

Nevada State Board of **NURSING**



ANNUAL REPORT
FISCAL YEAR 2022/2023



TABLE OF CONTENTS

OUR MISSION _____	4
ABOUT THE BOARD _____	5
Administration _____	5
Education, Licensure, and Certification _____	5
Investigation and Compliance _____	5
NSBN BOARD MEMBERS _____	6
MESSAGE FROM THE EXECUTIVE DIRECTOR AND BOARD PRESIDENT FY 22/23 _____	7
ORGANIZATIONAL STRUCTURE _____	8
BOARD STAFF _____	9
Executive Director _____	9
Catherine Dinauer, MSN, RN, FRE _____	9
Executive Staff _____	9
Investigation & Monitoring _____	9
Licensure & Certification _____	9
Support _____	9
Strategic Goals _____	10
State-wide Accomplishment _____	10
Professional and Collaborative Relationships _____	10
Nursing Education Programs _____	11
Fiscal Year 2022/2023 Nursing Programs _____	11
Fiscal Year 2022/2023 Nursing Examination Pass Rates _____	11
Fiscal Year 2022/2023 Nursing Assistant Examination Pass Rates _____	12
BOARD ADVISORY COMMITTEES _____	13
Advanced Practice Registered Nurse Committee _____	13
CNA & MA-C Advisory Committee _____	14
Disability Advisory Committee _____	15
Education Advisory Committee _____	16
Nursing Practice Advisory Committee _____	17
Licensed Practical Nurse Advisory Committee _____	18
ANNUAL REVIEW BY THE NUMBERS _____	19
Licensure & Certification _____	19
Advanced Practice Registered Nurses _____	20
Applications _____	23
Nurse and nursing assistant Fraudulent Applications _____	25

Complaint Investigation & Discipline _____ 26

Compliance & Monitoring _____ 31

Continuing Education Audits _____ 34

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 Nevada legislature to regulate nursing practice. The seven-member Board, appointed by the Governor, consists of three registered nurses, one advanced practice registered nurse, one licensed practical nurse, one certified nursing assistant, and one consumer member. Currently, the Board establishes and receives recommendations from six 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 continuing 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 McGuiness, LPN



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

MESSAGE FROM THE EXECUTIVE DIRECTOR AND BOARD PRESIDENT FY 22/23

The Year of our 100th Anniversary. In April, the Nevada State Board of Nursing (NSBN) celebrated its 100th Anniversary. It was a momentous occasion and wonderful to see new and former board members, former executive directors, and the CEO of the National Council of State Boards of Nursing. We thank everyone who participated in the event and joined in the celebration of all the nurses in Nevada who have dedicated their lives to caring for the patients and citizens of Nevada.

The legislative session kept the NSBN quite busy this year. As many of you are aware, we tried to get the Nurse Licensure Compact (NLC) passed in our state (AB 108) but the bill failed in Committee. Assemblywoman Jauregui introduced the bill in the Assembly Commerce and Labor and while she did her best to get the bill passed, the NLC was defeated. We are often asked why there is so much opposition to the NLC given that 92% of nurses in Nevada are in favor of the compact. It is due to nursing union opposition. The unions have stated a variety of reasons for the opposition, and it was enough to halt the passage of the NLC.

Other noteworthy legislative bills include AB 267 which changes the requirements for cultural competency continuing education from a 2-hour mandate to 4 hours. AB 401 changes nursing faculty ratios from 1:8 to 1:10 and SB 366 allows CRNAs who work in Critical Access Hospitals to prescribe medications under the direction of a physician.

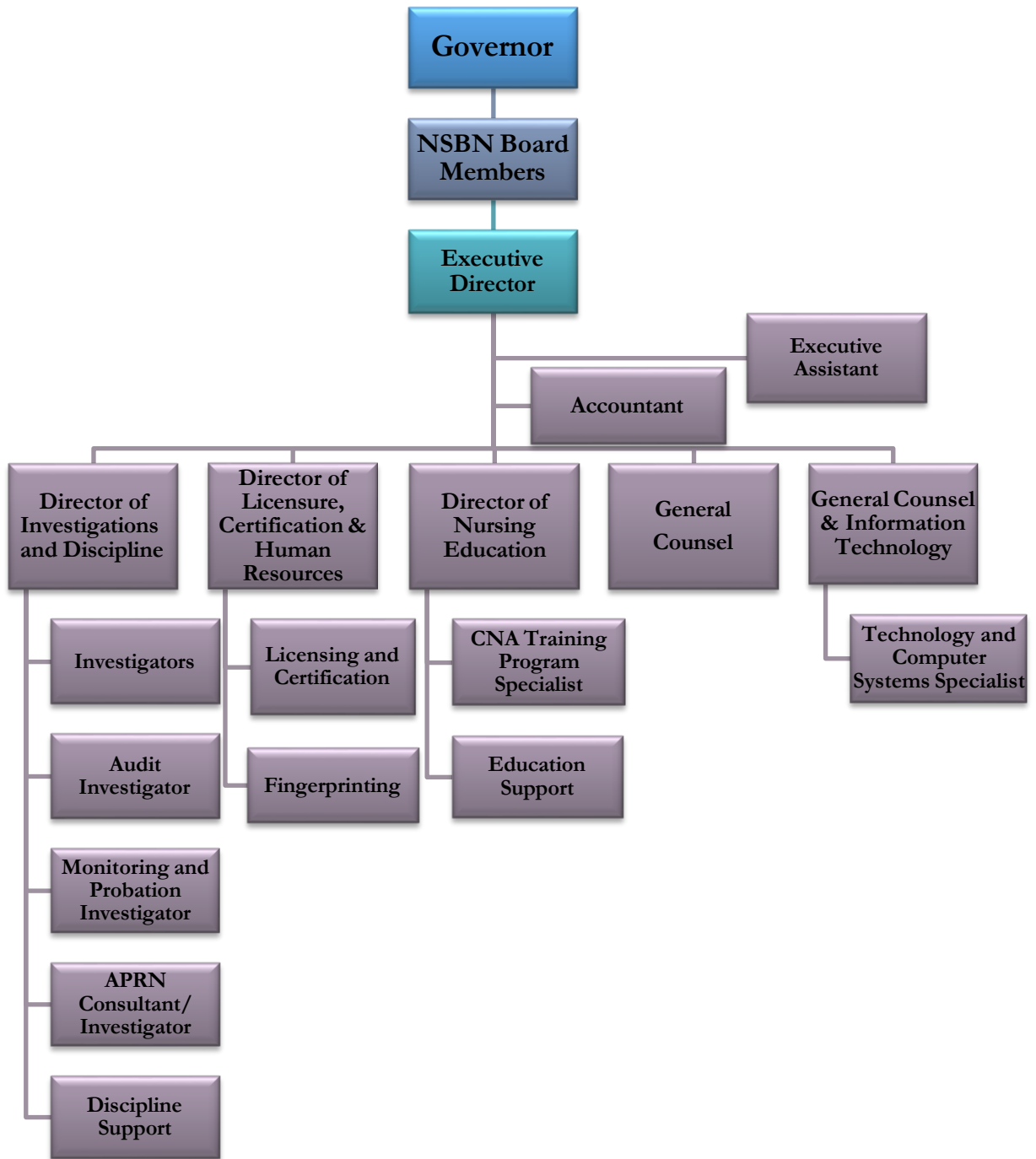
In addition, our Board made changes to the LPN scope of practice related to procedures in venipuncture and intravenous therapy delegable to certain LPNs.

The Board continues to assess nursing practice in our state so that unnecessary barriers are eliminated. We continue to wish you all the best in this next year.

Cathy Dinwuer, 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

Elaine Ralph, MSN, RN, FN-CSp

Monitoring and Probation Investigator

Cynthia Peterson, RN, CLNC, CHCQM

Investigator

Brandi Harkey, 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

Gabriela Hernandez-Aguilar

Licensing and Certification Technician

Madison Webb

Licensing and Certification Technician

Courteney Baccei

Fingerprint Specialist

C. Ryan Mann, MSN, RN

Application Eligibility Specialist

Support

Kristie Neuhauser

Accountant

Rhoda Hernandez

Technology and Computer Systems Specialist

Hannah Boll-Matulis

Management Assistant

Cydnee Perez

Management Assistant

Education Department

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

Post pandemic, the NSBN continues to listen to concerns from nurses and healthcare providers regarding the practice of nursing and the challenges to providing care. This has resulted in regulatory changes to the Nurse Practice Act.

