



Agenda Item 4.0

Report of the Enforcement/Investigation/Intervention Committee (EIIIC)

BRN Board Meeting | May 28-30, 2025

Report of the Enforcement/Investigations/Intervention Committee May 28-30, 2025

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Agenda Item 4.1

Information Only: Presentation by the Executive Officer Regarding Reviews in Which the Requirements of Direct Patient Care and Work Passing Narcotics Were Removed or Imposed by the Intervention Evaluation Committee, and Review of Program Extension Beyond Three Years; Presentation of Intervention Program Statistical Data

BRN Board Meeting | May 28-30, 2025

BOARD OF REGISTERED NURSING
Agenda Item Summary

AGENDA ITEM: 4.1
DATE: May 29, 2025

ACTION REQUESTED: **Information only:** Presentation by the Executive Officer (EO) regarding cases affected by the motion during the August 2024 Board meeting

REQUESTED BY: Patricia Wynne, Esq., Chairperson

BACKGROUND:

During the Board meeting on Thursday August 22, 2024, the Board made a motion that directed Board executive management to provide an update to the EIC regarding Intervention Program participants who had these requirements removed or imposed pursuant to the Board's motion:

1. Suspend the imposition of the requirement that participants work in direct patient care, unless there is additional evidence of patient safety issues.
2. Suspend the imposition of the requirement that participants work passing narcotics, unless there is additional evidence of patient safety issues.
3. If an Intervention Evaluation Committee (IEC) recommendation extends length in the program beyond three years, the Executive Officer must review and examine the evidence.

The Board further directed that, in any cases in which the direct patient care and/or narcotics requirements were the only requirements preventing a participant from successfully completing the program, and where those requirements were removed pursuant to this motion, that board executive management should work with the Intervention Program Manager to have such cases presented to an IEC as soon as practicable for consideration of program completion.

As it relates to the August 21-22, 2024, Board motion above where the IEC is directed to consider program completion, [Uniform Standard](#) Number 12 identifies criteria to petition for a full and unrestricted license:

1. Demonstrated sustained compliance with the terms of the disciplinary order, if applicable. (This is not applicable to our Intervention Program Participants.)
2. Demonstrated successful completion of recovery program, if required. (This is applicable to our Intervention Program Participants)
3. Demonstrated a consistent and sustained participation in activities that promote and support their recovery including, but not limited to, ongoing support meetings, therapy, counseling, relapse prevention plan, and community activities.
4. Demonstrated that he or she is able to practice safely.
5. Continuous sobriety for three (3) to five (5) years.

August 2024 - Board Motion Data

The below reflects data related to the approved Board motion from August 22, 2024, through April 30, 2025. December 12-13, 2024, was the last IEC meeting held in 2024 with the former recovery vendor, Maximus. Premier Health Group became the new recovery vendor as of January 1, 2025.

Successful Completion(s)	Totals
Petitioned for successful completion	100
Granted successful completion	75
Reviews sent to the Executive Officer (EO)	45
EO approved IEC recommendation(s)	16
EO referred to a re-reviewing IEC	29
Intervention Program New Applicant(s)	Totals
Petitioned for acceptance	40
Granted acceptance	29
Denied or withdrew request for acceptance	6
Program Length	Totals
Intake date greater than three (3) years	16
Program sobriety date greater than three (3) years	5
Program Milestones	Low - High / Average
Intake date to IEC acceptance date	5 – 182 / 69 (days)
Intake date to successful completion	3 – 7.6 / 3.4 (years)
Program sobriety date to successful completion	3.0 - 4.5 / 3.4 (years)

Definitions:

- Intake date – The date that the recovery vendor conducted the initial intake interview of the IP applicant.
- IEC acceptance date – The date that the IEC accepts the applicant as a participant into the IP.
- Successful completion – the date that the IEC deemed the participant completed based on Uniform Standards.
- Program sobriety date – The first documented negative urine test after participant begins random drug testing with the Board's recovery vendor. A personal sobriety is not the same as the program sobriety date. The personal sobriety date is the date that the participant reports is their first date of sobriety.

Intervention Program Data - FY to Date										
	Jul 2024	Aug 2024	Sep 2024	Oct 2024	Nov 2024	Dec 2024	Jan 2025	Feb 2025	Mar 2025	Apr 2025
Beginning total IP participants	231	229	219	209	191	173	170	169	164	160
Intake(s) completed regardless of IEC acceptance or denial	4	8	6	6	2	5	6	4	2	4
Successful completion(s)	5	18	14	18	18	5	7	7	5	6
Termination(s) for other than successful completion(s)	1	0	2	6	2	3	0	2	1	0
Ending total IP participants	229	219	209	191	173	170	169	164	160	158
IP participants seen by an IEC	67	72	31	85	56	48	33	28	44	39

RESOURCES:

NEXT STEPS: Place on agenda

FISCAL IMPACT, IF ANY: None

PERSON(S) TO CONTACT: Loretta Melby
Executive Officer
California Board of Registered Nursing
Loretta.Melby@dca.ca.gov



Agenda Item 4.2

Information Only: Enforcement Division Update

BRN Board Meeting | May 28-30, 2025

BOARD OF REGISTERED NURSING Agenda Item Summary

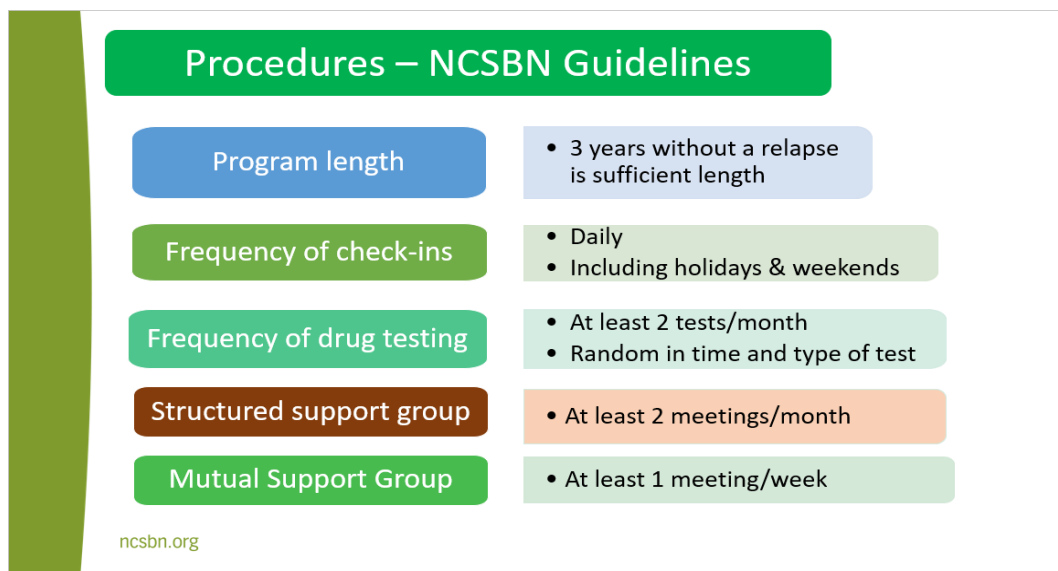
AGENDA ITEM: 4.2
DATE: May 29, 2025

ACTION REQUESTED: Information Only: Enforcement Division Update

REQUESTED BY: Patricia Wynne, Esq., Chairperson

General Information

At the August 2022 Board meeting, the Board voted to join the National Council of State Boards of Nursing (NCSBN) five-year pilot study (study) to test substance use disorder (SUD) monitoring program guidelines for alternative to discipline (ATD) programs for nurses. This study will track participant outcomes from entry into the program through program completion and up to two years immediately following their successful completion through 2027. Data will be provided to NCSBN biannually throughout the study period. Phase I data collection began in 2022 with a focus on program participation. Phase II includes recidivism data. This information will be used to compare programs that align or do not align with NCSBN's evidence-based guidelines. The results will support, refine, and augment evidence-based guidelines for ATD and monitoring programs to foster uniformity and facilitate nurses' safe return to practice.



