## IDAHO BOARD OF NURSING POSITION REGARDING LICENSURE AND DISCIPLINE

In fulfilling its mission to safeguard the public health, safety and welfare, the Board is committed to licensure and discipline activities that are prompt, fair and appropriate to public protection. The Board evaluates information received as a part of the application process, considers complaints and other allegations of misconduct and responds appropriately, carefully crafting its decisions in disciplinary and licensure matters. In discipline and licensure matters, the Board acts as a committee of the whole, assisted by professional staff and legal counsel.

Applications for licensure may be denied if there is evidence that the applicant would not practice safely and effectively. Applications reflecting a history of criminal conviction are reviewed on a case-by-case basis. Among other factors, the Board considers the nature of each criminal conviction; context of the criminal act, time elapsed since the most recent conviction, continued concerns of competency to safely practice, and efforts at rehabilitation. Minor crimes may be disregarded while more serious offenses, those indicative of conduct potentially harmful to vulnerable patients or the public, may require a different approach.

The Board reacts promptly to written complaints and allegations of violations of the Nursing Practice Act and the Rules of the Board. All allegations are evaluated with respect to the merits of the individual case and the actual or potential harm to the public. Complaints are addressed on a priority basis, dealing first and most aggressively with those presenting the greatest risk to the public safety.

Investigating every minor incident does not necessarily ensure protection of the public. The Board recognizes that existing mechanisms within the employment setting may appropriately address many deficits in practice or behavior without direct Board involvement.

The Board's responses to substantiated violations of the Nursing Practice Act and the Rules of the Board fall within a continuum of disciplinary action that ranges from informal to formal, from moderate to extreme. Remedial measures or informal corrective actions are considered when appropriate and where protection of the public is not compromised. The Board considers suspension or revocation when there is evidence that there is real or potential risk to the public or when remediation, informal monitoring and/or practice limitation would serve no purpose or might compromise public protection.

Nurses who acknowledge that their practice is or may be impaired as a result of chemical dependence or mental illness and who are actively engaged in recognized recovery methods may be allowed to continue to practice nursing within carefully defined parameters.

Adopted – Board of Nursing 11/11/04

# GUIDELINES FOR REPORTING PRACTICE VIOLATIONS TO THE BOARD OF NURSING

Board of Nursing Rule, Grounds for Discipline, IDAPA 23.01.01.100.05., specifies that nurses who are grossly negligent or reckless in performing nursing functions or who otherwise violate the Nursing Practice Act or Board of Nursing Rules shall be reported to the Board of Nursing.

Many minor incidents are reported with insufficient evidence to warrant disciplinary action but which take up time and valuable Board resources. The Board believes that protection of the public is not enhanced by investigating every reported minor incident. Therefore, the following guidelines are adopted to clarify what constitutes minor incidents that need not be reported to the Board when there are mechanisms in place in the employment setting to take corrective action and remediate deficits in practice.

"Minor incident" means conduct that does not indicate the nurse's continuing to practice poses a risk of injury or harm to the patient or to another person. Minor incidents need not be reported to the Board of Nursing if <u>all</u> of the following factors are present:

- 1. potential risk of physical, emotional or financial harm or injury to the patient due to the incident is very low; **and**
- 2. the incident is a one-time minor event with no pattern of poor practice; and
- 3. the nurse exhibits a conscientious approach to and accountability for his/her practice by following policies/procedures relative to the incident (i.e. notifying supervisor, calling physician, completing an incident report); **and**
- 4. the nurse appears to have the knowledge and skills to practice safely.

  The presence of contributing or mitigating circumstances may be taken into consideration.

#### The Board recommends that:

- 1. An incident/variance report be completed for all minor incidents-to include a complete description of the incident, patient record number and witnesses; and
- 2. the nurse manager maintain the records of minor incidents and document the action taken to correct or remediate the problem; and
- 3. Three minor incidents in one year be evaluated by a peer review or administrative committee to determine if a report to the Board of Nursing is warranted.

Nothing in these Guidelines is intended to prevent or discourage direct reporting to the Board of Nursing.

Adopted: August 11, 1994 minor.doc R9/02

### **IDAHO BOARD OF NURSING**

280 North 8th Street Suite 210

Mailing - PO Box 83720 Boise, Idaho 83720-0061 Voice: (208) 334-3110 ext. 25 Fax: (208) 334-3262 TDD Relay -1-800-377-3529

## REPORT FORM FOR VIOLATION OF THE NURSING PRACTICE ACT

| I.   | Name of ComplainantAddressCity/State  |  |  |
|------|---|--|--|
|      |   |  |  |
|      | City/StateBusiness  |  |  |
| II.  | Identifying information about whom the complaint is being made: (Please check appropriate box)  |  |  |
|      | □       Professional Nurse (RN)       □       Advanced Practice Professional Nurse:         □       Licensed Practical Nurse       □       NP/CNM/CNS/CRNA         □       Nursing Assistant       □       Other                                |  |  |
|      | NameAddress   |  |  |
|      | Employer: Name Address City/State   |  |  |
| III. | Nature of Complaint: (Confine statements to actual incidents, giving dates, places and names of persons involved.) Explain what happened, where it happened, and the date and time it happened. Attach copies of relevant records, if possible. |  |  |
|      |   |  |  |
|      |   |  |  |
|      |   |  |  |
|      |   |  |  |

| D<br>ac | oid any other person(s) witness this incident? If so, please give name(s), ddress(es), position(s) held, and telephone number(s), if known. |
|---------|---|
|         |   |
|         |   |
| _       |   |
| _       |   |
|         |   |
|         |   |
| Α       | dditional Comments:   |
| 11      | dational Comments.  |
| _       |   |
|         |   |
|         |   |
| _       |   |
|         |   |
|         |   |
|         |   |
| _       |   |
|         |   |
|         |   |
| _       |   |
|         |   |
|         |   |

The identity of the complainant will remain confidential until such time as the Board of Nursing commences a "contested case" proceeding under the Idaho Administrative Procedures Act against the licensee or other person regulated by the Board.

The Idaho Board of Nursing is an equal opportunity employer and does not discriminate or deny services on the basis of age, race, religion, color, national origin, sex and/or disability.