The NSBN continues to provide educational presentations to stakeholders regarding nursing practice and education in Nevada.

The NSBN approved new nursing programs and certified nursing assistant programs. The NSBN is committed to eliminating barriers to practice.

During the 2023 Legislative session, the NSBN worked with State Legislators to identify recommendations to increase the nursing pipeline and workforce strategies.

Our Advisory Committees put forth new and enhanced practice decisions to improve the practice of nursing in Nevada.

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.

Fiscal Year 2022/2023 Nursing Programs

- ✓ Fully approved nursing programs in Nevada: 14
- ✓ Programs approved to conduct only the clinical portion of the program in Nevada: 4
- ✓ Programs under Provisional or Conditional Approval*: 5

** 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 2022/2023 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: 86.01%
- ✓ National NCLEX average pass rate: 79.91%
- ✓ Nevada NCLEX-PN average pass rate: 90.53%
- ✓ National NCLEX-PN average pass rate: 79.93%

Graduates from Nevada Nursing Programs	20/21	21/22	22/23
PhD - University of Nevada, Las Vegas	7	5	5
DNP- Touro University	*	24	27
DNP - University of Nevada, Las Vegas	14	23	4
DNP - University of Nevada, Reno	34	36	40
Post MSN Certificate- Touro University	*	3	2
Post MSN certificate - University of Nevada, Las Vegas	0	0	3
Post MSN certificate - University of Nevada, Reno	18	14	16
MSN- Roseman University	*	20	17
MSN- Touro University	*	51	43
MSN - University of Nevada, Las Vegas	0	35	6
MSN - University of Nevada, Reno	29	27	23
RN to BSN- College of Southern Nevada	*	0	4
RN to BSN - Great Basin College	24	26	20
RN to BSN -Truckee Meadows Community College	*	6	5
RN to BSN - Nevada State College	146	106	126
RN to BSN- Touro University	*	52	13
RN to BSN - University of Nevada, Reno	18	26	22
BSN- Arizona College	83	135	185
BSN- Chamberlain University	115	170	170
BSN- Grand Canyon University	X	X	X
BSN - Nevada State College	201	254	236
BSN - Roseman University	160	166	177
BSN- Unitek College	X	X	X
BSN - University of Nevada, Las Vegas	196	240	252
BSN - University of Nevada, Reno	159	143	128
ADN - Carrington College, Las Vegas	X	X	X
ADN - Carrington College, Reno	164	126	141
AAS - Great Basin College	38	30	27
AAS - Las Vegas College	2	146	112
AS - Truckee Meadows Community College	71	69	58
AAS - Western Nevada College	50	48	44
AAS - College of Southern Nevada	192	109	97
LPN - Las Vegas College	X	9	52
LPN - College of Southern Nevada	16	16	16
LPN- Unitek College	X	32	42
Total	1,737	2,115	2,071

*=no data available X=no graduates/new program

Fiscal Year 2022/2023 Nursing Assistant Examination Pass Rates:

The Board adopted the Headmaster, LLP examination through December 31, 2022, and the Credentia Nurse Aide Credentialing Services examination effective January 1, 2023, as the official competency examination for nursing assistant certification in Nevada. There are two components to the test, a written exam, and 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: 85%
- ✓ Skills exam Nevada pass rate: 67%

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
- Danielle Barisone, MSN, RNFA, AGPCNP-BC, CNOR – Reno-March 2026
- Amanda Cormican, APRN, CPNP-PC – North Las Vegas, September 2025
- Andrea Hill, DNP, APRN, FNP-BC – Las Vegas, September 2024
- Jeanine Packham, DNP, ACNP-BC, CCRN-CMC, PHN - Reno - November 2023
- Rebecca Scarpa, DNP, APRN – Reno – November 2025
- Dominic M. Etl, FNP-C - Las Vegas – November 2023
- Gregory Jones CRNA, MS, BSN-Reno-September 2024

Description & Accomplishments:

- Reviewed and discussed the need for edits or updates to NRS 632.237 as they pertain to advanced practice nurses regarding instituting statutes discipline specific to the APRN in Nevada.
- Reviewed and discussed the potential addition of APRN education to regulations and statutes. Participants expressed immense support for the additions to the APRN education regulations and statutes.
- Reviewed, discussed, and approved proposed revisions to the Nevada State Board of Nursing Practice Decision titled: Epicardial Pacing Wire Removal.
- Reviewed, discussed, and approved recommendations to the Board regarding revisions to the Nevada State Board of Nursing practice decisions titled: Hemovac and/or a Jackson Pratt Surgical Drain and Collagen Plug draft with recommended changes.
- Reviewed and discussed possible revisions to NAC 632.890 and NAC 632.285 as they pertain to advanced practice nursing and the Governor Lombardo directives 2023-003 and 2023-004.
- Reviewed and discussed the Nursing Practice Advisory Committee's proposed practice decision titled: Nitrous Oxide/ Oxygen Administration Outside the Operating Room.
- The committee discussed APRN's identifying themselves as a doctor. The committee agreed that APRN's can call themselves a doctor but must clarify their credentials.
- Reviewed and discussed SB-336 and CRNA scope of practice.
- Reviewed and discussed the new Nevada State Board of Nursing Scope of Nursing Practice Decision-Making Framework addressing the delegation of nursing tasks to assistive personnel.

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: Tamara Pachak, RN, CNA Training Program Specialist

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
- Alondra Alvarado, CNA – Carson City – May 2026
- 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
- Marie Coe (Division of Aging Services – Reno – Indefinite
- Gabrielle Collins, CNA (CNA Member) – Las Vegas – September 2024
- Judy Gmouh, LPN – Dayton – May 2026

**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:

- Continuously reviewed CNA state competency exam pass rates.
- Three new nursing assistant training programs were approved.
- Revised the remediation policy and procedure for nursing assistant training programs.
- Provided information during CNA Advisory meetings regarding the new state test vendor.
- Provided information during CNA Advisory meetings on workshops hosted by NSBN and Credentia.

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
- Rebecca Scarpa, DNP, APRN - Reno – July 2023
- Beth Kiehn, APRN - Reno – September 2024
- Theresa Lemus, MBA, BSN, RN, LADC – Reno – November 2025
- 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:

- The Committee members were presented with information and research regarding the practice of Medication Assisted Treatment and the use of Naltrexone for Alcohol Use Disorder.
- The Committee continues to research and discuss opportunities to educate the nursing professional to recognize 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
- Tamara Mette (Great Basin College) – Elko – May 2026
- Brian C. Oxhorn, PhD, RN (Roseman University) - Las Vegas – September 2024
- Angela Silvestri-Elmore, PhD, APRN, FNP-BC, CNE – Las Vegas – September 2023
- Sherry Akins, DNP, RN – Las Vegas – March 2026
- Nichole Artam, BSN, RN, CEN – Gardenville – March 2026
- Robert Vadovic, DNP, RN, APN-c- Las Vegas – September 2025
- Elizabeth De Leon Gamboa, MSN, Ed., RN, CPHQ, CCM, CMCN – Las Vegas – May 2026
- Jill Rankin, DNP, RN (Arizona College), Las Vegas – May 2025
- Erin Van Kirk, MSN, RN – September 2024

Description & Accomplishments:

- Revised the Waiver of Faculty Education Requirement Policy.
- Created and approved a Faculty Development Plan Template.
- Reviewed state and national NCLEX pass rates before and after implementation of the Next Generation NCLEX (NGN).
- Recommended approval of UNLV’s Direct Entry Master of Science in Nursing program
- Reviewed presentation on Nevada Nurse Apprentice Program (NAP).

