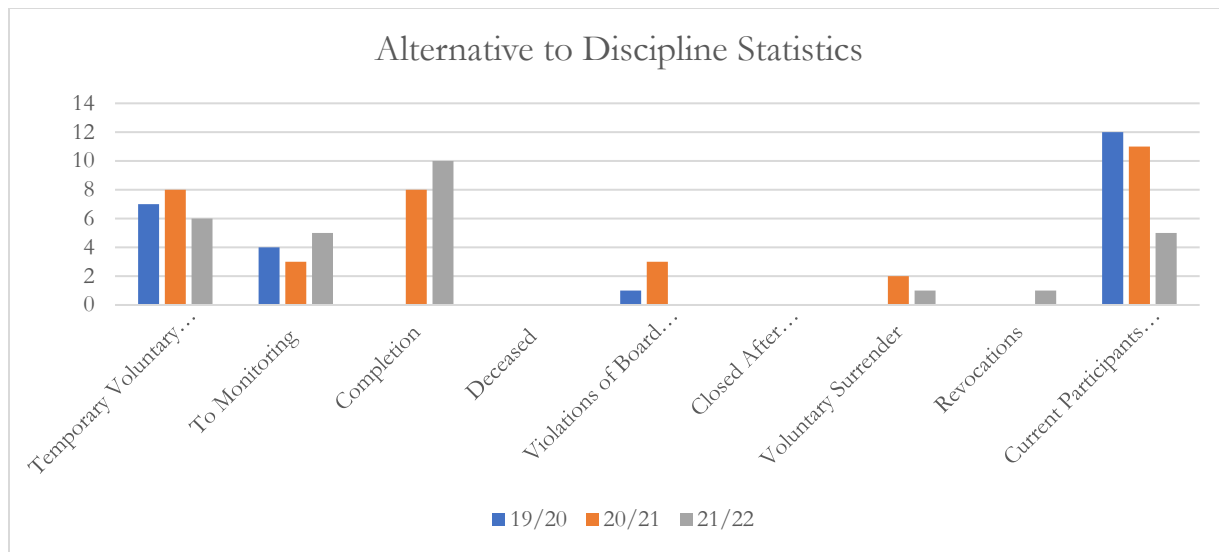
Monitoring Status	19/20	20/21	21/22
Monitoring Agreement/Order	15	10	6
Completed	12	8	9
Inactive Status	5	1	2
Lapsed/Pending	0	0	0
Violations of Board Orders *	8	4	0
Closed After Investigation **	5	0	0
Surrender Pending Hearing	0	3	0
Voluntary Surrender	2	6	0
Revocations	0	2	0
Total Participants on Monitoring	90	83	47

* 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 address the violation in a timely manner reducing the need to open a complaint.

** As of FY 21/22, this number reflects the total nurses/CNAs currently on monitoring (excluding those who participated for only a portion of the FY).

Temporary voluntary surrender statistics by fiscal year:

The Alternative to Discipline (ATD) Program requires the nurse or CNA to sign a temporary voluntary surrender of license to practice, 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.



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

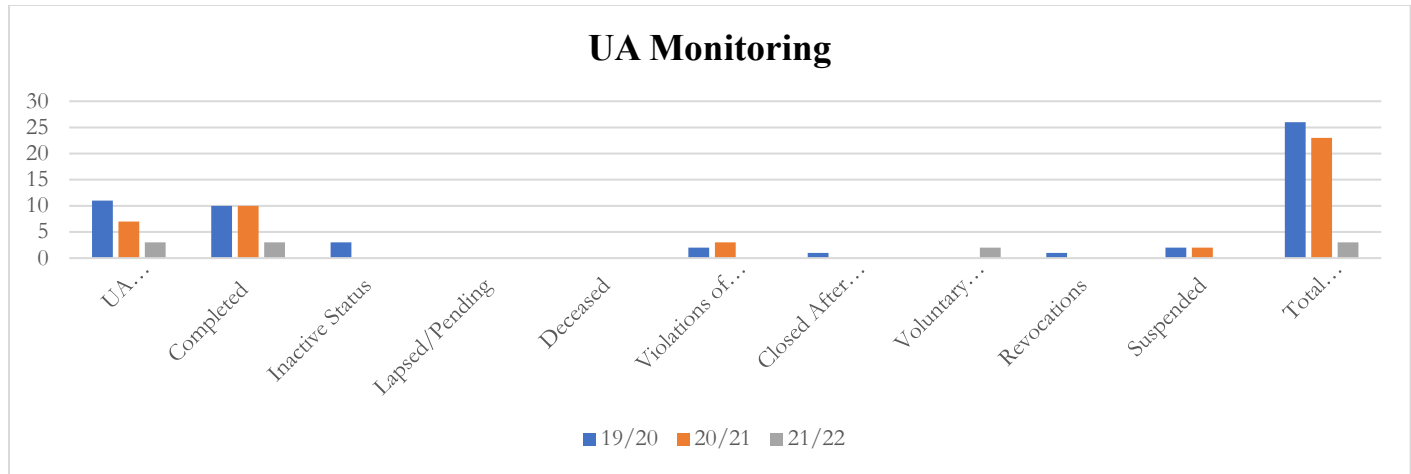
Violations of the Temporary Voluntary Surrender are related to positive drug tests or self-report of relapse.

