



STATE PLANNING SESSION ON PRESCRIPTION DRUG ABUSE

In 2016, the Nevada State Board of Nursing completed 93 years of service to the residents of Nevada. Established by the state legislature in 1923, it was modeled on legislation enacted by other countries and a few other states. The intent was to separate untrained “nurses” from those who had undergone formal training. The Nevada State Board of Nursing focuses on its mission to protect the public’s health, safety and welfare through effective nursing regulation and purpose to protect the public from unsafe practice by nurses. The Nevada State Board of Nursing is a seven-member Board appointed by the Governor consisting of four registered nurses, one practical nurse, one certified nursing assistant, and one consumer member.

Complaint resolution process

The Nevada State Board of Nursing’s (Nursing Board) complaint resolution process begins with the receipt of a complaint. All complaints are initially evaluated by the Director of Nursing Practice. This position requires a Bachelor’s Degree in Nursing and an active Registered Nurse license.

The Complaint is evaluated as follows: If the allegations of the complaint, taken as true, constitute a violation of the Nevada Nurse Practice Act (NRS and NAC chapters 632), then the complaint is assigned to an investigator. There are three investigators at the Nursing Board. All investigators are Registered Nurses. The Nursing Board employs two attorneys. Both attorneys are available to the nurse investigators during the investigation process.

When the investigator has completed her investigation the case is brought forward to Case Review for evaluation. Case Review is a discussion of the facts and law relating to the case. All three investigators, the Director of Nursing Practice and the attorneys participate in Case Review. After consideration, the case can be designated to go to a full

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hearing, closed, designated for further investigation, or settlement can be offered to resolve the case. To insure objectivity and consistency, the case review process includes an independent scoring system that takes into consideration the conduct, risk of harm, level of responsibility, and aggravating and mitigating factors.

If the case is not resolved after Case Review, either through closure or settlement, then the matter is presented to Administrative Case Review. The Administrative Case Review process involves seven nurses, Executive Director, Director of Nursing Practice, and the two attorneys. Again, the evidence is reviewed and a decision is made to close the case, attempt to settle the case, or set the case for hearing.

The last information provided in the Board's annual report reveals that complaints are resolved in an average of 120 days.

Statistics regarding resolution of complaints involving controlled substances

For the current fiscal year 2015/2016 through May 2016, the Nursing Board has resolved 1,032 complaints which were investigated. Of those complaints, 19 involved diversion of medications, 22 involved impairment/chemical dependency, 6 involved narcotic discrepancies, and 18 involved a positive urine drug screen. The total number of nurses disciplined involving controlled substances (65) constituted 6.2% of the complaints and .14% of the total nursing population (45,532) in Nevada.

In fiscal year 2014/2015, the Nursing Board resolved 1,112 complaints which were investigated. Of those complaints, 16 involved diversion of medications, 38 involved impairment/chemical dependency, 9 involved narcotic discrepancies, and 12 involved positive urine drug screen. The total number of licensees disciplined involving controlled substances (75) constituted 13% of the complaints and .17% of the total nursing population (43,542) in Nevada.

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In fiscal year 2013/2014, the Nursing Board resolved 1,174 complaints which were investigated. Of those complaints 23 involved diversion of medications, 27 involved impairment/chemical dependency, 13 involved narcotic discrepancies, and 11 involved a positive urine drug screen. The total number of licensees disciplined involving controlled substances (74) constituted 6.3% of the complaints and .17% of the total nursing population (41,622) in Nevada.

In fiscal year 2012/2013, the Nursing Board resolved 1,071 complaints which were investigated. Of those complaints 28 involved diversion of medications, 16 involved impairment/chemical dependency, 17 involved narcotic discrepancies, and 9 involved a positive urine drug screen. The total number of licensees disciplined involving controlled substances (70) constituted 6.5% of the complaints and .18% of the total nursing population (38,922) in Nevada.

Procedure for resolution of PMP reports received from the Board of Pharmacy

Upon receipt of a PMP letter from the Board of Pharmacy, a letter is immediately sent to the Advanced Practice Registered Nurse (APRN) who allegedly prescribed the controlled substance to the patient. The Nursing Board's letter requests the APRN to send a return letter describing the circumstances of the prescription. If the APRN writes a letter in return that explains the prescription was justified, then the Nursing Board closes that matter. If there is any reason to follow up on the prescribing habits of the APRN or the conduct of the patient, or any other reason, the Nursing Board will follow up with the APRN. The Board of Nursing will also contact the Board of Pharmacy for further investigation. Although, the Nursing Board retains jurisdiction over the case because the APRN is licensed by the Nursing Board, we make every attempt to cooperate with the Pharmacy Board to determine what further action is required, if any. This would occur if the letter from our APRN alleges that it was a fraudulent prescription or identifies a possible problem patient.

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Statistics regarding resolution of PMP reports received from the Board of Pharmacy as of May 2016.

The Nursing Board received letters from Pharmacy Board identifying 27 patients flagged as a result of the PMP. The Nursing Board reviews the letters and the PMP in order to identify any prescribing APRNs. Letters are sent to each such prescribing APRN. As of May 30, 2016, 43 inquiry letters have been sent to APRNs. As a result, the Board received 39 responses from the APRN. Some responses were not due back to the Board until June. The responses have generally given the Board enough information to justify the writing of the prescription in question. Only one response has created concern such that further communication with the Pharmacy Board has occurred.

Process for establishing continuing education criteria for licensees

The continuing education requirements for nurses is governed by NRS 632.343. A nurse must complete 30 hours of continuing education within the two years prior to the renewal of the license. Other than a one-time requirement to complete a four hour course in bioterrorism, the licensee may take any combination of Board approved courses. Pursuant to NAC 632.340, Board approved courses of continuing education include those courses offered by a Board approved provider, a national nursing organization, an academic institution, a provider recognized by another board of nursing or a provider recognized by the regulatory body of a related discipline that approves courses of continuing education. Each provider must employ a coordinator who is a licensed registered nurse in the State of Nevada.