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
- Sheryl Bennett, MSN, RN, NCSN, LSN – Reno – March 2026
- Shanna Kennon MSN, RN – Reno – January 2023
- Lan Cabatingan, MSN, APRN, FNP-BC – Las Vegas – March 2026
- Debra Adornetto-Garcia, DNP, RN, AOCH, 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
- Jeanine Young, M.ED, BSN, RN – Henderson – March 2026
- Hazel Church, RN, MHA, CPHQ – Henderson – July 2025

Description & Accomplishments:

- Researched and revised the Nevada State Board of Nursing practice decision titled: Hemovac and/or a Jackson-Pratt Surgical Drain.
- Researched and revised the Nevada State Board of Nursing practice decision titled: Collagen Plug.
- Researched and revised the Nevada State Board of Nursing practice decision titled: Epicardial Pacing Wire Removal.
- Researched, developed and approved the Nevada State Board of Nursing practice decision titled: Requirements for the Registered Nurse in the Administration of Nitrous Oxide outside of the Operating Rooms.
- Reviewed, researched, and completed the practice decision tree addressing delegation of nursing duties to assistive personnel.
- Reviewed, researched, and completed revisions to the practice decision titled: Epidural Catheter Removal.

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 2025
- 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- May 2026

Description & Accomplishments:

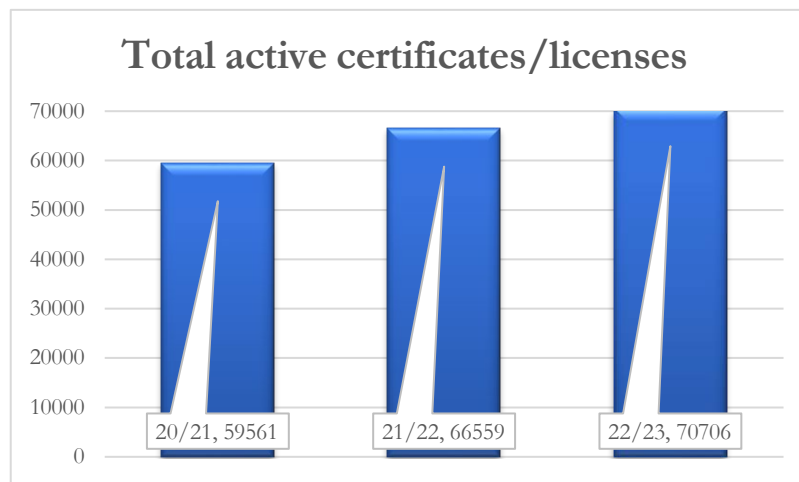
- Researched and drafted revisions to the Nevada State Board of Nursing practice decision titled: RN & LPN Role in Pessary Device Interventions.
- Researched and approved revisions, as they apply to the LPN practice, to the Nevada State Board of Nursing practice decision titled: Hemovac and/or a Jackson-Pratt Surgical Drain.
- Reviewed and approved revisions, as they apply to LPN practice, to the Nevada State Board of Nursing practice decision titled: Collagen Plug.

ANNUAL REVIEW BY THE NUMBERS

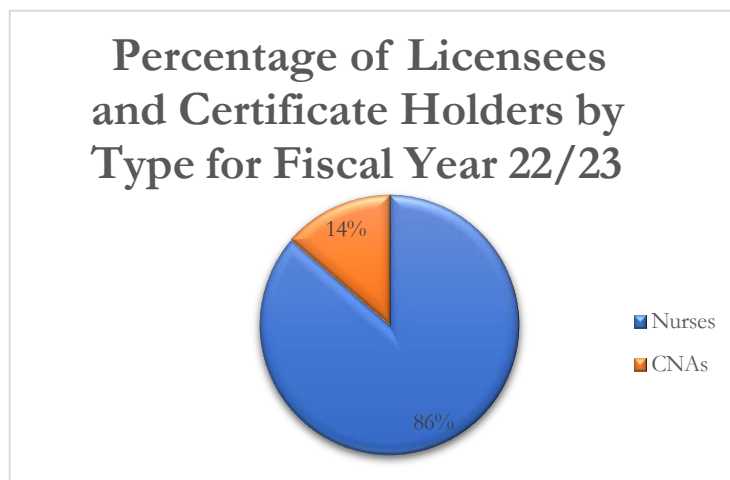
The Board reviews a minimum of three years of statistical data annually to identify trends in licensure, certification, investigation, discipline, continuing education, audits, and compliance. The data is collected contemporaneously throughout the fiscal year, from July 1 through June 30.

Licensure & Certification

Total number of Active Licensees and Certificate Holders



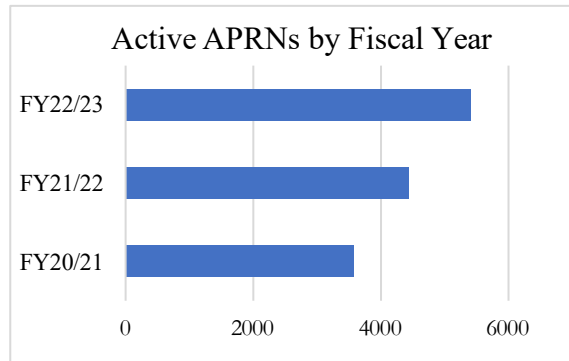
Total number of Licensees and Certificate Holders by license type for Fiscal year 2022/2023:



Advanced Practice Registered Nurses

Number of APRNs with an Active License:

Active APRNs	
FY 20/21	3578
FY 21/22	4440
FY 22/23	5407

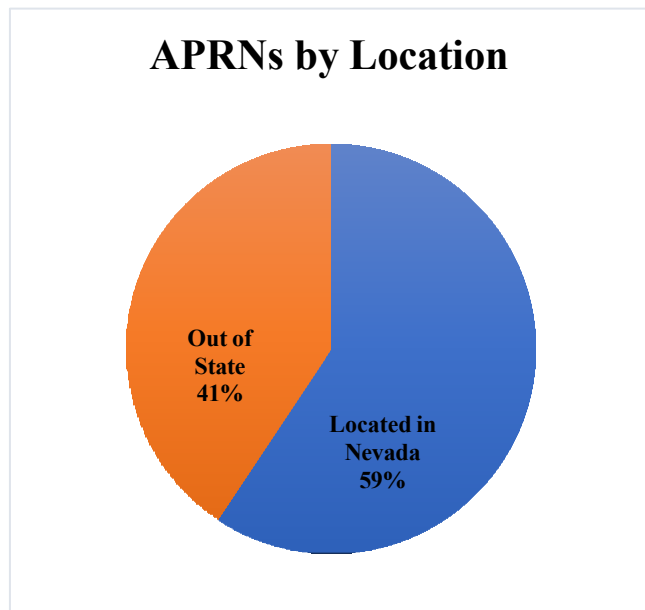


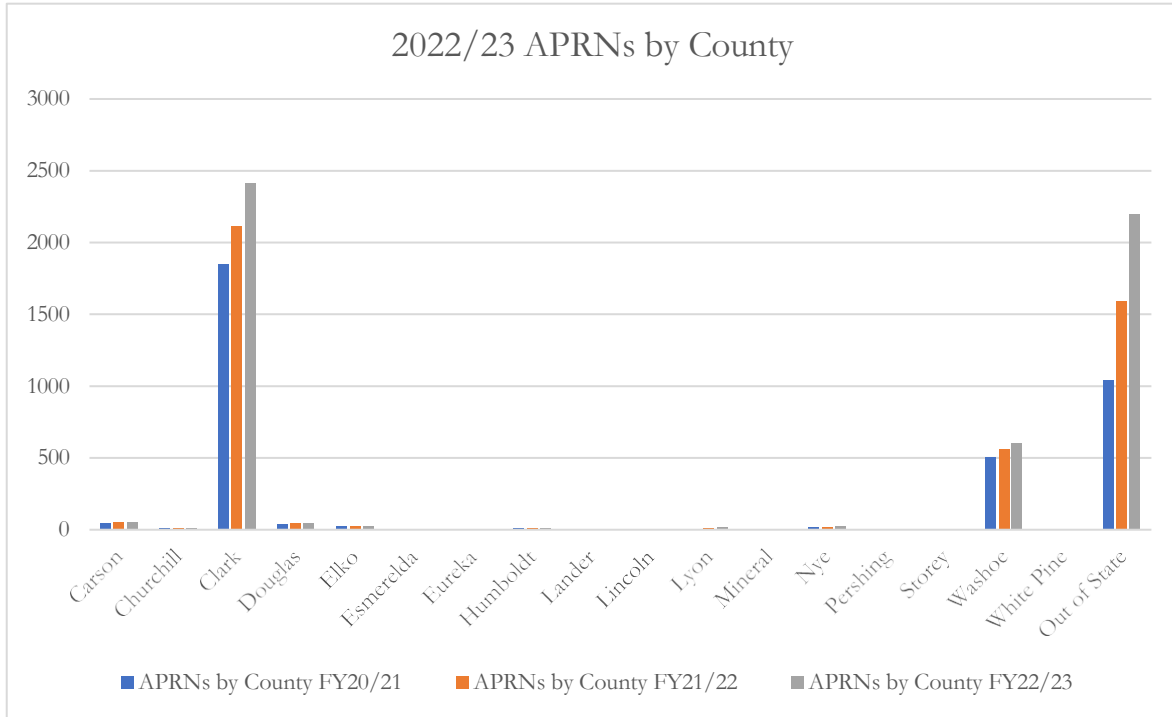
APRNs by Location:

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.