Temporary Voluntary Surrender Status	19/20	20/21	21/22
Temporary Voluntary Surrender	7	8	6
To Monitoring	4	3	5
Completion	NA	8	10
Deceased	0	0	0
Violations of Board Orders *	1	3	0
Closed After Investigation	0	0	0
Voluntary Surrender	0	2	1
Revocations	0	0	1
Current Participants in the ATD Program	12	11	5

** As of FY 21/22, this number reflects the total nurses/CNAs currently on TVS (excluding those who participated for only a portion of the FY).

Monitoring Urine Analysis Statistics:

Monitoring UAs require abstinence and drug screens only.



Monitoring UA Status	19/20	20/21	21/22
UA Agreement/Order	11	7	3
Completed	10	10	3
Inactive Status	3	0	0
Lapsed/Pending	0	0	0
Deceased	0	0	0
Violations of Board Orders	2	3	0
Closed After Investigation	1	0	0
Voluntary Surrender	0	0	2
Revocations	1	0	0
Suspended	2	2	0
Total Participants in UA Agreements	26	23	3

** As of FY 21/22, this number reflects the total nurses/CNAs currently on monitoring for UAs only (excluding those who participated for only a portion of the FY).

Continuing Education Audits

Nurse Continuing Education Audits and Outcomes:

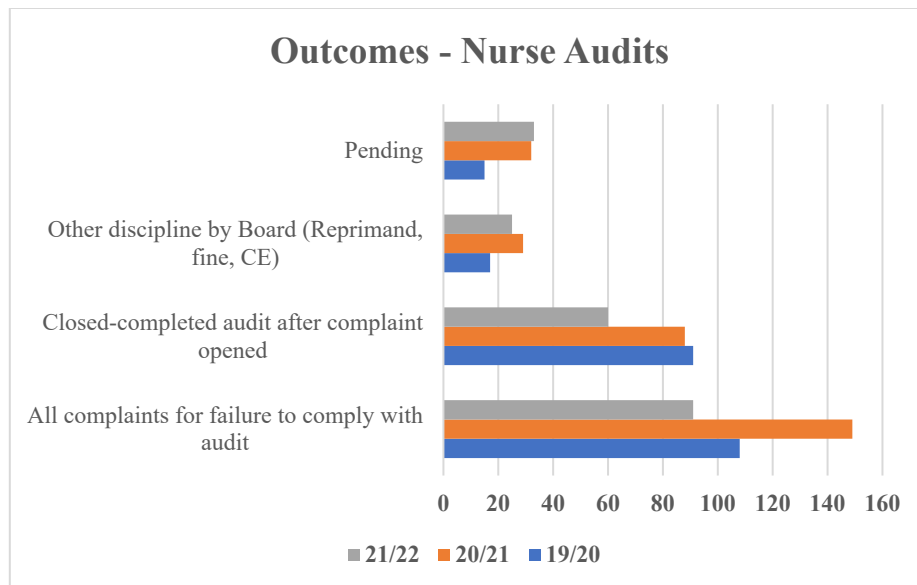
To be eligible for license renewal, RNs and LPNs must complete 30 continuing education (CE) credits within the previous twenty-four months, in addition to completing a one-time board-approved 4 CE bioterrorism course and meeting all other renewal requirements. APRNs must complete 45 CEs directly related 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. Effective January 1, 2022, all RNs, LPNs, APRNs, and CRNAs must complete a Board approved 2-hour cultural competency course every renewal cycle.

