



Enforcement, Investigations, and Intervention Committee Meeting Materials

BRN Enforcement, Investigations, and Intervention Committee |
April 17, 2025

Enforcement, Investigations, and Intervention Committee

April 17, 2025

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Agenda Item 3.0

Review and vote on whether to approve previous meeting minutes

BRN Enforcement, Investigations, and Intervention Committee |
April 17, 2025

**STATE OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS
BOARD OF REGISTERED NURSING
ENFORCEMENT, INVESTIGATIONS,
AND INTERVENTION COMMITTEE
MEETING MINUTES**

Date: January 22, 2025

2:45 p.m.

Start Time: 2:45 p.m.

Location: **NOTE:** Pursuant to the provisions of Government Code section 11133 a physical meeting location was not being provided.

The Board of Registered Nursing held a public meeting via a teleconference platform.

Wednesday, January 22, 2025 - BRN Enforcement, Investigations, and Intervention Committee Meeting

2:45 p.m.

1.0

Call to order/roll call/establishment of a quorum.

Patricia Wynne, Chairperson, called the meeting to order at: 2:45 p.m. All members are present. Quorum was established at 2:46 p.m.

Committee Members: Patricia “Tricia” Wynne, Esq. - Chair
Rio David Lollar
Alison Cormack

BRN Staff: Loretta (Lori) Melby, RN, MSN – Executive Officer
Reza Pejuhesh – DCA Legal Attorney
Shannon Johnson, Enforcement Division Chief – Staff Liaison
Nichole Bowles, Deputy Chief of Investigations

2:47 p.m.

2.0

Public comment for items not on the agenda; items for future agendas

Public Comment for Agenda Item 2.0:

Paradise – She spoke about probation discipline documents being posted indefinitely on the BRN and Nursys website. She said her convictions are 20 years old and continues to harm her nursing career. She would like to put this on a

future agenda to consider changing the rules for those licensed prior to AB 2138.

Reza Pejuhesh spoke about AB 2138 and consideration of applicant criminal history prior to licensure. He said there was no language in the bill that spoke to prior applicant decisions.

Patricia Wynne asked if this would be appropriate to be a board agenda item.

Reza Pejuhesh said this could be added and spoke about dismissed accusations being brought down from the web.

Patricia Wynne asked for this to be added to a future board agenda since this has come up multiple times.

Loretta Melby said this could be added because there have been some reach outs about discipline information added to Nursys and the National Practitioner Data Banks. She said maybe February or May for sure.

Nurse – She spoke about entering the BRN's intervention program. She said she entered the program after considering it for one year. She said she was told by a BRN representative that she was not a threat to the public yet when she entered the program, she was taken out of work for one year. She said she has no history of diversion, over 70 negative drug tests, and been fully compliant. She said testing can cost more than \$1,000 per month. She's lost her job and colleagues. She said this should not be a barrier. She would like to see changes made to the work restrictions for the program.

Nurse 117 – She said she emailed Loretta Melby about reconsideration about her work decision that has resulted in being out of work for 18 months. She does not know if she'll be scheduled next month for an IEC. She said there have been hiccups in communication with the new Intervention Program contractor.

Anonymous – He said he's in Nevada with his wife and newborn baby who requires constant care due to premature birth. He said he has maintained over five years of sobriety and recovery. He is fully complied with the Nevada intervention program. He spoke about the board not having

a policy to consider an out of state recovery program. He has attempted to contact the board staff many times and has not received any response. He said he is three months shy of completion of the other state's program and does not want to leave his newborn to complete the program.

Loretta Melby said there are several emails each day requesting reconsideration of their IEC completion. There may not be an immediate response to emails. The IECs must schedule each person, as they are responsible for the decisions.

3:02 p.m.

3.0

Review and vote on whether to approve previous meeting minutes

3.1 October 17, 2024

Committee

Discussion: No comments or questions.

Motion: **Alison Cormack:** Motion to Accept EIIC Meeting Minutes from October 17, 2024 and allow BRN Staff to make non-substantive changes to correct name misspellings and/or typos that may be discovered in the document.

Second: **David Lollar**

Public Comment for

Agenda Item 3.0: No public comments in any location.

Vote:

	PW	DL	AC
Vote:	Y	Y	Y
Key: Yes: Y No: N Abstain: A Absent for Vote: AB			

Motion Passed

3:05 p.m.

4.0

Information Only: Enforcement Division updates

Committee

Discussion: Patricia Wynne said she has two questions. She asked about Table F showing the 2020 data that looks the same as 2024.

Shannon Johnson said data has been similar and could be correct.

Patricia Wynne asked how the board could improve the time frames.

Shannon Johnson said they are always looking at ways to improve their processes. The time includes all parts of the process. She gave stats on the various steps in the process. She said they will never meet the 540-day goal. She said there have been discussions whether anyone can meet the goal.

Patricia Wynne asked what Shannon's feelings are about the data and whether there are any that keep her up at night.

Shannon Johnson said the process mapping shows the times are within days. She said she looks at all the milestones for the cases. She said nothing keeps her awake but knows improvements can be made.

