

Official Publication of the

Nevada State Board of **NURSING**



Reno's Office Has Moved!

Nevada Nursing News

WORDS

From The Executive Director

Cathy Dinauer,
MSN, RN, FRE



I hope 2024 finds you all well, happy, and safe. The Nevada State Board of Nursing has moved! Our leases for both offices expired in late 2023 so this gave us the opportunity to look for new homes. The Reno location proved to be an easier find and we are now located at: 6005 Plumas Street, Reno NV 89519, suites 100 and 101. The new location has two suites: one for the staff and one for our board meetings. We anticipate the boardroom to be completed late spring, 2024.

We continue to look at potential venues for the Las Vegas office. Stay tuned.

In other news, we had two new board members appointed on November 1, 2023. Our newest members are: Tyler Johnson, CNA, from the Reno area and Elizabeth de Leon-Gamboa, RN, from Las Vegas. Board members are appointed by the Governor for a minimum of one term (4 years). Welcome and congratulations Tyler and Liza. We also said good-bye to two board members, Jacob Watts, CNA, and Branden Murphy, RN. Jacob served eight years on the board and Branden served four years. We thank you for your commitment to protecting the public and care of the citizens of Nevada.

Each year, the Nevada State Board of Nursing publishes an annual report that reflects the previous fiscal year. Some highlights of the annual report include:

1. There were 2,071 nurses who graduated from Nevada nursing programs (PhD., DNP, Post Masters, MSN, RN to BSN, BSN, ADN, AAS, AS, and LPN).
2. In FY 22/23, we had a total of 70,706 nurses and CNAs in the state.
 - a. APRNs: 5407
 - b. RNs and LPNs: 61077
 - c. CNAs: 9629

We are seeing an overall increase in the number of nurses licensed in Nevada each year.

MESSAGE

From the President

Richelle O'Driscoll, MA,
Consumer Member



I extend my warmest wishes for the new year, hoping that it brings an abundance of healthy lifestyle elements to your life. I also hope that your coming months are filled with the joy, purpose and the company of those who make life truly meaningful. What an opportunity that the new year provides for us all to take the time to reflect, renew, reset, rejuvenate and appreciate the resilience that is required to live and work in these very complicated times.

The nursing profession requires a tremendous amount of resiliency, your ability to thrive through stressful and sometimes adverse situations. The board often hears cases which involve mistakes or poor judgment by a nurse when caring for a patient that results in a poor and sometimes tragic outcome for the patient. It is our job to hear the facts of the situation and try to ascertain what might have happened at the time that the alleged infraction or incident occurred. Was this a one-time mistake? Were you practicing outside of your scope? Did you follow the procedures and protocols set by your employer? Did you receive adequate training? Were you impaired? Did you ask for assistance? What was your case load at the time? What extenuating circumstances contributed to the situation? Did you recognize the gravity of your action or inaction? We are trying to get the information from you so that we can make the best decision on what discipline, if any, to impose to protect the public and ensure and promote patient centered practice. We hope that if you are ever called before the board, which we hope won't happen, please know that it is important you to tell us your story. We consider each case independently and consider each unique set of circumstances.

With this in mind, I encourage you to reset and be mindful each day as you practice with patient safety in the forefront. Take that deep breath, assess the immediate situation, focus on the moment, be aware of the distractions around you, and communicate well and often with your colleagues and your patients.

As we reflect on the past year, I would like to thank Jacob Watts, CNA, and Branden Murphy, RN, for their service to the board, as their terms recently expired. I would also like to welcome and look forward to working with our two newly appointed members to the board, Tyler Johnson, CNA, and Elizabeth De Leon-Gamboa, RN.

Thank you for the work that each of you do in caring for our citizens. May the new year provide you with a deep sense of renewal and rejuvenation in your professional and personal lives.

Richelle O'Driscoll, BA, MA
President, Nevada State Board of Nursing

Meet the Secretary



If you know you know! I knew I wanted to be a nurse from a very young age. Starting out as a candy-striper at age 14 my dad would drive me to the hospital every Sunday for my shift delivering food trays and pitchers of water to patients. The hospital has always been my comfort zone, so it was a natural pathway to go to nursing school right out of high school.

I attended Samuel Merritt College of Nursing in Oakland, Ca. which at the time had an intercollegiate program with St. Mary's College in Moraga, Ca. In 1988 as juniors in the nursing program we were eligible to take our NCLEX exam. The fourth year of college we were all RNs working in the hospital while we completed our BSN courses. I graduated from St. Mary's College in 1989 and started on my professional nursing journey. I completed my Master of Business Administration with a focus on Healthcare Management from the University of Phoenix in 2005 with the goal of becoming more involved in nursing operational leadership.