Nurse Audits			
Timeline-Fiscal Year	19/20	20/21	21/22
Total Audits Completed	1701	2415	2355
Total Successfully Completed Requirements	1593	2266	2264
Total Complaints Opened for Failing to Comply	108	149	91

Outcomes-Complaints Based on Failure to Meet Audit Requirements			
Timeline-Fiscal Year	19/20	20/21	21/22
All complaints for failure to comply with audit	108	149	91
Closed-completed audit after complaint opened	91	88	60
Other discipline by Board (Reprimand, fine, CE)	17	29	25
Pending	15	32	33

Percentage of All Renewal Applicants			
Timeline-Fiscal Year	19/20	20/21	21/22
Nurses Audited	9.2%	10.1%	10.1%
Completed without Investigation	93.7%	93.8%	96.1%

Percentage of Nurse Audit Complaints			
Timeline-Fiscal Year	19/20	20/21	21/22
Leading to investigation	6.3%	6.2%	3.9%
Closed after complaint opened	84.3%	59.1%	65.9%
Other discipline by Board	15.7%	19.5%	27.5%



CNA Continuing Education Audits and Outcomes:

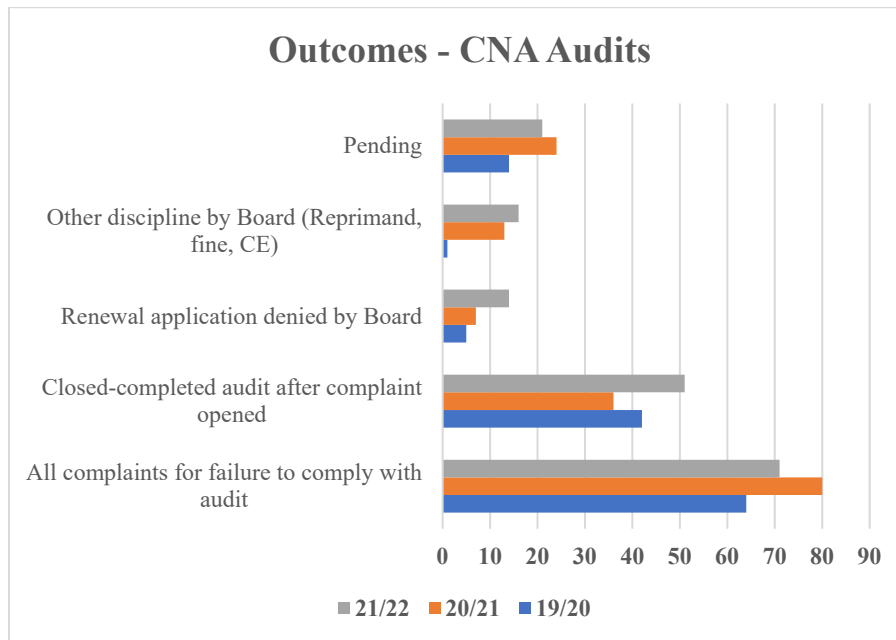
To be eligible for renewal of a certificate, CNAs must complete 24 CE credits or training within the previous twenty-four months and have 40 hours of CNA employment under the direction of a licensed nurse, in addition to meeting other renewal requirements. The Board audits a minimum of 10% of all CNA renewal applicants each month to ensure compliance with continuing education/competence and employment requirements as attested to on each renewal application.

CNA Audits			
Timeline-Fiscal Year	19/20	20/21	21/22
Total Audits Completed	286	419	357
Total Successfully Completed Requirements	222	339	286
Total Complaints Opened for Failing to Comply	64	80	71

Outcomes-Complaints Based on Failure to Meet Audit Requirements			
Timeline-Fiscal Year	19/20	20/21	21/22
All complaints for failure to comply with audit	64	80	71
Closed-completed audit after complaint opened	42	36	51
Renewal application denied by Board	5	7	14
Other discipline by Board (Reprimand, fine, CE)	1	13	16
Pending	14	24	21

Percentage of All Renewal Applicants			
Timeline-Fiscal Year	19/20	20/21	21/22
CNAs Audited	8.5%	9.4%	9.3%
Completed without Investigation	77.6%	80.9%	80.1%

Percentage of CNA Audit Complaints			
Timeline-Fiscal Year	19/20	20/21	21/22
Leading to investigation	22.4%	19.1%	19.9%
Closed after complaint opened	65.6%	45.0%	71.8%
Other discipline by Board	1.6%	16.3%	22.5%



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