The Board of Registered Nursing (BRN) continues to recruit qualified registered nurses (RN) with professional and educational backgrounds as Expert Practice Consultants (EPC) to review investigative case materials, prepare written opinions, and evaluate whether a RN deviated from the standards of nursing practice. The BRN is in critical need of EPC RNs and Advance Practice Registered Nurses (APRN) in the following areas:

- Long Term Care/Skilled Nursing Facility/Geriatric
- Acute Rehabilitation
- Dialysis
- Corrections (NPF)
- Hospice

For more information about the Expert Practice Consultant program, please visit the BRN website: <http://rn.ca.gov/enforcement/expwit.shtml> or email us at Expert.BRN@dca.ca.gov.

Complaint Intake

The CIU continues to utilize the updated Complaint Prioritization and Referral Guidelines ([CPRG](#)) to triage cases in collaboration with the DOI and BRN Investigations. In accordance with CPRG, CIU is triaging all category 2H cases with DOI prior to investigation referral.

Discipline

As of May 13, 2025, 14% of our cases have been pending at the OAG for over a year.

As of April 2025, the Citation and Fine unit has been moved from the Intervention and Legal Desk Unit to the Discipline unit. We also transferred an AGPA position from Licensing to fill the vacant Citation Analyst role, and they are currently training on the Citation desk workload.

Probation

The Probation Unit is currently working on enhancements to the BRN website and collaborating with DCA to prepare video presentations on the Probation Process and the Worksite Monitor's role and responsibilities.

Currently, Probation Monitors have an average of 49 active cases per monitor.

Board of Registered Nursing Enforcement Process Statistics

Table A – Complaint Intake

Complaint Intake	FY 2020/2021	FY 2021/2022	FY 2022/2023	FY 2023/2024	Current FY as of 5/1/2025
Public Complaints	3529	3682	4214	4674	4,498
Convictions/Arrest	830	971	1128	1215	1,111
Applicants	3269	3086	2605	1816	1,288
Total Received	7628	7739	7947	7705	6,897
Complaints Pending	1484	1324	1599	1800	1,580
>1 year	59	379	330	433	562
Convictions/Arrests Pending	1108	1020	842	785	666
>1 year	509	427	290	185	197
Applicants Pending	178	151	130	96	62
>1 year	20	12	10	9	10
Expert Review Pending Referral	20	22	29	0	13
>1 year	0	2	8	0	0
Expert Review Pending Receipt	34	43	20	3	35
>1 year	0	0	0	0	0

Complaints Received

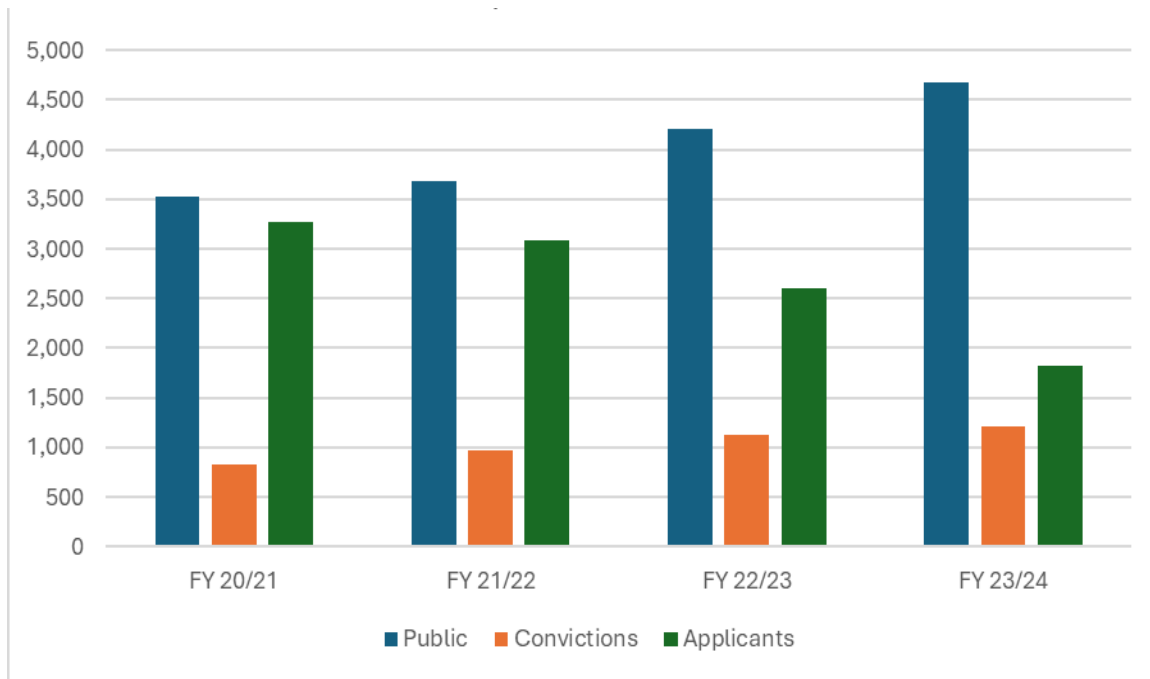


Table B – Citation and Fine

Citation and Fine	FY 2020/2021	FY 2021/2022	FY 2022/2023	FY 2023/2024	Current FY as of 5/1/2025
Citations Issued	145	149	149	237	27
Informal Conference					
Modified	1	3	1	1	0
Dismissed	3	2	2	4	0
Upheld	1	0	0	0	0
Amount Ordered	\$81,075.00	\$118,900.00	\$148,750.00	\$24,750.00	\$0.00
Amount Received	\$91,247.90	\$182,405.00	\$161,505.00	\$56,336.00	\$15,492.50
Amount Referred to FTB	\$7,050.00	\$11,000.00	\$6,250.00	\$57,475.00	\$0.00
Amount Received from FTB	\$7,750.00	\$7,610.00	\$11,000.00	\$11,531.00	\$0.00