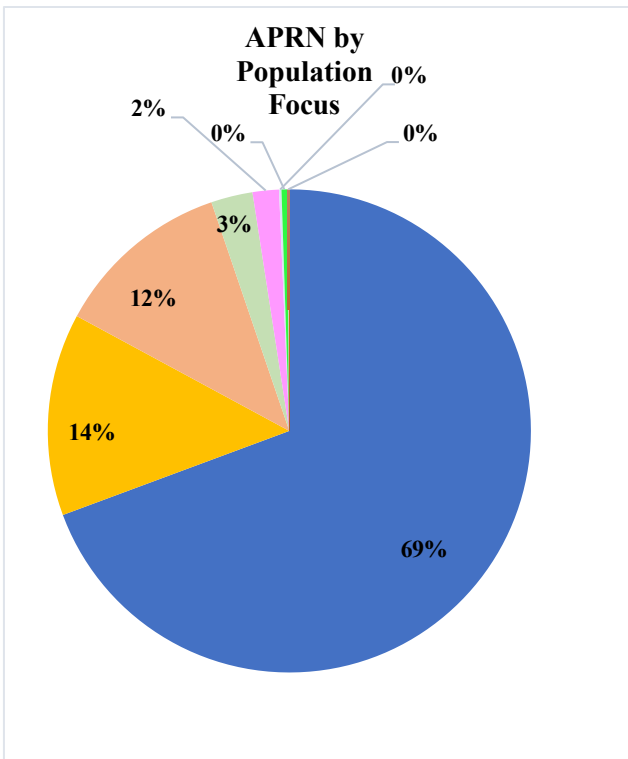
APRNs by County:

APRNs by County			
	FY20/21	FY21/22	FY22/23
Carson	45	49	53
Churchill	9	9	10
Clark	1849	2111	2410
Douglas	40	44	45
Elko	21	25	26
Esmerelda	0	0	0
Eureka	1	1	2
Humboldt	11	10	9
Lander	1	2	2
Lincoln	2	4	2
Lyon	6	11	16
Mineral	0	0	0
Nye	17	19	21
Pershing	1	1	1
Storey	1	1	2
Washoe	505	560	605
White Pine	6	4	4
Out of State	1041	1589	2199



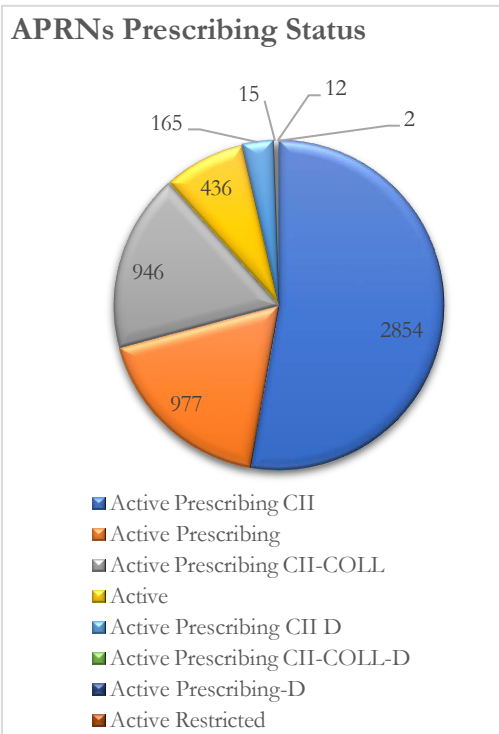


APRNs by Population Focus:



APRNs by Populations of Focus	FY 22/23
Family Nurse Practitioner	3861
Adult-Gerontology Nurse Practitioner	754
Women's Health Care Nurse Practitioner	155
Psychiatric/Mental Health Nurse Practitioner	662
Pediatric Nurse Practitioner	98
Nurse Midwife	9
Neonatal Nurse Practitioner	21
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.

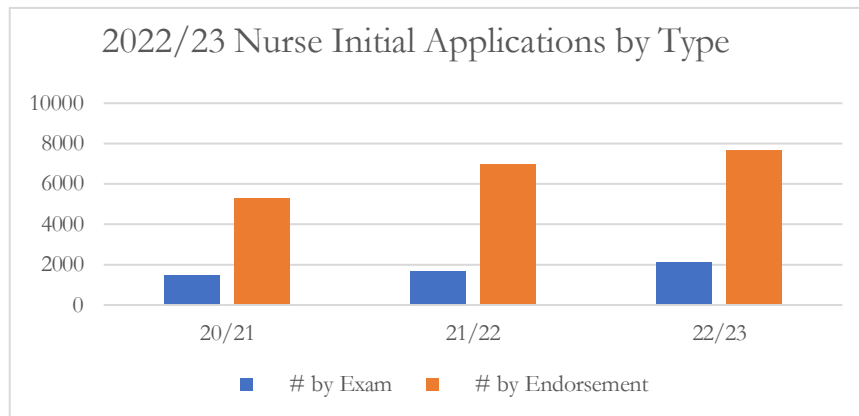
APRNs Prescribing Status	FY 20/21	FY 21/22	FY 22/23
Active Prescribing CII	1999	2408	2854
Active Prescribing	400	590	977
Active Prescribing CII D	756	882	946
Active	274	392	436
Active Restricted	139	147	165
Active Prescribing CII-COLL	13	13	15
Active Prescribing CII-COLL-D	6	5	12
Active Prescribing-D	1	3	2

Applications

- The total active certificates/licenses have increased nearly 20% over the past three years, surpassing 70,000 for the first time in Nevada history.
- The nursing education programs were severely impacted by the pandemic, and though they continue to increase, they have not yet returned to pre-pandemic rates.
- Staff productivity relative to processing applications at all levels remains very effective as evidenced by the number of those licensed/certified, and in the number of dispositions for those processed through investigations.
- Criminal conviction issues continue to account for the highest numbers of both “Yes” answer and fraudulent applications.
- Staff continue to offer and conduct licensure and certification presentations upon request throughout the state to ensure new graduates are well informed of the application and Board processes.

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.

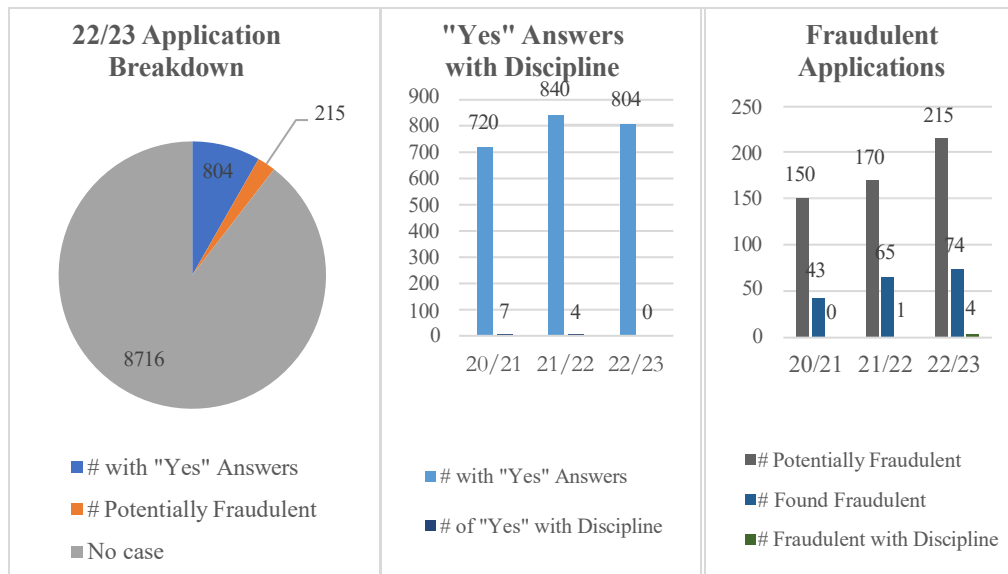
Applications are valid for one year from the date received by the Board. Failure to submit all required documentation within one-year results in a lapsed status. Pending applications remain in process on the last day of the fiscal year.

