INSIDE THIS ISSUE
Walk-In Policy page 2
Disciplinary Actions page 3
What Happens When A Complaint Is Filed Against You page 4
The Complaint Process page 6
Board Revises Mailing List Policy page 7
Tips To Avoid A License Lapse page 7
The Future of Nursing Is Ours For The Asking page 8

Research Supports Advisory Opinion

A recent research project validated a Nevada State Board of Nursing advisory opinion allowing registered nurses to insert intrauterine pressure catheters to assist with evaluation and management of labor.

A little over a year ago, the Board approved the recommendation of its Nursing Practice Committee to allow RNs to insert intrauterine pressure catheters (IUPCs). It also agreed to call for research into the outcomes of the new policy.

Jack Lau, a master’s candidate at UNLV, answered the call by conducting a research project at the University Medical Center in Las Vegas. He presented his results to the Board at its March meeting.

“After studying the medical records of 26 patients,” Lau said, “I found that UMC registered nurses performed the insertion safely, with no negative outcomes.” (After the Board issued its December 1997 advisory opinion, UMC changed its policy to allow registered nurses to insert intrauterine pressure catheters. The hospital’s previous policy allowed only UMC physicians to perform the procedure.)

Lau also reported that UMC administrators, physicians, nurses and patients supported the new practice, noting that when clinical situations call for IUPC placement, physicians are not always immediately present. He added that even when present, the doctor may prefer the nurse insert the IUPC, so the doctor is free to perform other necessary functions.

Lau concluded by complimenting the Board for requesting research on a topic which had never been studied before and said he hopes future research involving IUPC placements will include nurses.

Board Executive Director Kathy Apple commented, “I think this shows once again that nurses in our state are asking great questions about practice and the Board’s answers are often setting precedent.”

Not Enough Nevada Nurses?

Nevada is losing ground in its efforts to train nurses and other health care workers to help meet the growing demand for medical services. That is the conclusion of the Report on Health Care Education in Nevada, prepared by the University and Community College System of Nevada for the state legislature.

Through 2006, Nevada will have annual openings for 760 registered nurses and 200 licensed practical nurses, according to the report’s author, Dr. John Packham, who gave an overview of his findings to the Nevada State Board of Nursing at its March meeting. “In contrast,” he said, “the system is expected to graduate 353 RNs and 54 LPNs each year.”

According to the report, RN employment growth will be greatest in Clark County, rising by 84 percent, or more than 5,000 jobs.

Factors driving the increase include greater emphasis on primary care, growing demands for long-term and home-health services, and rising medical needs of an aging population.

Packham said Nevada has always employed more nurses than it produces, importing much of its work force from out of the state. He added that a potential national nursing shortage may worsen Nevada’s situation.

The graying of our nursing population exacerbates the problem. Board statistics show the average age of Nevada nurses is 45 and more than half will retire within 10 years.

“There is no easy solution to this complex problem,” Packham concluded. “But Nevada’s universities and colleges will play key roles.”
BOARD MEMBERS
Cookie Bible, BSN, RNC, APN
President (Zephyr Cove)
Kathleen Reynolds, RN, BHS, ABQAURP
Vice President (Reno)
Patricia Shutt, LPN
Secretary (Las Vegas)
Tamara Barengo
Consumer Member (Reno)
Janette Corp, RN
Dorothy Perkins, CNA (Las Vegas)
Tana Wisniewski, RN (Las Vegas)

DIRECTORS OF NURSING
Remember to ask for hard card originals

When verifying whether an RN or LPN holds an active license, please ask to see the hard card original. When verifying if a CNA holds an active certificate, please ask to see the original certificate. The Board has recently seen several cases where copies of hard cards or certificates have been accepted, then later found to be forgeries.

Your License Is Stolen
What do you do?
If your license is lost or stolen, notify the Nevada State Board of Nursing. If you would like a duplicate license, call or visit the Las Vegas or Reno office and ask for a Request for Duplicate form. Then follow these steps—

- Complete the form.
- Sign the form in the presence of a notary public (usually available at your local financial institution and the Board offices).
- Include a check or money order for $30 for an RN or LPN duplicate license, or $5 for a CNA duplicate certificate.
- Mail or deliver the notarized form and payment to either Board office.

Your duplicate license or certificate should be mailed within 10 to 14 days after you submit your request. If you have any questions, please call the Las Vegas office.