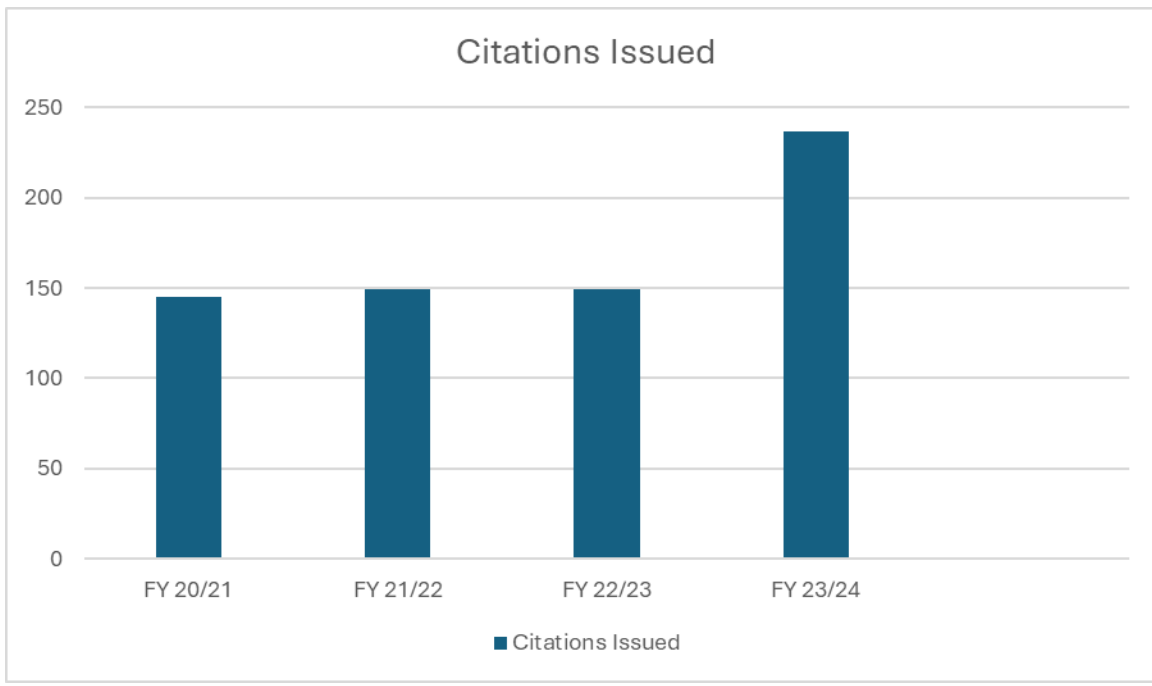


Table C – Discipline

Discipline	FY 2020/20 21	FY 2021/20 22	FY 2022/20 23	FY 2023/20 24	Current FY as of 5/1/2025
AG Referrals					
Cases	885	1240	1185	1271	1224
Cases Pending					
< 1 Year	*	529	677	602	746
> 1 Year	*	46	56	76	111
> 2 Year	*	2	7	9	10
Cases Pending >1 Year W/O Pleading Filed	*	13	12	23	14
Cases Pending Hearing	*	133	116	161	203
Average Days at AG	369	321	325	313	354
Pending Board Vote	*	24	69	40	56

* BRN is unable to provide historical pending numbers for this Fiscal Year.

Table D – Legal Support

Legal Support	FY 2020/2021	FY 2021/2022	FY 2022/2023	FY 2023/2024	Current FY as of 5/1/2025
Interim Suspension Orders (ISO)	1	4	0	0	2
PC 23	7	12	10	9	2
Pleadings Served					
Accusations	549	699	737	881	662
Statement of Issues	23	14	8	33	25
Order to Compel	49	64	58	123	112
Petition to Revoke Probation	83	69	80	69	71
Withdrawal of Pleading	50	20	30	42	40
Decisions Adopted					
Surrender	148	132	178	169	131
Default Revocation	165	181	243	102	193
Ordered Revocation	44	41	40	170	6
Probation	399	389	420	433	342
Public Reproval	135	70	90	120	121

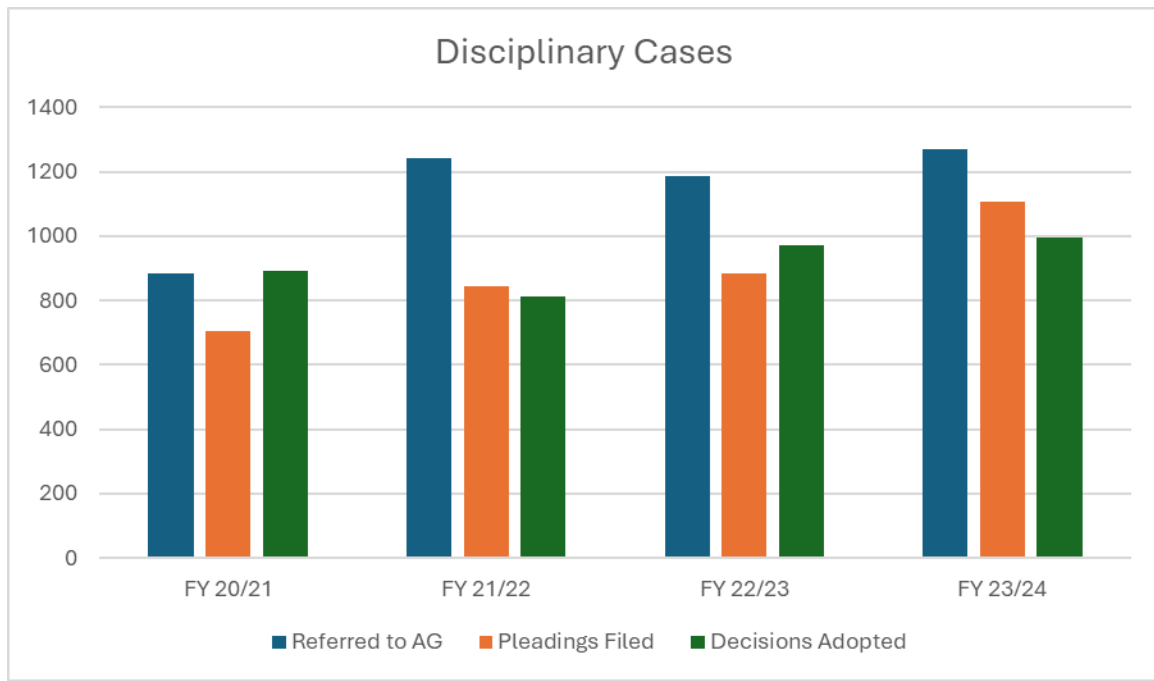


Table E - Probation

Probation	FY 2020/2021	FY 2021/2022	FY 2022/2023	FY 2023/2024	Current FY as of 5/1/2025
Active In-State Probationers	*	627	602	664	678
Tolled Probationers	428	426	841	485	456
Revoked	50	27	47	21	24
Surrendered	87	64	49	47	50
Completed	216	208	223	187	140
Subsequent Cases Pending at AG					
<1 Year	*	53	63	59	86
>1 Years	*	4	4	6	5
>2 Years	*	2	0	1	1

* BRN is unable to provide historical pending numbers.