Alison Cormack is excited to see the data. She asked about the video for probation that keeps getting promised.

Shannon Johnson said they finished the slides and voiceovers. As soon as that's finalized it will be sent to DCA for compilation. She doesn't have a date from DCA when it will be done.

Alison Cormack said Table A, Complaint Intake Conviction and Arrest numbers are up. She asked if this something in the universe, California, or nursing? She asked how should these be interpreted? She asked if there could be multiple complaints for one person and Shannon Johnson said yes.

Shannon Johnson said when Covid hit the complaints dropped. At the end of 2024 there was media attention, and 800 complaints were filed because of an invitation to file complaints. There are multiple complaints filed against a person.

Loretta Melby said there was a social media post encouraging people to file complaints against one licensee. She said the criminal convictions and arrests are not happening at health care facilities but in nurses' personal lives.

Alison Cormack appreciated the context.

Alison Cormack asked about the pending discipline cases for board vote taking 52 days on Table C. She said that's almost two months.

Shannon Johnson said there are 52 cases that is not a time frame.

Alison Cormack asked if there is a reason for due dates being so far out.

Shannon said she'll look at the Decisions and Appeals unit to see if that can be streamlined.

Alison Cormack said she's willing to take a month to see if they can get ahead. She said the information is helpful with the right amount and level.

**Public Comment for
Agenda Item 4.0:**

No public comments in any location.

3:23 p.m.

5.0

Information Only: Investigations Division updates

**Committee
Discussion:**

Patricia Wynne asked about the average caseload per investigator being 28 and what the ideal number of cases would be.

Nichole Bowles said the maximum is 30 cases per Special Investigator based on a survey of healing arts boards.

Loretta Melby said in the 2016 audit someone gave the number as 20 cases maximum being assigned to investigators. There was a whistleblower complaint about the number of cases and a survey was done with all the healing arts boards to come up with a more manageable number of cases which is 30. This number can be changed if it is determined the investigators could do more and the number could be updated. She said there are still more cases pending assignment. She said they spoke with the Division of Investigation (DOI), and they are still at 30. She said the BRN investigators are more comfortable with 20 cases. She said Nichole Bowles and Evon Lenerd Tapps are also helping work cases. If the cases continue to go down as they did from November and December that will help. Shannon Johnson, Nichole Bowles, and Evon Lenerd Tapps

looked at data and think the 104 cases was a blip. She said the BRN cannot go out and hire more special investigators. She then discussed the Budget Change Proposal (BCP) process. She said a BCP was submitted about three years ago and it was denied because of the high vacancy rate at the BRN. Due to the current budget situation, there may not be an opportunity to request more positions for some time.

Alison Cormack asked about Table A complaints being triaged and going on to investigations. She said there was a pretty big influx in the last six months. She asked about thoughts on that and if it could be related to Loretta Melby's explanation. She asked if the 387 to 672 is a normal variability?

Nichole Bowles said there could be a number of different factors. There is an ebb and flow, and she cannot tell when complaints will be submitted. She said there could be new investigations that would have gone to DOI and are now being referred to BRN based on the Complaint Prioritization and Referral Guidelines (CPRG).

Evon Lenerd Tapps said CPRG went into effect in March 2024.

Alison Cormack said this can be interpreted as the BRN is looking more closely at this. She also noted the DOI referrals going down during the past few years. She asked if this information was disseminated to DOI and discussed.

Nichole Bowles said they do meet and discuss this.

David Lollar appreciates the information being shared.

**Public Comment for
Agenda Item 5.0:**

A nurse at a closed psych facility – She said she didn't expect to speak but said she filed two complaints in the past, about four years ago. She said one of the cases was taken care of about a year ago. She said she filed another complaint as a patient advocate in a closed facility. She didn't know which case was resolved. She said she was told they didn't find anything wrong with one of the cases and was told she had 10 days to bring more information to the board. She said she was prepared to bring information. She said one case had to do with patient death and one was a patient reported they were raped, and the facility didn't

follow their procedure and immediately released the patient. She said as nurses they are advocates for patients. She said she would like the opportunity to sit with the board if a case is closed to be able to advocate for the patient.

Reza Pejuhesh said when a complaint is filed the complainant isn't contacted regularly during the process because it is confidential while it is under investigation. He said the board investigators are open to receiving evidence during the investigation if a complainant wants to provide it.

3:42 p.m.

6.0

Information Only: Intervention Program updates

Committee

Discussion:

Alison Cormack asked about the earlier public commenter not hearing from the new vendor. She asked if the new vendor has a 24/7 phone number.

Shannon Johnson said there is a new phone number that has been posted to the BRN website. She said the new vendor is calling all participants back.

Alison Cormack clarified asking if participants have another avenue to contact the vendor.

Shannon Johnson said a participant can send an email to the intervention email address at intervention-brn@dca.ca.gov .

Public Comment for Agenda Item 6.0:

DJH – She appreciates the email and phone numbers provided. She has not heard from her case manager except for an email. She's called and sent emails with no response yet. She has her IEC scheduled for tomorrow but if they could make those attending IECs soon a priority.