In my 34+ years in healthcare I began my nursing career working in direct patient care areas of Med-Surg, Telemetry, Cardia ICU and eventually emergency care. As my career progressed, I began working in leadership capacities and spent significant time in both emergency and surgical services. Throughout my career I have been instrumental in helping organizations deliver exceptional patient care, create new services for communities, implement best practices, grow and mentor nursing leaders and I recently helped oversee the building of a new ambulatory surgery center here in Reno.

Currently I am a Director for Huron Consulting Group where I work as a subject matter expert and consultant. I am based out of Nevada, and I use my expertise to help implement best practices across the country with leading healthcare organizations.

I feel extremely honored to have been appointed in October 2021 as an RN representative to the Nevada State Board of Nursing. Serving on this board is a commitment that requires a blend of clinical expertise, regulatory knowledge, and a dedication to ensuring the highest standards of nursing practice for the benefit of the public. I make it a priority to stay updated on relevant laws, regulations and emerging trends in healthcare. I feel that serving on the Nevada State Board of Nursing is my give back to a nursing career that has been both professionally rewarding and personally fulfilling.

Elizabeth Trilops, RN, MBA/HCM
Secretary, Nevada State Board of Nursing

Meet the Newest Board Members



As an immigrant Filipino nurse, I am deeply humbled and grateful for the appointment by Governor Joe Lombardo to serve as the newest board member of the Nevada State Board of Nursing its centennial history. Looking back through these years, I could not imagine being in the forefront of impacting the healthcare landscape of Nevada through the regulation of nursing education and practice. Graduating from the University of the Philippines with a Bachelor of Science in Nursing degree in 1991 adequately prepared me for my journey in healthcare

delivery. After a brief experience as a clinical instructor in Angeles City and staff nurse at a public hospital in Manila, I was uprooted to settle in the United States. My nursing career spans 33 years in various roles as a restorative nursing assistant, rehabilitation nurse, medical surgical nurse, case manager, clinical nurse educator, quality reviewer, as well as a compliance nurse in the Philippines, California, and Nevada facilities.

Interests in nursing education, leadership, and innovation inspired me to pursue a post-graduate course, Master of Science in Nursing, with emphasis on Nursing Education at Capella University. To further enhance my skills in addressing the members needs through accurate assessment of resources and social determinants of health, it was important for me to undergo additional training and obtain certifications such as Certified Practitioner in Healthcare Quality (CPHQ), Certified Case Manager (CCM), and Certified Managed Care Nurse (CMCN). I am currently employed as a Manager for the Optum Care Mountain West Region, Oregon, and Washington Delegation Oversight. This role has given me a broader perspective of care collaboration and coordination across the health care continuum among the interdisciplinary team members, engaging the patient and the family to ensure care plan adherence. It is exciting to be a part of an institution that champions the Quadruple Aim for Healthcare by supporting population health improvement, affordability, patient satisfaction, and creating an environment that fosters the welfare of health care workers.

My passion to give back to the community allowed me to serve in different capacities for Nevada Nurses Foundation (NNF), National Federation of Filipino American Associations (NaFFAA-NV), University of the Philippines Nursing Alumni Association, Inc. (UPNAAI), and NSBN Education Advisory Committee. As the Academic Research Collaborator (ARC) for the Filipino American Patient Centered Outcomes Research (FAPCOR) NV Nayon, it is my mission to promote positive health care outcomes for Filipino Americans in Nevada by addressing the health care delivery's socio-economic and cultural challenges. The consortium, comprised of health care professionals and civic organizations, strives to enhance chronic illness prevention and management through

education. I believe in accountability of all stakeholders to ascertain the health of the community by delving into root causes of disparities and inequities utilizing collaborative efforts in finding solutions.

As the immediate past President of the Philippine Nurses Association of Nevada (PNANV) for 2021-2023, and now an advisor, it was rewarding have collaborated with the NSBN on several initiatives such as the approval of the International English Language Testing System (IELTS) for English proficiency testing towards licensure and the enactment of the Nurse Licensure Compact in Nevada.

In addition, my fervor to advocate for nursing colleagues has established the path towards enhancing the mental well-being of Nevada nurses through self-care. Being one of the facilitators of the MindBodyStrong classes has compelled me to co-author “Caring Starts with Me: Ako Muna (Me First), A Culturally Sensitive Self-Care Program for the Immigrant Filipino Nurses.” The program aims to equip these foreign nurses with cognitive, affective, and behavioral self-care strategies while understanding how their own core cultural traits may affect their satisfaction with family, work environment, or experiences. Mentoring novice nurses through PNANV’s Mentorship Program, CSN Preceptorship for RN to BSN Bridge Students, and UNLV Mentorship Program for BSN Level 4 Students have been my way of nurturing the future generation of nurses. In honor of my mother and mother-in-law who are both nurses, the de Leon-Gamboa Seeds of Hope Nursing Scholarship has been established to benefit nursing students coursed through various non-profit organizations such as the NNF, PNANV, NaFFAA-NV, and the UPNAAI.