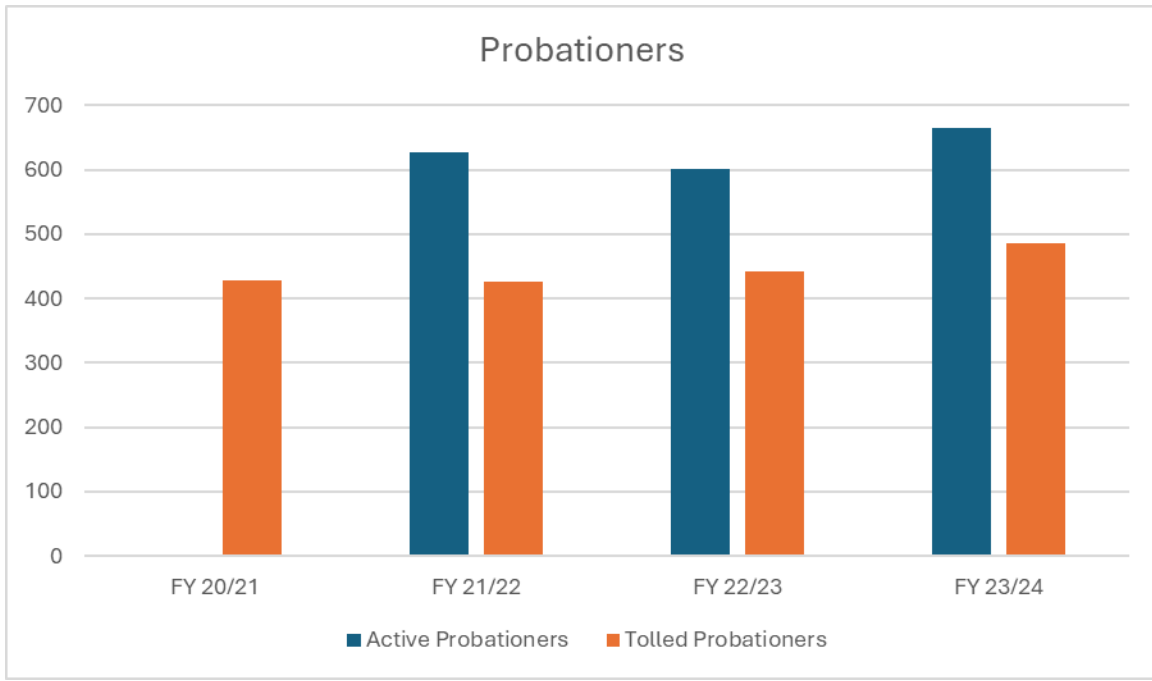


Table F – Total Case Processing Time

Total Case Processing Time	FY 2020/2021	FY 2021/2022	FY 2022/2023	FY 2023/2024	Current FY as of 5/1/2025
Average Days to Complete	651	644	685	680	717
> 540 Days*	56%	44%	57%	58%	63%
< 540 Days*	44%	56%	43%	42%	37%

* DCA's goal is for Disciplinary cases to be processed within 540 days of receipt for all healing arts boards.

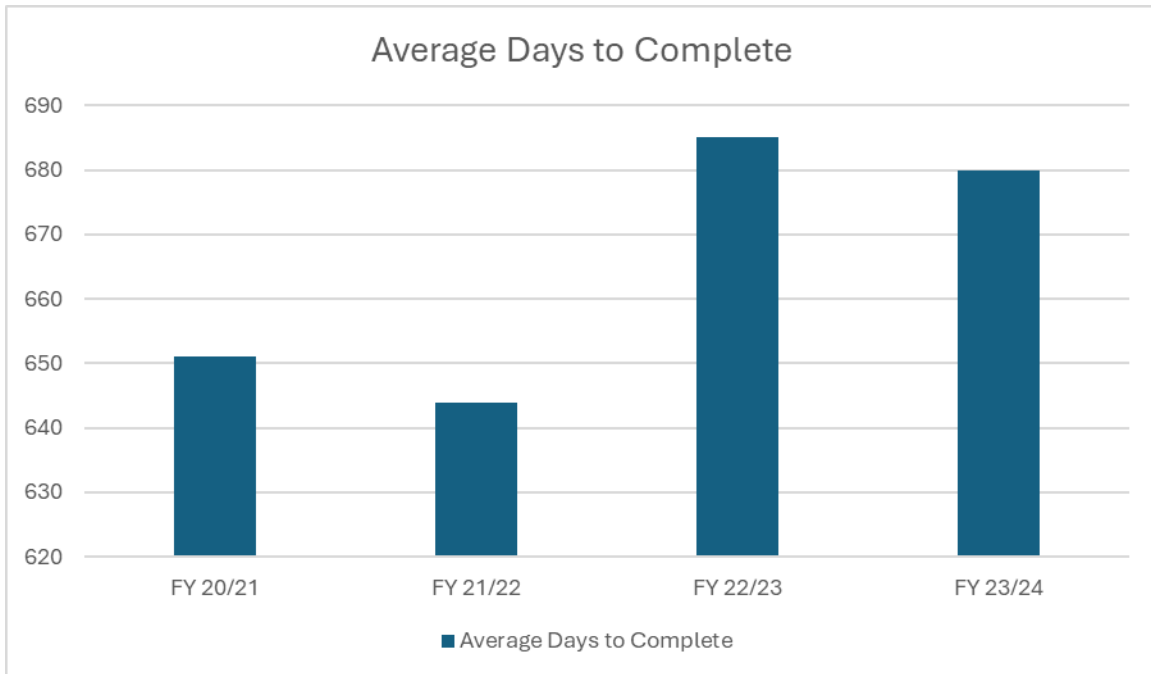


Table G – Performance Measure 4

	Case Volume	Intake	Investigation	Pre-AG Time	Post AG Time	Cycle Time
<i>FY 2024/25 FYTD</i>	818	5	337	24	354	720
<i>FY 2023/24</i>	1064	6	351	13	313	682
<i>FY 2022/23</i>	934	7	341	12	325	685
<i>FY 2021/22</i>	759	9	334	10	325	677
<i>FY 2020/21</i>	1010	5	272	7	369	654

If you would like more information on our enforcement statistics, please go to
https://www.dca.ca.gov/data/enforcement_performance.shtml

NEXT STEPS:

Continue to Monitor

PERSONS TO CONTACT:

Shannon Johnson, Enforcement Division Chief
Shannon.Johnson@dca.ca.gov
(916) 515-5265

ENFORCEMENT PROCESS STATISTICS

REFERENCE GUIDE

Table A

Complaint Intake

- Public Complaints
 - The total number of complaints received from the public, other state agency, or anything other than a conviction or applicant.
- Convictions/Arrests
 - The total number of complaints received due to an arrest and/or subsequent conviction. These are reported by Criminal Offender Record Information (CORI) from the California Department of Justice (DOJ).
- Applicants
 - The total number of applications received from Board of Registered Nursing (BRN or Board) licensing, in where the applicant disclosed a previous criminal history or discipline by another state board.
- Complaints Received
 - The total number of public complaints received. This includes other state agencies and Boards.
- Complaints Pending
 - The number of complaints that are pending in the Complaint Intake Unit (CIU).
- Convictions/Arrests Pending
 - The number of Convictions/Arrests that are pending in CIU.
- Applicants Pending
 - The number of Applicants that are pending in CIU.
- Public complaints
 - The number of public complaints that are pending in CIU.
- Expert review pending referral
 - The number of cases that are pending to be referred out to an expert practice consultant
- Expert review pending receipt
 - The number of cases that are pending being returned by the expert practice consultant to the Board.