Walk-In Policy
Remember, it takes 10 to 14 days to process applications

Just a reminder that the Nevada State Board of Nursing does not have “walk-in processing” of applications or forms. It takes 10 to 14 days to process an application or form—longer if it is not complete or if you do not meet all requirements. The only exception is the validation form, which you may walk in and purchase for $25 if your license or certificate has been confirmed as active and you’re just waiting to receive your hard card in the mail. Please call the Las Vegas office if you have any questions.

Complete Child Support Section
Even if you don’t have a child

Federal law requires you to complete the child support section of the application, even if you don’t have a child. Your application will be returned as incomplete unless you (1) check or answer one of the statements (2) mark only one statement and (3) sign and repeat your social security number in the child support section of the application.

Did You Move?
Remember to let us know

You’re required to inform the Board, in writing, of any change in your address or name. You may send a letter or use the form below. Please include your name, license or certificate type and number, current address, social security number, date of birth, and your signature. If you’ve changed your name, include both your former and new names and legal proof of the name change.

ADDRESS AND/OR NAME CHANGE
This is a change of ☐ address ☐ name
(attach photocopy of legal proof of name change)

- Name (Last, First, Middle)

- Former Name

- Current Address

- City, State, Zip Code

For identification purposes, please provide the following:
- License/certificate type ☐ RN ☐ LPN ☐ CNA ☐ APN ☐ other
- License/certificate number
- Date of birth
- Social Security number
- Year of graduation
- Signature
- Date

Please return this form to: Nevada State Board of Nursing, 4330 South Valley View, #106, Las Vegas, NV 89103

NURSING NEWSLETTER
The Nevada State Board of Nursing Newsletter publishes news and information about Board actions, regulations, and activities.

Kathy Apple, Executive Director
Cindy Kimball, Editor
1755 E. Plumb Lane
Suite 260
Reno, NV 89502
775-688-2620
nsbnreno@govmail.state.nv.us

Las Vegas 486-5800 or Toll-Free 1-888-590-6726
Disciplinary Actions

The following are disciplinary actions taken by the Board for the period of Sept. 21, 1998 through Dec. 10, 1998.

Eastburn, Christine, RN25709
Voluntary Surrender of License in Lieu of Other Disciplinary Action accepted based on NRS 632.320 (1) fraud or deceit in procuring a license (7) unprofessional conduct and NAC 632.890 (27) failing to perform nursing functions in a manner consistent with established or customary standards (38) engaging in unprofessional conduct with a patient or clients outside professional boundaries.

Fagala, Staci, LPN9852
Agreement for Reprimand accepted based on NAC 632.890 (19) inaccurate recording, falsifying or otherwise altering or destroying records.

Gamble, Rose, RN7193
Voluntary Surrender of License in Lieu of Other Disciplinary Action accepted based on NRS 632.320 (7) unprofessional conduct.

Hannigan, Judith, RN21086
Voluntary Surrender of License in Lieu of Other Disciplinary Action accepted based on NRS 632.320 (7) unprofessional conduct.

Higginbotham, Anita, LPN4766
Voluntary Surrender of License in Lieu of Other Disciplinary Action accepted based on NRS 632.320 (14) violation of Board order.

Horvath, Kathleen, RN24169
Agreement for Probation (Disciplinary) for 2 years accepted based on NRS 632.320 (7) unprofessional conduct.

Husbands, Mary, LPN6910
Agreement for Probation (Disciplinary) for 1 year accepted based on NAC 632.890 (19) inaccurate recording and (26) customary standards.

Kosakovski, Chad, LPN10634
Agreement for Reprimand and Fine in the amount of $100 accepted based on NAC 632.890 (35) practicing without a license.

MacCauley, Susan, CNA9866
Voluntary Surrender of Certificate in Lieu of Other Disciplinary Action accepted based on NAC 632.890 (9) impairment and (17) diversion.

MacLean, Miranda, CNA11707
Agreement for Reprimand accepted based on NAC 632.890 (21) patient abandonment and NRS 632.320 (7) unprofessional conduct.

Mayberry, Mark, RN26244
Agreement for Reprimand accepted based on NRS 632.320 (1) fraudulent application.

Minnig, Susan, LPN4278
Agreement for Reprimand accepted based on NRS 632.320 (7) unprofessional conduct and NAC 632.890 (19) inaccurate recording, falsifying or otherwise altering or destroying records.