Protecting public safety, health, and trust is a huge responsibility for a board member of NSBN. I have accepted this commission wholeheartedly as it is an opportunity to represent at least 22% of the AANHPI nurses in the State of Nevada and be their voice for nursing policy and regulatory changes. As ingrained in me by my alma mater “Manus, caput, cor,” my charge entails the gentle work of my hands through service, critical thinking to make sound decisions, and a heart that is unbiased, yet compassionate.

Elizabeth de Leon-Gamboa, MSN Ed., RN, CPHQ, CCM, CMCN



It is with great honor to be appointed as a member to the Nevada State Board of Nursing and a privilege to be able to advocate to keep our communities safe. I was born and raised in Reno, Nevada. I grew up with an amazing family who I have the pleasure of being still, so close with to this day. I attended the University of Nevada Reno where I earned my BS in Public Health and learned the significance of keeping our communities safe and healthy. Currently, I am pursuing my Master's degree in Healthcare Administration, with intent of continuing my knowledge and one day be able to improve healthcare access and quality of care in our communities.

While attending UNR for my undergraduate degree, I obtained my certification to become a CNA. My healthcare journey officially began at Renown Health on a cardiac Telemetry unit, and I could not be more grateful for the experience. I quickly learned I had a passion for working with cardiac patients. I then worked on the Cardiac Intensive Care Unit where I was able to truly see the importance of critical care nursing and the challenging work it is. Part of my time on the Cardiac ICU was during the COVID-19 pandemic, where I was proud to be one of the many front-line workers fighting for the safety of our community. More recently, I serve as the Supervisor of Patient Safety with focused work surrounding suicide prevention. I am proud to have partnered with our behavioral health team at Renown and host our first ever zero-suicide conference for healthcare workers. The conference was part of a zero-suicide mission, dedicated to shattering the stigma associated with suicide while showing unwavering support for the mental health of all clinicians.

From a young age I had a passion for helping others, lots of this stemmed from my older brother, a dirt bike racer, who always had a broken bone or plethora of scrapes. Additionally, my grandfather was diagnosed with a terminal illness, and I was thankful that with my healthcare background I was able to provide comfort to him as well as my family during his final days. My grandfather's illness was an extremely eye-opening experience that emphasized my desire to work in healthcare, and the importance of nursing and quality care to both the patient and the patient's family.

I take pride in having a healthy work-life-education balance. In my free time, I love to travel and explore new places. Some of my favorite cities I have been to are Nashville, Austin, Scottsdale, and Seattle. As well as my family's favorite vacation spot in Cabo San Lucas, Mexico. I also enjoy spending quality time with my family and closest friends, and of course our family pets.

I am extremely excited for the opportunity to serve on the Nevada State Board of Nursing. My promise to the people of Nevada is to always advocate for what is right, view things from a different vantage point to be fair and consistent, as well as use my knowledge from an acute care background with the goal of keeping Nevada safe.

Tyler Johnson, BS, CNA

Models for Implementing Critical Thinking into Lessons for Nursing Students

by

Dr. Lauren Jones & Dr. Jean Benzel-Lindley

Introduction -

This is the third entry of essays on critical thinking among Faculty and nursing students. This essay will explore in greater depth how to employ specific patient scenarios within the instruction of nursing students. In the last entry to this series the authors identified five instructional methods most often employed to engage students critical thinking skills: case studies, concept mapping, problem-based learning, simulation-based learning, and reflection. This essay will present two patient scenarios with illustrations of how to employ each of the identified critical thinking teaching strategies.

Entry #1

Wren is a 15-year-old run away. She has been homeless for the past six months. She supports herself through petty theft and begging. Lately she hears voices telling her that she is worthless so killing herself would be a blessing. Wren is brought to a jailhouse clinic when she is caught stealing food from a mini-market. The arresting officers noted that Wren was "talking to people who weren't there". Since their small town no longer has a functioning rural hospital, they decided it was best to arrest Wren to "get her into the system".

1. *Case Studies*

Case studies provide an opportunity for students to analyze patient scenarios, consider different perspectives, and develop clinical reasoning. Divide the students into small groups of 3-5 members. Direct each group to use the nursing process to identify the most likely conditions that Wren may be suffering from. Once each group has a listing of potential health issues, they are to detail treatment options for each named condition. Specific questions for Fundamental students will begin to teach focus. Questions for case studies will decrease as the students' critical thinking expands.