Table B
Citation & Fine

- Citations Issued
 - The total number of citations issued.
- Informal Conference
 - The number of informal conferences conducted after an appeal is made by the Respondent. The results of the informal conference would be either modify, dismiss or uphold the citation.
- Amount Ordered
 - The total fine amount that has been ordered from all citations issued during the Fiscal Year (FY).
- Amount received
 - The total fine amount received by the Board during the FY.
- Amount referred to Franchise Tax Board (FTB)
 - The total amount of fines referred to FTB, in an attempt to retrieve the fines through California Income tax.
- Amount received from FTB
 - The total amount of fines received from FTB from California Income tax.

Table C
Discipline

- Attorney General (AG) referrals
 - The total number of cases referred to the AG.
- Cases pending
 - The total number of cases that are pending a final disposition in the disciplinary process.
- Cases pending hearing
 - The total number of cases that are awaiting a hearing before an ALJ.
- Average days at AGO
 - This is the average number of days that cases are at the AGO for prosecution.
- Pending Board vote
 - The total number of cases that are awaiting a vote by the Board (either in queue to be sent out or waiting for the voting period to conclude).

Table D
Legal Support

- Interim Suspension Order (ISO) - Granted

- Licenses suspended by an Administrative Law Judge due to the seriousness of the allegations in advance of the filing of an accusation and pending a final determination of the licensee's fitness to practice and provide nursing care.
- Penal Code 23 (PC23) - Granted
 - Licenses suspended from practice as a registered nurse or restricted in how he or she may practice registered nursing ordered by a judge during a criminal proceeding.
- Pleadings served
 - The total number of pleadings that have been served. This includes Accusations, Statements of Issue, Orders to Compel and Petitions to Revoke Probation.
- Withdrawals of pleadings
 - The total number of pleadings that the Board has withdrawn, and no action was taken.
- Decisions adopted
 - The total number of final Decisions that were adopted by the Board. This includes Surrenders, Default Revocations, Ordered Revocations, Probation and

Table E
Probation

- Active in state probationers
 - The total number of current/active in state probationers.
- Tolled probationers
 - The total number of probationers that reside outside of California. These probation cases are placed on hold until the RN returns to California.
- Revoked
 - The total number of probationers that have been revoked.
- Surrendered
 - The total number of probationers that have surrendered their license.
- Completed
 - The total number of probationers that have successfully completed probation.
- Subsequent cases pending at AGO
 - The total number of probationers that have had subsequent discipline and transmitted back to the AG for further disciplinary action.
 - Over 1 year
 - The number of probationary cases that have been pending at the AGO for over 1 years.
 - Over 2 years
 - The number of probationary cases that have been pending at the AGO for over 2 years.

Table F

Total Case Processing Time

- Average days to complete
 - The average days currently taking to complete a case from complaint receipt to final Decision
 - Over 540 days
 - The percentage of cases that BRN **is not** meeting the DCA goal of 540 days for case completion.
 - Under 540 days
 - The percentage of cases that BRN is meeting the DCA goal of 540 days for case completion.
 - **Note** – *DCA's goal for all healing arts boards is to complete on an average of 540 days or less.*

Table G

Performance Measure 4

BRN's Performance Measure 4, FY to date, by month. This is an average of case time from complaint intake to final disposition, broken down by intake, investigation, pre-AG and post AG time.

- Case volume is the total number of cases received in that month.
- Intake is the average time for intake to process and refer to investigation.
- Investigation is the average time for an investigation of the case.
 - This includes desk investigation, BRN investigation and DOI investigation.
- Pre AG time is the average amount of time from the closure of the investigation to AG referral.
- Post AG time is the average time from AG referral to final disposition of the case.
 - This includes the AG time, hearing, Board vote and case processing.
- Average total time is the average of a case from complaint intake to final disposition.

More information on DCA's enforcement reports can be found at <https://www.dca.ca.gov/data/enforcement.shtml>



Agenda Item 4.3

Information Only: Investigations Division Update

BRN Board Meeting | May 28-30, 2025

BOARD OF REGISTERED NURSING
Agenda Item Summary

AGENDA ITEM: 4.3
DATE: May 29, 2025

ACTION REQUESTED: Information Only: Investigations Division Update

REQUESTED BY: Patricia Wynne, Esq., Chairperson

General Information

The Office of Organizational Improvement (OIO) continues working with the Investigations Division (Investigations), assessing and mapping workflows, timeframes, and procedures to streamline and improve internal processes. The OIO team works with Subject Matter Experts (SMEs) from each unit and staffing level. Investigations will continue to report on the progress of this project in future meetings.