Moore, Helen, RN19679
Agreement for Reprimand accepted based on NRS 632.320 (7) unprofessional conduct and NAC 632.890 (27) causing a patient physical, mental or emotional harm by taking direct or indirect actions or failing to take appropriate actions.

N'Dolo, Phoebe, CNA Applicant
Accepted with Agreement for Reprimand and classes accepted based on NAC 632.890 (27) causing a patient physical harm by taking direct or indirect actions or failing to take appropriate actions.

Dick, Anissa, CNA9899
Voluntary Surrender of Certificate in Lieu of Other Disciplinary Action accepted based on NRS 632.320 (1) fraudulent application and (2) convictions.

Draper, Holly, CNA9056
Voluntary Surrender of Certificate in Lieu of Other Disciplinary Action accepted based on NAC 632.890 (10) positive drug screen at work.

Duenke, Jeff, CNA9890
Agreement for Reprimand and Fine in the amount of $100 accepted based on NAC 632.890 (35) practicing without a certificate.

Quartz, Rose, CNA4325
Agreement for Reprimand accepted based on NRS 632.320 (1) fraud in procuring a certificate.

Robinson, Gerald, CNA3811, Renewal Applicant
Application denied based on NRS 632.320 (11) fraudulent application.

Scott, Joan, LPN9845
Agreement for Probation (Disciplinary) for 2 years accepted based on NRS 632.320 (7) unprofessional conduct.

Sites, Sandra, RN31970
Agreement for Reprimand and Fine in the amount of $500 accepted based on NAC 632.890 (35) practicing without a license.

Sleeman, Teresa, CNA6086
Agreement for Reprimand accepted based on NAC 632.890 (22) exploiting a patient and (38) professional boundaries.

Smalling, Mayani, CNA11332
Agreement for Reprimand accepted based on NRS 632.320 (7) unprofessional conduct.

Susman, Diana, RN10665
Voluntary Surrender of License in Lieu of Other Disciplinary Action accepted based on NAC 632.890 (10) positive drug screen for alcohol.

Taylor, Cora, LPN8071
Order of revocation based on NRS 632.320 (1) fraudulent application and NRS 632.320 (2) convictions.

Zeissner, Marilyn, RN13426
Agreement for Probation (Disciplinary) for 3 years accepted based on violation of NAC 632.890 (2) performing acts beyond the scope of the practice of nursing, (6) Assigning or delegating functions, tasks or responsibilities of licensed or certified persons to unqualified persons, (26) failing to abide by any state or federal statute or regulation relating to the practice of nursing.

Questions? Call Debra Scott, Associate Executive Director for Nursing Practice, in Reno.

BOARD MEETINGS
May 13-14, 1999 Reno
July 14-16, 1999 (retreat) Minden/Gardnerville
September 16-17, 1999 Las Vegas
November 18-19, 1999 Reno

COMMITTEE MEETINGS
Advanced Practice Advisory Committee
April 26, 1999

CNA Advisory Committee
April 21, 1999
July 28, 1999
October 27, 1999

Disability Advisory Committee
April 22, 1999

Nursing Competency Advisory Committee
April 14, 1999
July 7, 1999
October 20, 1999

Nursing Practice Advisory Committee
May 19, 1999
What Happens If a Complaint is Filed Against You?
by Robert Buck, BSN, RN, Investigator

What is a complaint?
A complaint contains a detailed description of alleged behavior that violates the Nurse Practice Act. It must include the name of the nurse or nursing assistant, and it must be submitted in writing and signed by the person making the complaint.

Who can make a complaint?
Anyone who has information that a person may have violated the Nurse Practice Act may make a complaint. This includes consumers, other regulatory agencies, and other nurses or professionals. Some nurses report themselves and seek assistance in handling a problem in a way that best protects the public. The law provides, in the absence of bad faith, any person who reports such information or who testifies before the Board in a hearing shall not be liable for civil damages.

What are common types of violations?
- Unprofessional conduct
- Negligence or abuse
- Fraudulent applications
- Problems with drugs, alcohol, or mental conditions which result in impaired practice
- Incompetence
- Criminal convictions related to the qualifications, functions and duties of a nurse

What happens when the Board receives a complaint?
The complaint is reviewed to ensure it is signed by the person making the complaint, names a nurse or nursing assistant who is licensed or certified in the state of Nevada, and alleges a violation of the Nurse Practice Act. If it is, Board staff then determine if the information alone or together with evidence, documentary or otherwise, is sufficient to require an investigation. This means that the information submitted, at face value, would be a potential violation of the Nurse Practice Act.