Total Initial Nurse Applications	20/21	21/22	22/23
Total number of active licenses	50563	56911	61077
# Nurse Initial Applications	6754	8619	9735
# by Exam	1471	1663	2091
# by Endorsement	5283	6956	7644
# with "Yes" Answers	720	840	804
% with "Yes" Answers	10.7%	9.7%	8.3%
# of "Yes" with Discipline	7	4	0
% "Yes" with Discipline	1.0%	0.5%	0.0%
# Potentially Fraudulent	150	170	215
% Potentially Fraudulent	2.2%	2.0%	2.2%
# Found Fraudulent	43	65	74
# Fraudulent with Discipline	0	1	4
	5884	7609	8716

"Yes" Dispositions	20/21	21/22	22/23
Accepted by Board	13	9	9
Probation/Monitoring	9	4	1
Denied by Board	2	0	0
Denied by Staff	0	0	0
Cleared by Staff	667	787	604
Lapsed after one year	33	39	44
Reprimand/Fine/CE	0	0	0
Pending <i>not incl in total disp</i>	63	71	46
Total Dispositions	724	839	704

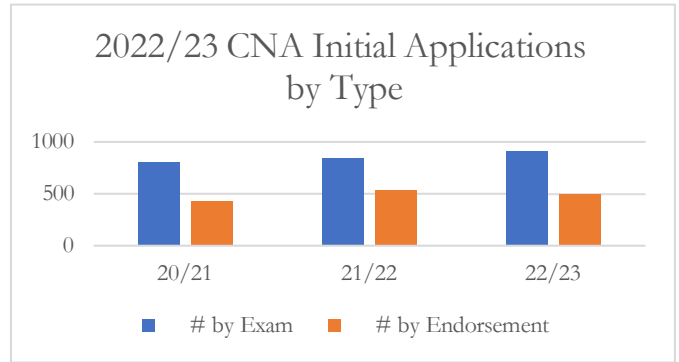
2022/2023 Application Breakdown:

The total number of active licensees continued to grow substantially, surpassing 50,000 and increasing another 17% to surpass 61,000 during this fiscal year. We continue to review approximately 11% of licensure applications for “Yes” answers, or possibly fraudulent answers. No significant trends are noted in this process the past three years.



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.



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	20/21	21/22	22/23
Total number of CNAs	8998	9648	9629
# Initial CNA applications	1229	1374	1405
# by Exam	803	841	914
# by Endorsement	426	533	491
# with "Yes" answers	150	179	214
% with "Yes" answers	12.2%	13.0%	15.2%
# of "Yes" with discipline	0	0	0
% "Yes" with discipline	0.0%	0.0%	0.0%
# potentially fraudulent	72	141	153
% potentially fraudulent	5.9%	10.3%	10.9%
# found fraudulent	36	41	58
# fraudulent with discipline	0	0	1
	1007	1054	1038

"Yes" Dispositions	20/21	21/22	22/23
Accepted by Board	3	3	3
Probation/Monitoring	2	2	3
Denied by Board	0	0	0
Staff denial ratified	0	0	0
Staff denial overturned	127	141	170
Denied by Staff	26	13	9
Cleared by Staff	27	20	29
Lapsed after one year	3	3	3
Pending <i>not incl in total dispositions</i>	2	2	3
Total Dispositions	158	179	214

Nurse and nursing assistant Fraudulent Applications:

Total Initial Applications	20/21	21/22	22/23
Total of initial applications	8050	9993	11140
Total potentially fraud app	222	352	368
% of potentially fraud apps	2.76%	3.52%	3.30%
Total number found fraudulent	88	106	132
% of apps investigated found fraudulent	39.64%	30.11%	35.87%

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	20/21	21/22	22/23
Total renewal applications	28482	27138	29343
Total "Yes" renewal applications	279	282	333
% with "Yes" renewal applications	0.98%	1.04%	1.13%
Total "Yes" with discipline	3	4	3
Total potentially fraud app	56	75	68
% of potentially fraud apps	0.20%	0.28%	0.23%
Total number found fraudulent	29	30	22
% of apps investigated found fraudulent	51.79%	40.00%	32.35%

A trend has been noted in past years regarding renewal applications. More people come due for renewal during even years, than in odd years. Therefore, it is expected that more renewals were submitted than last year, however, it is noteworthy that 268 fewer CNA renewal applications were submitted than in FY20/21.

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.

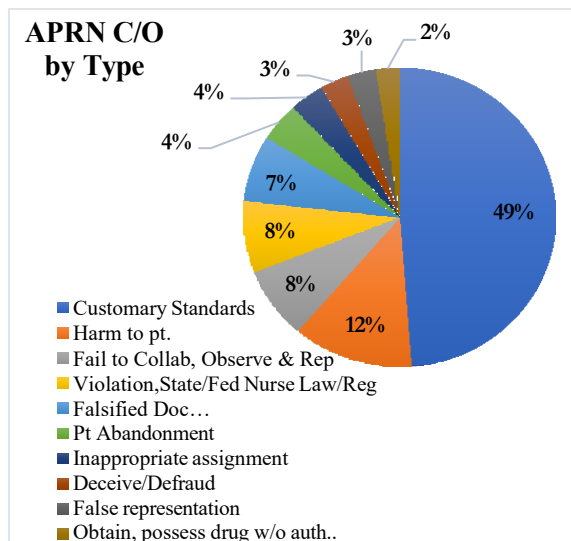
APRN Complaint Investigations & Discipline Statistics:

Total Number of Active Licensees	20/21	21/22	22/23
Total licensed APRNs	3578	4440	5407
Percent change from previous year	26%	24%	22%
Complaints Received/Investigated			
Total complaints received	88	97	153
Total of complaints opened to investigation	59	59	77
Percentage of complaints by total NV APRNs	2.46%	2.18%	2.83%
Discipline Outcome Statistics			
Total number of discipline outcomes	3	3	16
Percent of licensees receiving discipline	0.08%	0.07%	0.30%
Percent of discipline to complaints	3.41%	3.09%	10.46%
Days to Open and Resolve Complaints			
Average number of days to Case Review	38.3	59.5	97.5
Average days for initial review of complaints rec'd	0.93	0.97	1.3

The number of APRN license holders has increased by more than 20% in each of the last three years. Including the 967 new APRNs, 2,577 newly licensed APRNs have joined the workforce in Nevada in the last three years. This is nearly one half of the total of all licensed APRNs in Nevada.

The number of practice related complaints opened to investigation was 77, which was the first notable increase in open investigations since FY2020/21.

Complaints received during this fiscal year increased by more than 50%. Of these complaints, half were opened to investigations. The outcomes of these investigations resulted in an increase in disciplinary actions from 3 to 16 when compared to FY2022/23.



Types of APRN Complaints	
Customary Standards	82
Harm to pt.	21
Fail to Collab, Observe & Rep	13
Violation State/Fed Nurse Law/Reg	13
Falsified Doc...	12
Pt Abandonment	7
Inappropriate assignment	6
Deceive/Defraud	5
False representation	5
Obtain, possess drug w/o auth..	4

The most Notable changes in complaints by type received were:

- A significant increase in complaints, from 1 to 13, were related to violations of state/federal law related to the practice of nursing. Many of these alleged violations were concerning Board of Pharmacy regulations addressing procurement and securing medications in med spa practices.
- A significant increase in complaints, from 0 to 4, were related to inappropriate delegation and supervision of RNs in med spa or outpatient IV hydration practice settings.
- A moderate increase in patient abandonment, and inappropriate termination of patient/practitioner relationship complaints increased from 4 to 7.