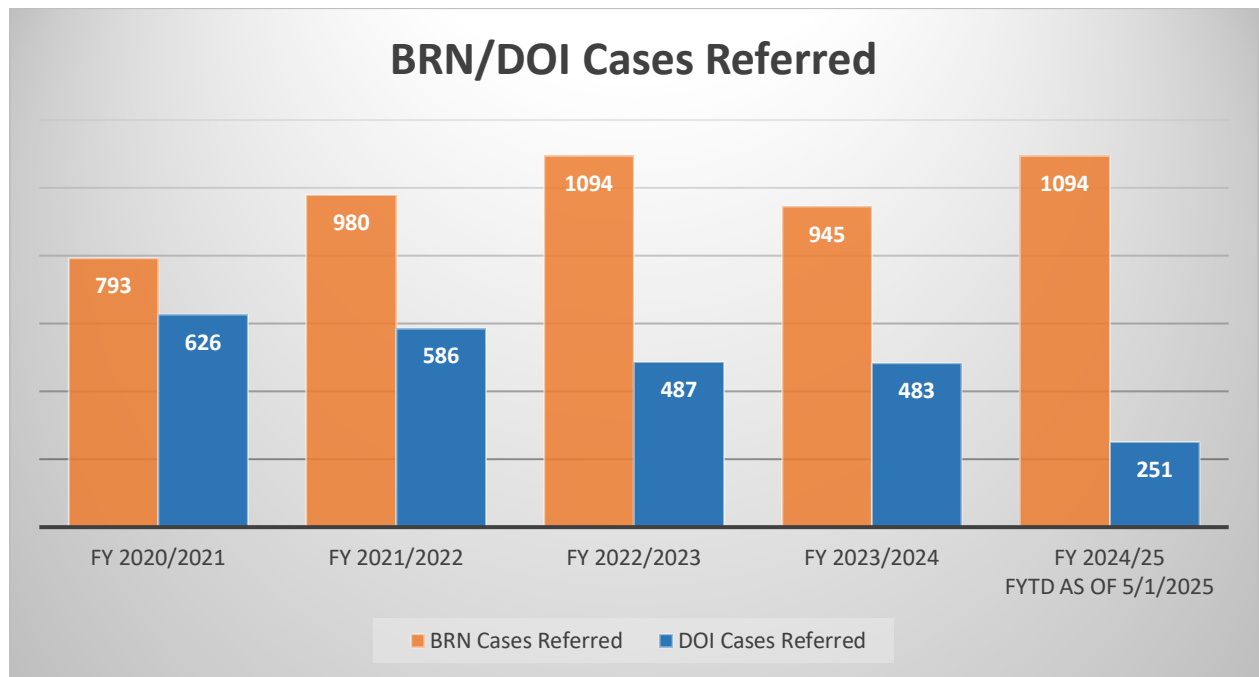
Investigations

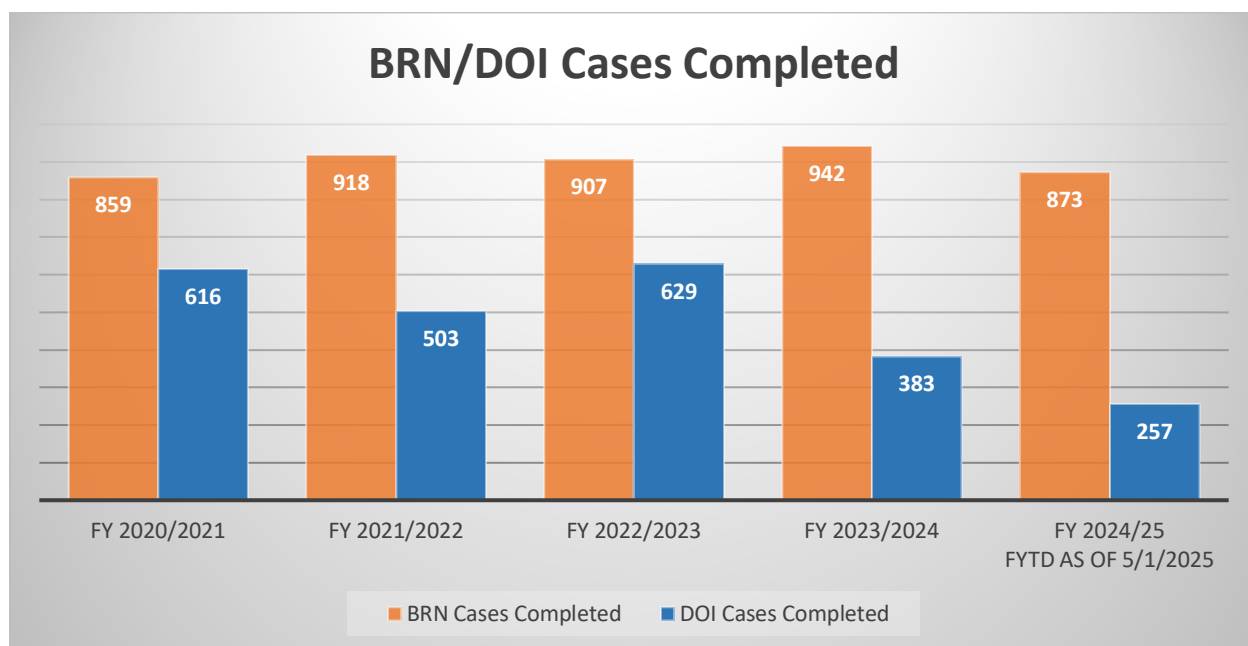
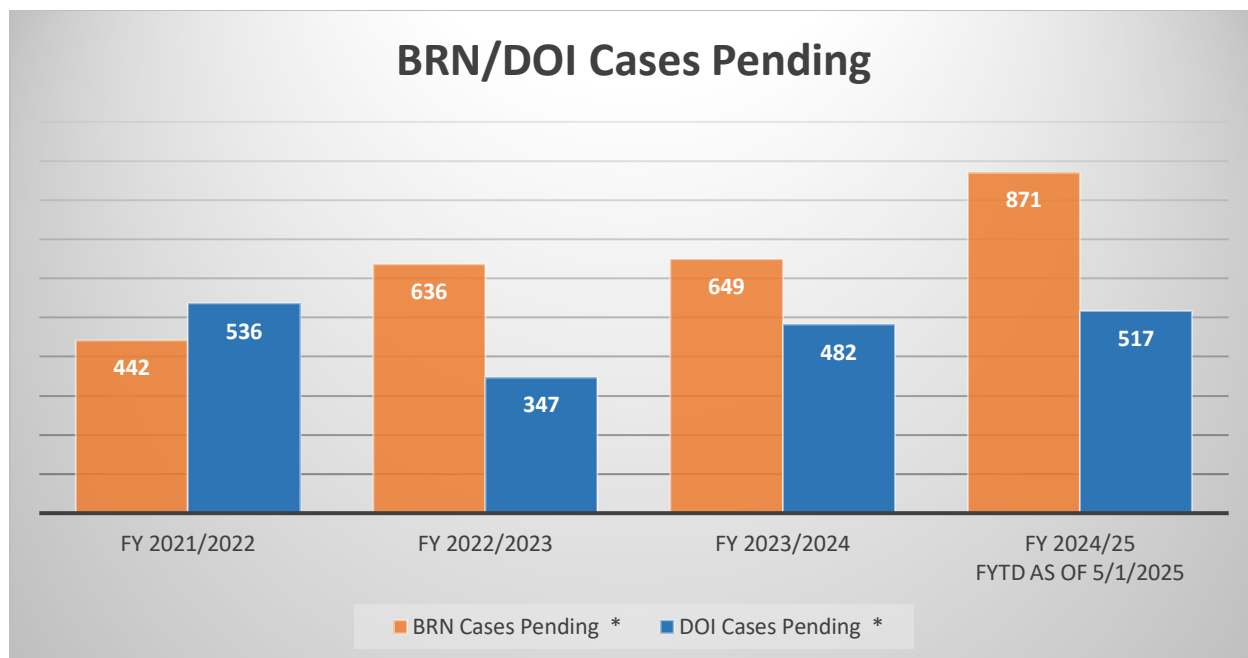
Investigations continue to adhere to Recommendation 7 of the 2016-046 audit by the California State Auditor. As of May 9, 2025, the full time Special Investigators have an average of 27 active cases. Due to the high caseloads, the Supervising Special Investigators (SSI's) and the Deputy Chief continue to actively work cases. At the Committee Meeting held on April 17, 2025, the Deputy Chief of Investigations clarified that the previously reported figure of 185 cases received in January 2025 was amended to 103 cases. Investigations is exploring multiple options to address the high caseload and continues to actively recruit for one (1) full-time Special Investigator (SI) position in the central region. A candidate has been selected and BRN anticipates a start date of June 2, 2025.

Table A – Investigations

Investigations	FY 2020/2021	FY 2021/2022	FY 2022/2023	FY 2023/2024	FY 2024/25 FYTD as of 5/1/2025
BRN Cases Referred	793	980	1094	945	1094
BRN Cases Pending	*	442	636	649	871
BRN Cases Completed	859	918	907	942	873
DOI Cases Referred	626	586	487	483	251
DOI Cases Pending	*	536	347	482	517
DOI Cases Completed	616	503	629	383	257
Total Referred	1419	1566	1581	1428	1,345

*BRN is unable to provide historical numbers for these items.