If the complaint meets the criteria, or the Board has directed an investigation, the matter is then assigned to one of three investigators, each handle about 100 active cases at a time.

Who investigates you?
The Board’s investigators are registered nurses who receive extensive training in investigative procedure and analysis. Their nursing experience and expertise covers a wide variety of nursing specialties.

How do you find out a complaint has been filed against you?
You’ll receive a notification by certified letter, containing the allegations submitted against you. It will also contain the name and telephone number of the investigator assigned to your case. It is the first step in the investigation process.

What happens during an investigation?
An investigation involves gathering and reviewing a variety of documents which may have to be subpoenaed. For example, an investigator may subpoena personnel files and patient records. Interviewing witnesses is also an important component. The fact an investigation is taking place is not public information—if questions are asked by the news media or others, the Board cannot confirm or deny that any investigation is in process.

What happens after all the evidence has been gathered?
After gathering and analyzing the data, the investigator presents the evidence for review and a decision is made to pursue the complaint or close the investigation. When an investigation is closed, the investigative file is confidential and is not available to the public.

What you should know about the investigator’s position as it relates to you and the complaint.
The investigator is an independent fact-gatherer whose position is to obtain as much information regarding the complaint allegations as possible. It is not the position of the investigator to prove you guilty or innocent, but rather to collect information and evidence regarding the allegations. Frequently, a respondent...
The agreement is placed on the Board’s agenda for the next available Board meeting and is not executed until accepted by the Board. Upon execution of the disciplinary action, it is published on the list of disciplinary actions taken by the Board, and reported to the NCSBN. You must complete all requirements of the agreement within the scheduled time frame or be subject to further disciplinary action by the Board.

You can enter into an informal non-disciplinary agreement.

If the evidence is supportive of a violation of the Nurse Practice Act, but does not rise to the level requiring formal discipline, you may be offered an Informal Non-Disciplinary Agreement. This agreement will have certain requirements for you to complete. You must sign and return the agreement to the Board. If you successfully complete the terms of the non-disciplinary agreement within the required time frame, the case will be closed and no action will be reported to the National Council of State Boards of Nursing (NCSBN).

You can enter into an informal settlement agreement.

If the evidence is supportive of a violation of the Nurse Practice Act, you may be offered an Informal Settlement Agreement. There are different types of informal settlement agreements, from an Agreement for Reprimand to a Voluntary Surrender. The type of agreement offered is dependent on the nature of the violation and your pattern of behavior. An Informal Settlement Agreement includes an admission a violation has occurred, and is an agreement between you and the Board for disciplinary action. The agreement is placed on the Board’s agenda for the next available Board meeting and is not executed until accepted by the Board. Upon

Who is required to report violations?

Those required to report violations of the Nurse Practice Act include individuals providing medical services who are licensed or certified to practice in Nevada, law enforcement personnel, social workers, and medical administrators.

For a comprehensive listing, refer to the Nurse Practice Act, NRS 632.472.

What if I’m not sure if it really is a violation?

First, read the Nurse Practice Act. If you’re still unsure, call the Board’s Reno office and talk with one of the investigators.

How do I make a complaint?

Obtain a complaint form by calling the Reno or Las Vegas Board office or visiting our web site. Complete it, sign it and return it to either office. You may also submit a signed, written description of the sequence of events (who, what, where, when, why, how). The complaint should also include any documentation which supports the allegation, for example, a witness statement or patient record.
What are common types of disciplinary actions?
When considering what kind of disciplinary action it should take, the Board always asks itself, “What is needed to make this person safe to practice?” The answer depends on the nature of the violation and can range from reprimanding an individual and ordering the person to attend a legal ethics class to revoking the person’s license or certificate. Outlined in the Nurse Practice Act, NRS 632.325 and 632.207, discipline actions available to the Board include:
- Citation and/or Fine
- Reprimand
- Probation
- Suspension
- Revocation

Whom can I call if I have questions about the complaint or disciplinary process?
The Board encourages you to call any time you have a question about the discipline process or what constitutes a violation of the Nurse Practice Act. Just call the Reno office and ask for one of the nurse investigators or the associate executive director for nursing practice.

The Complaint Process

Someone makes a complaint alleging you violated the Nurse Practice Act.