Nurse Complaint Investigations & Discipline Statistics:

The total number of RN/LPN licensees increased by 7%, a lower growth rate than that of FY2021/22 of 11%. RN/LPN complaints increased accordingly, and investigations remained constant with the last three years of data. The average days to case review did increase from the previous year. This was due to two circumstances including a transition period for new staff members and, multiple outlier cases of significant complexity from the previous fiscal being completed this year. Despite the increase in days to completion, the review of completed cases every week remained consistent with FY2021/22.

Total Number of Active Licensees	20/21	21/22	22/23
Total licensed nurses (LPN, RN)	50563	56911	61077
Percent change from previous year	5%	11%	7%
Complaints Received/Investigated			
Total complaints received (LPN, RN)	280	362	377
Total of complaints opened to investigation	198	191	190
Percentage of complaints by total NV nurses	0.39%	0.34%	0.31%
Discipline Outcome Statistics			
Total discipline outcomes	63	37	42
Percent of licensees receiving discipline	0.12%	0.07%	0.07%
Percent of discipline to complaints	23%	10%	11%
Days to Open and Resolve Complaints			
Average number of days to Case Review	58.7	85.2	127
Average days for initial review of complaints rec'd	0.93	0.97	1.3

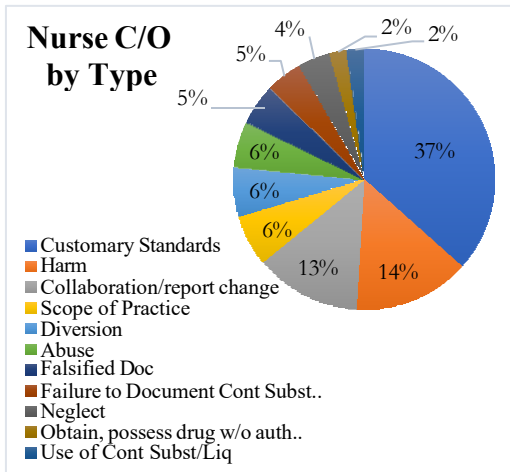
Opening cases addressing immediate public safety were given priority and were completed in far less time than average.

Notable changes in the origin of complaints were:

- Complaints by consumers increased from 21 to 38, and Anonymous complaints increased from 19 to 28.
- Complaints received from other Government Agencies nearly doubled from 6 to 11.
- Self-reported complaints with investigations decreased from 5 to 1.

The most notable changes in complaints, by type, were:

- An increase in complaints and investigations related to patient harm from 37 to 61.
- An increase in complaints and investigations related to abuse from 4 to 24.
- A decrease in complaints and investigations related impairment on duty and positive drug screens from 19 to 10.



Type of Nurse Complaints	
Customary Standards	156
Harm	61
Collaboration/report change	56
Scope of Practice	27
Diversion	26
Abuse	24
Falsified Doc	22
Failure to Document Cont Subst.	19
Neglect	17
Obtain, possess drug w/o auth..	9
Use of Cont Subst/Liq	9

CNA Complaint Investigations & Discipline Statistics:

After a 7% increase in active Certified Nursing Assistants (CNAs) in FY2021/22, the number of active CNAs in Nevada remained essentially at a constant in FY2022/23. Accordingly, the number of complaints received, opened, and number of disciplinary outcomes remained relatively constant with no notable changes.

The number of practice related complaints opened to investigation and resolved was 59, and nearly identical to the FY2021/22 total of 61 and remained constant when compared to the previous two years.

Of the 65 investigations opened in FY2022/23, 59 were completed. The outcomes of these investigations resulted in the following disciplinary actions as compared to the previous year's data. (not shown in this report's tables or graphs):

- Voluntary Surrender/Temporary Voluntary Surrender orders increased from 1 to 3.
- Probation and Monitoring orders increased from 3 to 8.
- Reprimand orders decreased from 8 to 5.

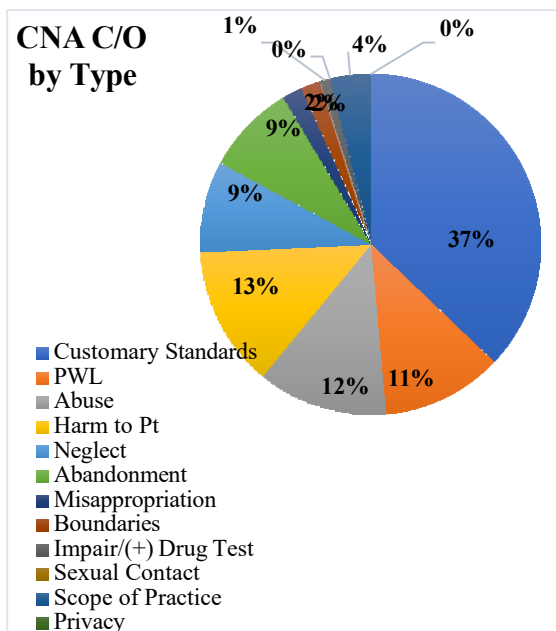
Total Number of Active Certificate Holders	20/21	21/22	22/23
Total certificated CNAs	8998	9648	9629
Percent increase from previous year	-1.01%	7.22%	-0.20%
Complaints Received/Investigated			
Total complaints received	78	69	75
Total of complaints opened to investigation	60	61	59
Percentage of complaints by total NV CNAs	0.87%	0.72%	0.78%
Discipline Outcome Statistics			
Total discipline outcomes	24	12	13
Percent of certificate holders receiving discipline	0.27%	0.12%	0.14%
Percent of discipline to complaints	30.77%	17.39%	17.33%
Days to Open and Resolve Complaints			
Average total days from Opened to Case Review	47.7	75.2	112
Days for initial review of all complaints rec'd	0.93	0.97	1.3

The origin of complaints did not vary notably from FY2021/22. Facility driven complaints remained the most common but decreased slightly from 54% to 48%. Complaints of an anonymous origin decreased from 4 to 2 complaint submissions.

The most notable changes in complaints by type received were:

- An increase in Practice Without a License (active certificate) complaint (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.

Types of CNA Complaints	
Customary Standards	39
PWL	12
Abuse	13
Harm to Pt	14
Neglect	9
Abandonment	9
Misappropriation	2
Boundaries	2
Impair/(+) Drug Test	1
Sexual Contact	0
Scope of Practice	4
Privacy	0

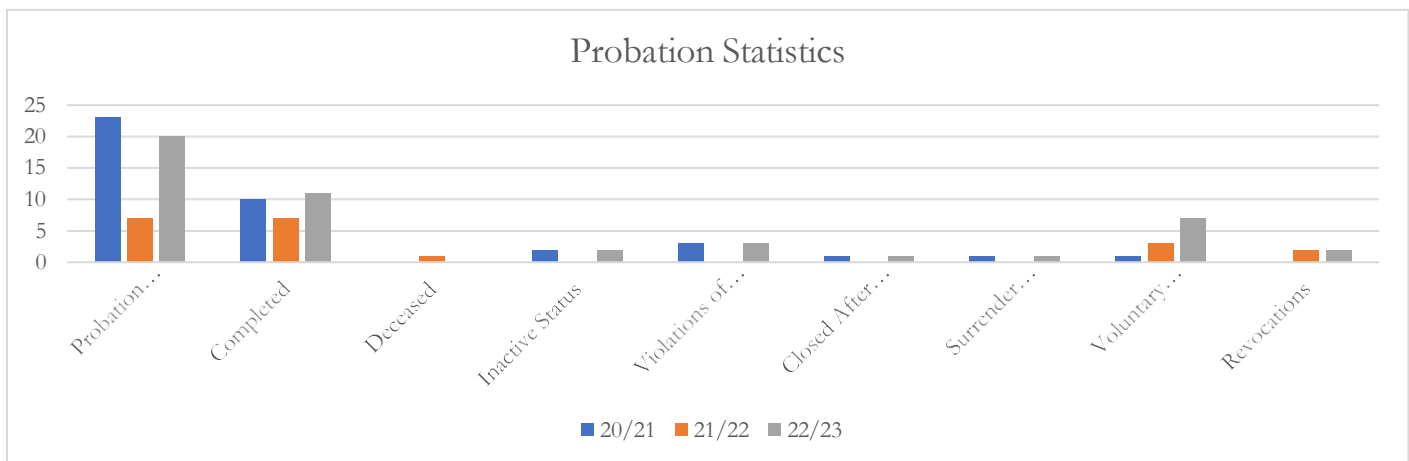


Compliance & Monitoring

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 violation. The ebb and flow of program completion by participants relates 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:



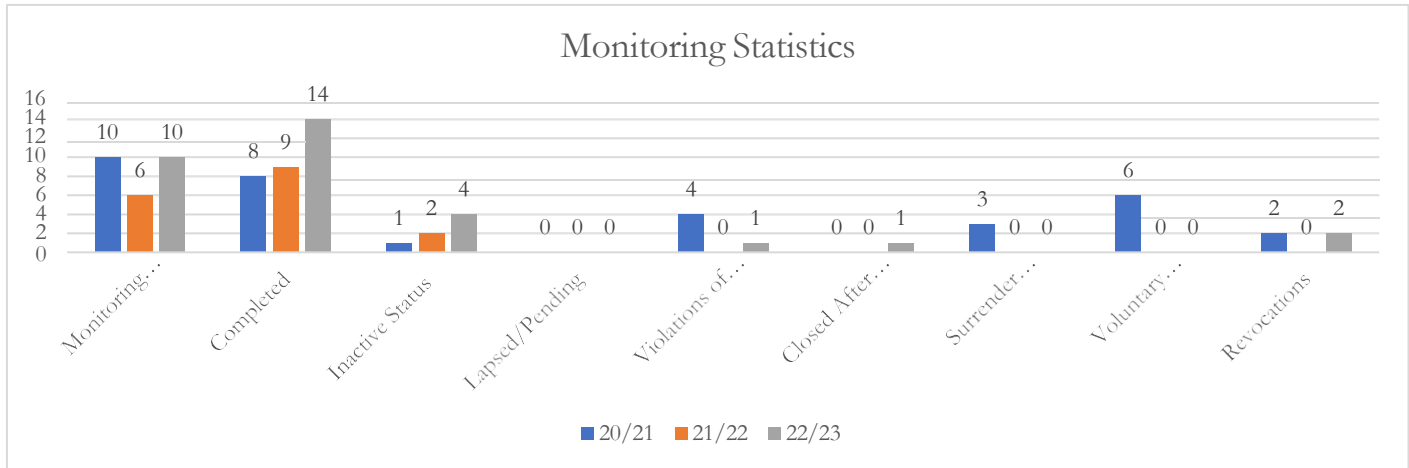
Probation Status	20/21	21/22	22/23
Probation Agreement/Order	23	7	20
Completed	10	7	11
Deceased	0	1	0
Inactive Status	2	0	2
Violations of Board Orders	3	0	3
Closed After Investigation *	1	0	1
Surrender Pending Hearing	1	0	1
Voluntary Surrender	1	3	7
Revocations	0	2	2
Total Participants on Probation **	81	50	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 FY22/23, there is an increase in the number of agreements/orders consistent with an increase in the number of complaints.

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.



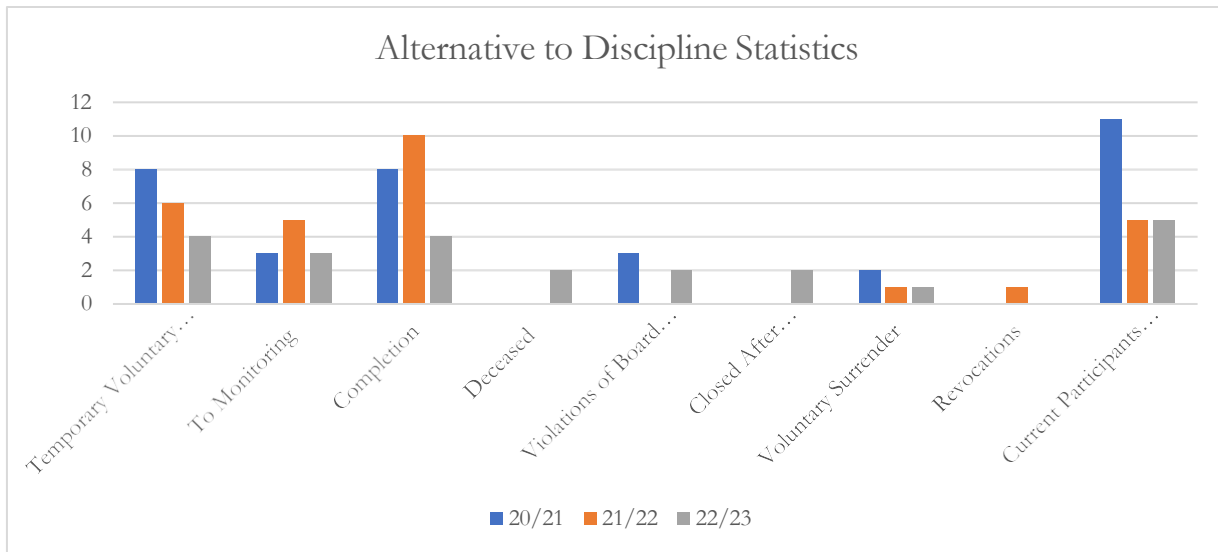
Monitoring Status	20/21	21/22	22/23
Monitoring Agreement/Order	10	6	10
Completed	8	9	14
Inactive Status	1	2	4
Lapsed/Pending	0	0	0
Violations of Board Orders *	4	0	1
Closed After Investigation **	0	0	1
Surrender Pending Hearing	3	0	0
Voluntary Surrender	6	0	0
Revocations	2	0	2
Total Participants on Monitoring	83	47	44

* 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 FY22/23, there is an increase in the number of agreements/orders consistent with an increase in the number of complaints.

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.



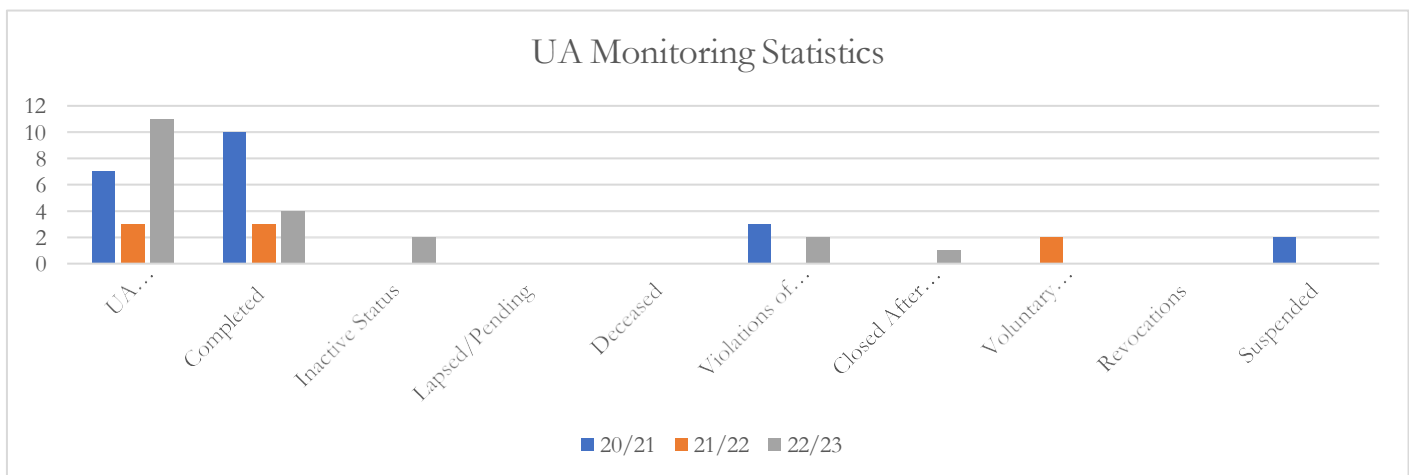
* Violations of the Temporary Voluntary Surrender (TVS) are related to positive drug tests or self-report of relapse

Temporary Voluntary Surrender Status	20/21	21/22	22/23
Temporary Voluntary Surrender	8	6	4
To Monitoring	3	5	3
Completion	8	10	4
Deceased	0	0	2
Violations of Board Orders *	3	0	2
Closed After Investigation	0	0	2
Voluntary Surrender	2	1	1
Revocations	0	1	0
Current Participants in the ATD Program	11	5	5

As of FY22/23, no significant change in the number of ATD participants.