If you would like more information on our investigations statistics, please go to https://www.dca.ca.gov/data/enforcement_performance.shtml

NEXT STEPS:

Continue to Monitor

PERSONS TO CONTACT:

Nichole Bowles, Investigations Division Deputy Chief
(916) 597-7345

INVESTIGATIONS PROCESS STATISTICS REFERENCE GUIDE

Investigations

- BRN cases referred
 - This is the total number of cases that were referred to BRN Investigations.
- BRN cases pending
 - Total number of cases pending with BRN Investigations.
- BRN cases completed
 - The total number of cases that have been completed by BRN Investigations.
- DOI cases referred
 - This is the total number of cases that were referred to DOI.
- DOI cases pending
 - Total number of cases pending with DOI
- DOI cases completed
 - The total number of cases that have been completed by DOI.

Table A

Investigations statistical data FY to date. See guide above for reference.



Agenda Item 4.4

Information Only: Intervention Program Update

BRN Board Meeting | May 28-30, 2025

BOARD OF REGISTERED NURSING
Agenda Item Summary

AGENDA ITEM: 4.4
DATE: May 29, 2025

ACTION REQUESTED: Information Only: Intervention Program Update

REQUESTED BY: Patricia Wynne, Esq., Chairperson

Intervention

Management has been attending all Intervention Evaluation Committee (IEC) meetings, providing education and support to IEC members and participants, and identifying possible gaps in the regulation for the Intervention Program.

At the February 28-29, 2024, Board meeting, the Board voted to allow board staff to begin drafting regulatory language for revision and/or additions to the [California Code of Regulations \(CCR\), Title 16, Article 4.1 Intervention Program Guidelines](#).

The Intervention vendor contract with Maximus expired on December 31, 2024. The Department of Consumer Affairs (DCA) awarded the new Intervention vendor contract to [Premier Health Group](#). Premier Health Group is working with DCA and eight (8) healing arts boards, including the Board of Registered Nursing, to continue the transition with minimal impact to participants.

The Board continues to recruit IEC members with knowledge and experience in substance use disorder (SUD) treatment, recovery, and mental health. At the February 28-29, 2025, Board meeting, the Board voted to allow Board staff to reestablish up to five (5) additional IECs.

To apply for an IEC position, you can find the application on our website at <https://rn.ca.gov/intervention>.

If you would like more information on our enforcement statistics, please go to https://www.dca.ca.gov/data/enforcement_performance.shtml.

NEXT STEPS: Continue to Monitor

PERSONS TO CONTACT: Shannon Johnson, Enforcement Division Chief
Shannon.Johnson@dca.ca.gov
(916) 515-5265



Agenda Item 4.5

Discussion and Possible Action: Regarding the Use of Oral Fluid (Saliva) Testing in Addition to Other Current Methods of Random Drug and Alcohol Testing for Probationers and/or Intervention Program Participants, and Related Considerations Including Access to In-Person Test Sites, Validity of Alternative Testing Methods, Relative Costs, etc.

BRN Board Meeting | May 28-30, 2025

BOARD OF REGISTERED NURSING
Agenda Item Summary

AGENDA ITEM: 4.5
DATE: May 29, 2025

ACTION REQUESTED: **Discussion and Possible Action:** Regarding the continued use of oral fluid (saliva) testing and other current methods of random drug testing for probationers and/or Intervention Program participants, and related considerations, including access to in-person test sites, validity of alternative testing methods, relative costs, etc. and a presentation by Vault.

REQUESTED BY: Patricia Wynne, Esq., Chairperson

General Information: Presentation by Vault Health, the Board's testing vendor.

[SB 1441](#) (2007-08) Sec 3. Article 3.6 [BPC 315](#) (c)(4)

Standards governing all aspects of required testing, including, but not limited to, frequency of testing, randomness, method of notice to the licensee, number of hours between the provision of notice and the test, standards for specimen collectors, procedures used by specimen collectors, the permissible locations of testing, whether the collection process must be observed by the collector, backup testing requirements when the licensee is on vacation or otherwise unavailable for local testing, requirements for the laboratory that analyzes the specimens, and the required maximum timeframe from the test to the receipt of the result of the test.

[Uniform Standards](#) #4 addresses these requirements including stating that "A board may use other testing methods in place of, or to supplement biological fluid testing, if the alternate testing method is appropriate."

NEXT STEPS: Continue to Monitor

PERSONS TO CONTACT: Shannon Johnson, Enforcement Division Chief
Shannon.Johnson@dca.ca.gov
(916) 515-5265



Agenda Item 4.6

Discussion and Possible Action: Regarding the Policy on Internet Discipline Document Retention (Policy) for Discipline Decisions Being Posted on the Board's Website, Opportunities for Revisions to the Policy, and Reporting and Retention Requirements for the National Practitioner Data Bank (NPDB) and Nursys

BRN Board Meeting | May 28-30, 2025

BOARD OF REGISTERED NURSING
Agenda Item Summary

AGENDA ITEM: 4.6
DATE: May 29, 2025

ACTION REQUESTED:

Discussion and Possible Action: Regarding the *Document Retention Policy* (Policy) for decisions being posted on the Board's website, opportunities for revisions to the Board's policy and reporting and retention requirements for the National Practitioner Data Bank (NPDB), and Nursys.

REQUESTED BY:

Patricia Wynne, Esq., Chairperson

BACKGROUND:

Business and Professions Code Section 2708.1 states, "*Protection of the public shall be the highest priority for the Board of Registered Nursing in exercising its licensing, regulatory, and disciplinary functions. Whenever the protection of the public is inconsistent with other interests sought to be promoted, the protection of the public shall be paramount.*"

In support of the regulatory mandate, the mission of the Board of Registered Nursing is to protect the health, safety, and well-being of the public through the fair and consistent application of the statutes and regulations governing nursing practice and education in California. While most nurses are competent and provide care according to the nurse practice act, some violations do occur. When this occurs, the board is responsible for reviewing all complaints and responding to protect the public.

To uphold the Board's statutory mandate and mission while keeping pace with advances in technology, information has been provided on its website under [Disciplinary Actions and Reinstatements](#). While the information provided on the Board's website is not comprehensive, information is added to the website on a regular basis as public requests for disciplinary records are fulfilled.

To balance the public's right to be informed about their health care practitioners and licensee privacy concerns for those who have fulfilled the requirements of a disciplinary action against their license, the Board has set forth policy as it pertains to the various types of disciplinary action in accordance with all applicable laws.