The allegations are reviewed by Board staff to determine if the information is sufficient to require an investigation.

A complaint is opened and assigned to a nurse investigator.

A complaint is not opened because the information submitted, at face value, does not identify a violation of the Nurse Practice Act.

You receive notification by certified letter, containing the allegations submitted against you.

A nurse investigator gathers and reviews documents (including any information you provide), interviews witnesses, and presents the evidence for review.

The complaint is closed. The evidence obtained is not sufficient to support a violation of the Nurse Practice Act. You are notified by letter.

You enter into an informal non-disciplinary agreement.

You enter into an informal settlement agreement.

You have a formal hearing before the Board.

If you successfully complete the terms of the non-disciplinary agreement, the Board will close your case.

Depending on the nature of the violation, you may agree to receive disciplinary action ranging from a reprimand to a voluntary surrender of your license or certificate.

The Board takes disciplinary action against you, ranging from a reprimand to revocation of your license or certificate.

The disciplinary action is published on the list of disciplinary actions taken by the Board and reported to the National Council of State Boards of Nursing.
If a complaint is filed against you, what are your rights?

- You have the right to submit a response to the complaint and/or discuss it with the investigator.
- You have the right to consult with an attorney at any time during the course of an investigation. However, it is not mandatory that you have an attorney represent you before the Board.
- You have the right to obtain a copy of the complaint (by written request and a 60-cents-per-page copying fee).
- You have the right to a formal hearing before the Board regarding the allegations against you.
- Upon receipt of a Formal Complaint and Notice of Hearing, you have the right to all evidence which may be presented against you at the hearing (copying fee applies), and the right to be informed of laws and regulations involved.
- At the formal administrative hearing, you have the right to present evidence and witnesses on your behalf, and to cross-examine witnesses presented by the Board.
- You have the right to appeal.

It is the policy of the Nevada State Board of Nursing to sell its mailing list to organizations which demonstrate a clear connection to health care or the practice of nursing. Such organizations include continuing education providers, nurse recruiters, nurse researchers, uniform manufacturers, and professional nursing organizations.

The Board may deny a request for its mailing list for good cause based on the protection of public health, safety and welfare. The list contains the names and addresses of every active licensed nurse and certified nursing assistant in Nevada.

In response to a request by the Nevada Assembly Commerce and Labor Committee, the Board voted at its March meeting to revise its public information policy to allow nurses and nursing assistants to request their names be removed from the mailing list.

If you wish to have your name removed, all you have to do is send your written request to the Nevada State Board of Nursing in Las Vegas.

If you have any questions about the Board’s mailing list, please call the Las Vegas office.

It takes 10 to 14 days to process your application (if it is complete and you meet all the requirements).

Remember that your license is your livelihood. Please don’t put it at risk.

Please call the Las Vegas office if you have any questions regarding the renewal process.
In the October 11, 1998, Ann Landers column, Disillusioned Nurses Air Gripes, 10 nurses shared their views about hospital-based nursing. The impetus for this column was a previous letter written by a nurse who aired her frustrations. Landers responded by asking her nurse readers to share their views.

Unfortunately, no positive letters were sent in and the response she did get “clogged” her mailroom. The printed letters contained such words as “exhausted,” “stress,” “burnout,” “overworked,” and “depressing.” Landers concluded, “Unless something is done to help our nurses, there won’t be any, and we will be up that well-known creek without a paddle.”

Yes, nursing has its challenges. However, did you ever hear the old adage, “If you are not part of the solution, you are part of the problem?” Nurses cannot wait for that “something,” that solution, sitting idle.

How can nurses create effective solutions? Well, instead of focusing on the negative and being stuck in the proverbial “rut,” one strategy is to create a positive paradigm of a given situation. By doing so, creative energy is cultivated to meet challenges head on.

For example, what if hospital-based nurses approached their work with an awareness that people are admitted to hospitals when they need continuous NURSING care. Think about it. Other than nursing, all other hospital services (including medical care) could be provided to individuals as outpatients. Imagine the power, the creative energy and the collective voice this particular group of nurses would have in meeting the challenges presented by today’s complex health care system.

In order to successfully meet challenges, nurses also need to be well prepared. This is why participation in professional organizations like Sigma Theta Tau is so powerful to a nurse’s growth and development.

Yes, nurses can create the very best solutions for the challenges ahead. With commitment, vision, planning and preparation, the future of nursing is ours for the asking.