Monitoring Urine Analysis Statistics:

Monitoring UAs require abstinence and drug screens only.



Monitoring UA Status	20/21	21/22	22/23
UA Agreement/Order	7	3	11
Completed	10	3	4
Inactive Status	0	0	2
Lapsed/Pending	0	0	0
Deceased	0	0	0
Violations of Board Orders	3	0	2
Closed After Investigation	0	0	1
Voluntary Surrender	0	2	0
Revocations	0	0	0
Suspended	2	0	0
Total Participants in UA Agreements	23	3	8

As of FY22/23, there is an increase in the number of agreements/orders consistent with an increase in the number of complaints.

Continuing Education Audits

Nurse Continuing Education Audits and Outcomes:

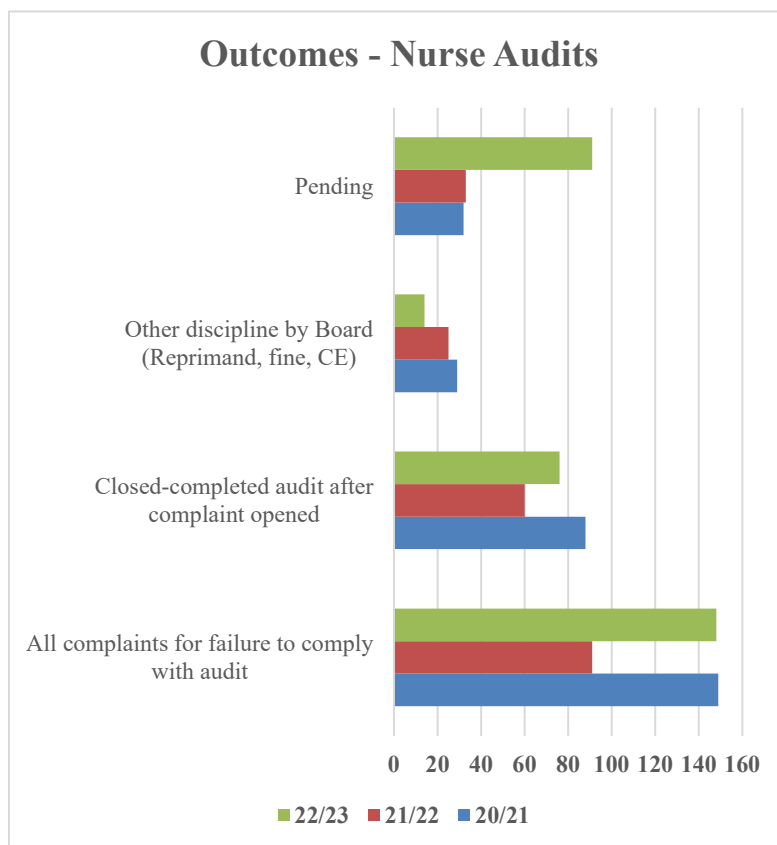
To be eligible for license renewal, RNs and LPNs must complete 30 continuing education (CE) credits within the previous twenty-four months, in addition to completing a one-time board-approved 4 CE bioterrorism course and meeting all other renewal requirements. APRNs must complete 45 CEs directly related 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	20/21	21/22	22/23
Total Audits Completed	2415	2355	2568
Total Successfully Completed Requirements	2266	2264	2420
Total Complaints Opened for Failing to Comply	149	91	148

Outcomes-Complaints Based on Failure to Meet Audit Requirements			
Timeline-Fiscal Year	20/21	21/22	22/23
All complaints for failure to comply with audit	149	91	148
Closed-completed audit after complaint opened	88	60	76
Other discipline by Board (Reprimand, fine, CE)	29	25	14
Pending	32	33	91

Percentage of All Renewal Applicants			
Timeline-Fiscal Year	20/21	21/22	22/23
Nurses Audited	10.1%	10.1%	10.2%
Completed without Investigation	93.8%	96.1%	94.2%

Percentage of Nurse Audit Complaints			
Timeline-Fiscal Year	20/21	21/22	22/23
Leading to investigation	6.2%	3.9%	5.8%
Closed after complaint opened	59.1%	65.9%	51.4%
Other discipline by Board	19.5%	27.5%	9.5%



CNA Continuing Education Audits and Outcomes:

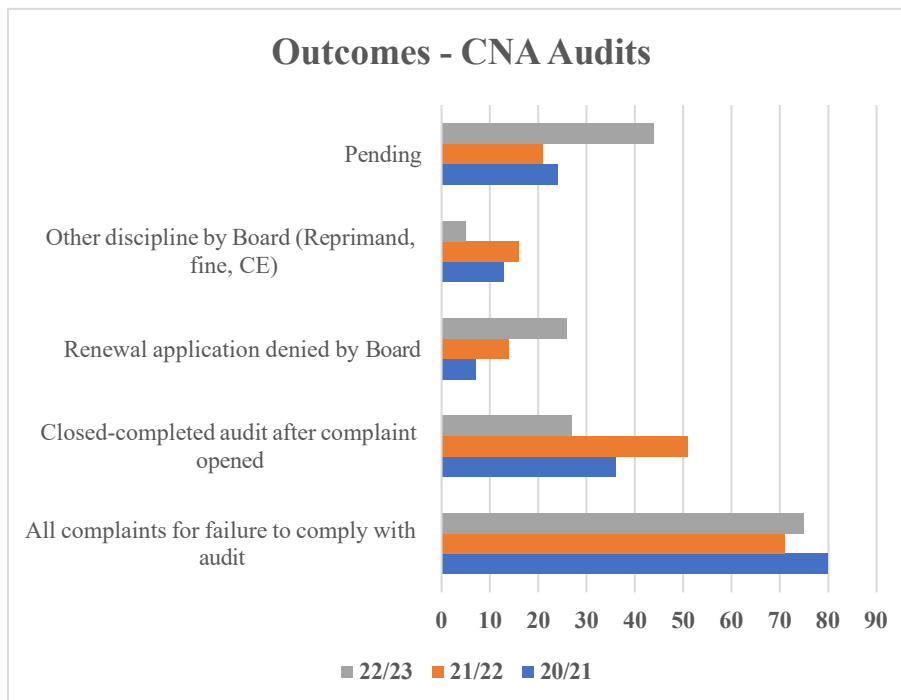
To be eligible for renewal of a certificate, CNAs must complete 24 CE credits or training within the previous twenty-four months and have 40 hours of CNA employment under the direction of a licensed nurse, in addition to meeting other renewal requirements. The Board audits 10% of all CNA renewal applicants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

CNA Audits			
Timeline-Fiscal Year	20/21	21/22	22/23
Total Audits Completed	419	357	386
Total Successfully Completed Requirements	339	286	311
Total Complaints Opened for Failing to Comply	80	71	75

Outcomes-Complaints Based on Failure to Meet Audit Requirements			
Timeline-Fiscal Year	20/21	21/22	22/23
All complaints for failure to comply with audit	80	71	75
Closed-completed audit after complaint opened	36	51	27
Renewal application denied by Board	7	14	26
Other discipline by Board (Reprimand, fine, CE)	13	16	5
Pending	24	21	44

Percentage of All Renewal Applicants			
Timeline-Fiscal Year	20/21	21/22	22/23
CNAs Audited	9.4%	9.3%	9.2%
Completed without Investigation	80.9%	80.1%	80.6%

Percentage of CNA Audit Complaints			
Timeline-Fiscal Year	20/21	21/22	22/23
Leading to investigation	19.1%	19.9%	19.4%
Closed after complaint opened	45.0%	71.8%	36.0%
Other discipline by Board	16.3%	22.5%	6.7%



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