Resources:

- [Title 45 Subtitle A Subchapter A Part 60-National Practitioner Data Bank](#)
- [U.S. Department of Health & Human Services National Practitioner Data Bank \(NPDB\)](#)
- [Nursys ®](#)
- [Policy of Internet Discipline Document Retention](#)

- [AB 2138 \(Chiu/Low\) 2017-2018: Licensing boards: denial of application: revocation or suspension of licensure: criminal conviction \(aka the Fair Chance Licensure Act\)](#)

NEXT STEPS:

Continue to Monitor

PERSONS TO CONTACT:

Shannon Johnson, Enforcement Division Chief
Shannon.Johnson@dca.ca.gov
(916) 515-5265

POLICY ON INTERNET DISCIPLINE DOCUMENT RETENTION

Business and Professions Code Section 2708.1 states “*Protection of the public shall be the highest priority for the Board of Registered Nursing in exercising its licensing, regulatory, and disciplinary functions. Whenever the protection of the public is inconsistent with other interests sought to be promoted, the protection of the public shall be paramount.*”

In support of our regulatory mandate, it is the mission of the Board of Registered Nursing to protect the health and safety of consumers by promoting quality registered nursing care in the State of California. This is done by intervening with discipline and rehabilitation when necessary.

In order to uphold the Board’s statutory mandate and mission, while keeping up with advances in technology, information has been provided on its website, www.rn.ca.gov, regarding disciplinary actions taken against registered nurse licenses since 2005. While the information provided on the Board’s website is not comprehensive, information is added to the website on a regular basis as public requests for disciplinary records are fulfilled.

In an effort to balance the public’s right to be informed about their health care practitioners and licensee privacy concerns for those who have fulfilled the requirements of a disciplinary action against their license the Board has set forth the following policy as it pertains to the various types of disciplinary action:

Action / Time Record Retained	3 years from date of resolution	3 years from date of completion	10 years from date of completion	Indefinitely
Final Decision Upholding Citation and/or Fine Administrative Hearing	X			
Final Decision Upholding Citation and Fine involving Unlicensed Individual				X
Final Decision Resulting in Public Reprimand		X		
Final Decision Resulting in Probation (with or without license suspension)			X	
Final Decision Resulting in Probation (Tolled)			X	
Final Decision Resulting in License Revocation or Surrender				X
Final Decision, Other			X	

NOTE: License status will remain on the BRN website indefinitely. All documents above are considered a public record and will be provided when requested.

Final actions taken by the Board prior to January 1, 2012, shall be posted for a period of 3 years, 10 years, or indefinitely from January 1, 2012. Final actions taken by the Board on or after January 1, 2012, shall remain posted for 3 years, 10 years, or indefinitely from the date the Board’s action was final.



Agenda Item 4.7

Information Only: Presentation by Birchwood Solutions on Services Available in Connection with Nursing Support Group Management

BRN Board Meeting | May 28-30, 2025

BOARD OF REGISTERED NURSING
Agenda Item Summary

AGENDA ITEM: 4.7
DATE: May 29, 2025

ACTION REQUESTED:

Information only: Presentation by Birchwood Solutions on services available in connection with Nursing Support Group Management; presented by Elizabeth Temple, M.Ed., Chief Executive Officer, Birchwood Solutions

REQUESTED BY:

Patricia Wynne, Esq., Chairperson

BACKGROUND:

Birchwood Solutions delivers specialized support group management services tailored to the specific requirements of state licensing boards. Each program is carefully aligned with the standards and expectations of the board being served, ensuring participant accountability and full regulatory compliance. Birchwood's team of experienced and newly onboarded Support Group Facilitators undergoes targeted training, equipping them to guide board-referred individuals with empathy, structure, and professionalism, all with a focus on long-term success and personal development.

Beyond expert facilitation, Birchwood offers complete administrative and operational tools to support organizations and licensing boards. These include scheduling, secure virtual meeting platforms, attendance tracking, progress reporting, and more. This integrated system ensure that every aspect of support group management is handled with efficiency, confidentiality, and a high standard of care.

Uniform Standard #5

Uniform Standard #5 refers to the standards governing all aspects of group meeting attendance requirements, including, but not limited to, required qualifications for group meeting facilitators, frequency of required meeting attendance, and methods of documenting and reporting attendance or nonattendance by licensees.

If a board requires a licensee to participate in group support meetings, the following shall apply: When determining the frequency of required group meeting attendance, the board shall give consideration to the following:

- the licensee's history;
- the documented length of sobriety/time that has elapsed since substance use;
- the recommendation of the clinical evaluator;
- the scope and pattern of use;
- the licensee's treatment history; and,
- the nature, duration, and severity of substance abuse.

Group Meeting Facilitator Qualifications and Requirements:

1. The meeting facilitator must have a minimum of three (3) years experience in the treatment and rehabilitation of substance abuse, and shall be licensed or certified by the state or other nationally certified organizations.
2. The meeting facilitator must not have a financial relationship, personal relationship, or business relationship with the licensee within the last year.
3. The group meeting facilitator shall provide to the board a signed document showing the licensee's name, the group name, the date and location of the meeting, the licensee's attendance, and the licensee's level of participation and progress.
4. The facilitator shall report any unexcused absence within 24 hours.

Disciplinary Guidelines (Probation only)

Condition 15 – Participate in Treatment/Rehabilitation Program for Chemical Dependence

Based on Board recommendation, each week respondent shall be required to attend at least one, but no more than five 12-step recovery meetings or equivalent (e.g., Narcotics Anonymous, Alcoholics Anonymous, etc.) and a nurse support group as approved and directed by the Board. If a nurse support group is not available, an additional 12-step meeting or equivalent shall be added. Respondent shall submit dated and signed documentation confirming such attendance to the Board during the entire period of probation.

NEXT STEPS:

Continue to monitor

PERSONS TO CONTACT:

Shannon Johnson, Enforcement Division Chief
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(916) 515-5265



Agenda Item 4.8

Discussion and Possible Action: Reappointment of Intervention Evaluation Committee (IEC) Members

BRN Board Meeting | May 28-30, 2025

BOARD OF REGISTERED NURSING
Agenda Item Summary

AGENDA ITEM: 4.8
DATE: May 29, 2025

ACTION REQUESTED: Discussion and possible action regarding reappointments of Intervention Evaluation Committee Members

REQUESTED BY: Patricia Wynne, Esq., Chairperson

BACKGROUND:

In accordance with Business and Professions Code section [2770.2](#), the Board of Registered Nursing is responsible for appointing persons to serve on an Intervention Evaluation Committee (IEC). Each IEC is composed of three registered nurses, one physician and one public member who possess knowledge and expertise in substance use disorder or mental health.

REAPPOINTMENTS:

Name	Member Type	IEC	Appointment Type	Term Expiration
Glenda Lando	Nurse	1	Reappointment	6/30/2029
David Granovetter	Physician	1	Reappointment	6/30/2029
Natalie Reinfeld	Public	4	Reappointment	6/30/2029
Jason Barrett	Physician	5	Reappointment	6/30/2029
Barry Levine	Physician	7	Reappointment	6/30/2029
Andrew Berger	Public	7	Reappointment	6/30/2029
Luann La May	Nurse	12	Reappointment	6/30/2029
Alexis Blount	Nurse	12	Reappointment	6/30/2029

If all are approved for reappointment, we will have 4 vacancies for new appointees. This does not include any IEC vacancies based on the Board's previous approval to reopen up to five IECs.

NEXT STEPS: Continue recruitment efforts

PERSON TO CONTACT: Shannon Johnson, Enforcement Division Chief
(916) 515-5265