2. *Concept Mapping*

Concept mapping helps students to develop critical thinking skills by facilitating the process of analyzing and synthesizing information. It also promotes collaborative learning, as students can work in groups to create concept maps. There are five basic steps to creating a concept map. Begin by selecting a drawing medium. Next establish the main concept or theme. Once you have named the main concept, identify all related concepts or ideas that tie to that main concept. To enhance the cohesiveness of the developing map, organize the shapes you are using for the main idea and its related themes. Be sure you are beginning to tie all the shapes together with directional lines or arrows. Ask someone to review your map for congruency of ideas and believability of meaning. This is a useful strategy for small groups to practice 'group thinking'; improving verbal and negotiation skills.

3. *Problem-Based Learning*

Problem-based learning is an instructional method that involves presenting students with a complex problem or scenario, and then requiring them to work together to find a solution. Each individual or group needs to review all the information presented about Wren and her situation to aid in the development of a probable patient-centered issues list. Have each person or group devise solutions to every named patient issue ranked by severity of the issue, or complexity of the interventions, or readiness of resources to address each issue.

4. *Simulation-Based Learning*

Simulation-based learning involves creating realistic patient scenarios in a simulated environment. Nursing students can practice their clinical skills and decision-making abilities in a safe and controlled setting. Hire an actor to portray Wren. This type of “live” simulation training allows students to polish their interviewing and observational skills. Ask each nursing student to question the patient as to health behaviors, or safety issues. If your program has no funds to hire an actor, the same interactions can be achieved via a high-fidelity mannequin with debriefing.

5. *Reflection*

Reflection is a process in which students review their own learning experiences and identify areas for improvement. Reflective practice is an essential component of nursing education, as it allows students to identify their own strengths and weaknesses and develop strategies for improvement. This type of learning is often deeply personal for students. Instructors may ask students to journal their feelings about street people or the mentally distressed. If students are more advanced, then engaging in small group discussions about personal experiences dealing with mentally ill individuals may be in order.

Entry #2

A 64-year-old female (LaShonda) is admitted for Type II diabetes and atrial-fibrillation. Her other comorbidities include anxiety; psoriasis; IBS and osteoarthritis. Her meds. include 5 mg Valium prn which she has taken for 20+ years as well as (Metformin 500 mg per day; Amaryl 8 mg per day; Humeria 40 mg every other week; Librax 2 capsules four times per day; & Celebrax 200 mg orally once daily). She is a brittle diabetic and weighs 250 lbs. She is the main caretaker for her husband (aged 54) who was diagnosed with dementia in 2010. He is no longer ambulatory without a walker and often leaves the house and wanders. The husband’s medications include galantamine 15 mg per day; rivastigmine 3 mg twice per day; & donepezil 5mg per day.

1. *Case Studies*

Case Studies can be used in classroom settings or in clinical practice. Instructors can present real or fictional patient cases, and students can work in groups or individually to analyze the cases and develop care plans. Identify the current stresses to this family and identify questions to the patient to broaden the nursing assessment. This could branch into a concept map. What is this patient’s role within the family? These could be adding to her stress and impacting her prognosis.

2. *Concept Mapping*

This method of instruction involves a graphical tool that nursing students can use to organize and analyze information. It involves creating a virtual representation of a concept or a patient scenario, and then identifying the relationships between different components. The main concept could be 64-year-old female (LaShonda) who is the primary caregiver with a-fib and recently diagnosed Diabetes II. One can see the involved matrix with meds/husband's care/new diet/weight reduction as critical factors.

3. *Problem-Based Learning*

This method is effective in promoting critical thinking because it requires students to analyze and evaluate information, and then use that information to make decisions. Problem-based learning also promotes collaborative learning, as students work together to solve the problem. The NURSING Problem could focus on EDUCATION re: the new diagnosis impacting LaShonda's role as care giver/diet change/weight loss/stress.

4. *Simulation-Based Learning*

Simulation-based learning is effective in promoting critical thinking because it allows students to apply their knowledge and skills to real-life situations. Simulation-based learning is an effective tool for promoting critical thinking among nursing students. The lab Sim equipment could include role-playing and actual 1:1 teaching after LaShonda has identified her needs/fears/concerns about her health and her husband's.

5. *Reflection*

Reflection promotes critical thinking by encouraging students to analyze and evaluate their own learning experiences. Reflective practice is an essential tool for promoting critical thinking among nursing students. This requires conducting a fault analysis: "What if..."? Reflection could be done by a small group after each other group presents their work. Questions could be raised of each group presenting after their type of learning is identified. This requires that each team (small group) be prepared for "what if you had done this..."? Again, in addition to thoroughly assessing patients' actual and outlying information, it also facilitates professional communication and encourages broader thinking and decreases defensiveness and the assumption that there is only ONE solution.

Conclusion –

This essay contained two patient scenarios acting as the framework for discussions on how instructors may use them. Five previously presented methods on teaching critical thinking to nursing students.

The final essay into the increasing critical thinking among nursing students will center on faculty changing their teaching methods and multiple-choice questions for learners.

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