Loretta Melby said DJH could reach out directly to Shannon Johnson via her email that is listed on the BRN website. She also clarified the intervention email address would be appropriate.

Nurse 117 – She said there is no law that says a nurse must work to complete the intervention program and wants to ensure that is still the requirement now. Loretta Melby said Uniform Standard 12 says a nurse must demonstrate safe practice which is determined by each IEC on an individual

basis, but there is no specific law that says work is required to successfully complete the program.

Loretta Melby said Premier Health (new intervention program vendor) has assumed both the phone and fax number that was used by Maximus. There is a new email address that was updated on the BRN website. She said Premier Health is a medical program. She asks for patience as they come up to speed.

3:54 p.m.

6.1 Information Only: Presentation by the Executive Officer regarding cases affected by the motion during the August 2024 Board meeting (in which the Board directed:

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 IEC recommendation extends length in the program beyond three years, the Executive Officer must review and examine the evidence.

Committee Discussion:

Patricia Wynne appreciates the extra set of eyes for this process. She said practicing safely needs a definition. She appreciates everyone working on the transition to the new vendor.

Alison Cormack appreciates the progress in the last 14 months since the public brought these issues forward, even though she knows it has been a long time. She spoke about some of the data in the meeting materials.

David Lollar agrees with what Alison Cormack said. He has a wait and see approach with the new vendor. He looks forward to discussing criteria for what practicing safely means.

Loretta Melby said that could be agendaized at the February or May board meeting.

Reza Pejuhesh said a discussion could be had about Uniform Standard 12 and might need regulations.

**Public Comment for
Agenda Item 6.1:**

Gina – She surrendered (her license) last August with 4 years and 3 months sobriety when there was a lot of confusion with the intervention program. Initially she received a Retired status that showed up on the BRN website. Then after the October meeting her status changed to Surrendered. Then her story popped up and it's been difficult for her. She completed all the initial requirements of the program and should have completed in June. She's applied to minimum wage jobs and even at Disneyland who found her story. She wishes this would change. She realizes people's stories will be posted but wanted to share.

Loretta Melby said the commenter has been in contact with the Assistant EO and is working with her.

4:15 p.m.

6.2 Discussion and possible action: Regarding the reestablishment of up to approximately five (5) Intervention Evaluation Committees to meet program needs

**Committee
Discussion:**

Patricia Wynne agreed with Alison Cormack that the last 14 months were miserable, but they've learned a lot in this time. She's in favor of this.

David Lollar said he thinks this is necessary and is for it 100%.

Alison Cormack believes this is necessary but is concerned with the ability to fill the spots.

Shannon Johnson said there is a backlog of applicants waiting to be considered.

Motion: Patricia Wynne: Motion to Approve the reestablishment of up to approximately five (5) Intervention Evaluation Committees to meet program needs and recommend such action to the board.

Second: David Lollar

**Public Comment for
Agenda Item 6.2:**

No public comments in any location.

Vote:			
	PW	DL	AC
Vote:	Y	Y	Y
Key: Yes: Y No: N Abstain: A Absent for Vote: AB			
Motion Passed			

4:23 p.m.

6.3 Discussion and possible action: Regarding the Intervention Program Subcommittee charter

Committee Discussion:

Patricia Wynne reviewed it and does not think it's perfect, but it can be modified going forward if needed.

Alison Cormack said page 26 about two thirds of the way down says the subcommittee will review applications and interview if appropriate. She thought they were supposed to interview all applicants.

Patricia Wynne read it the same way.

Alison Cormack wonders why it doesn't say "will" instead of "would."

Loretta Melby read additional language where staff will review applications and forward qualified applicants to the subcommittee. She said they can work on the language before presenting it to the board. She said if an applicant does not appear qualified then they will not be considered for interview or words to that effect. She said they will discuss with DCA Legal.

Matthew Yeates said the language in the charter reflects the motion made by Dolores Trujillo at the November board meeting.

David Lollar said he's read it twice but is open to changes.

Public Comment for Agenda Item 6.3:

No public comments in any location.

Motion: **Patricia Wynne:** Motion to Accept the Intervention Program Subcommittee charter with discussed revision(s), recommend approval to the Board and allow BRN Staff to

make non-substantive changes to correct name misspellings and/or typos that may be discovered in the document.

Second: Alison Cormack

Vote:

	PW	DL	AC
Vote:	Y	Y	Y
Key: Yes: Y No: N Abstain: A Absent for Vote: AB			

Motion Passed

4:31 p.m.

7.0

Adjournment

- **Patricia Wynne, Chairperson, adjourned the meeting.**

Submitted by:

Accepted by:

Loretta Melby, MSN, RN
Executive Officer
California Board of Registered Nursing

Patricia “Tricia” Wynne, Esq.
Chair
California Board of Registered Nursing



Agenda Item 4.0

Information Only: Enforcement Division updates

BRN Enforcement, Investigations, and Intervention Committee |
April 17, 2025

BOARD OF REGISTERED NURSING
Agenda Item Summary

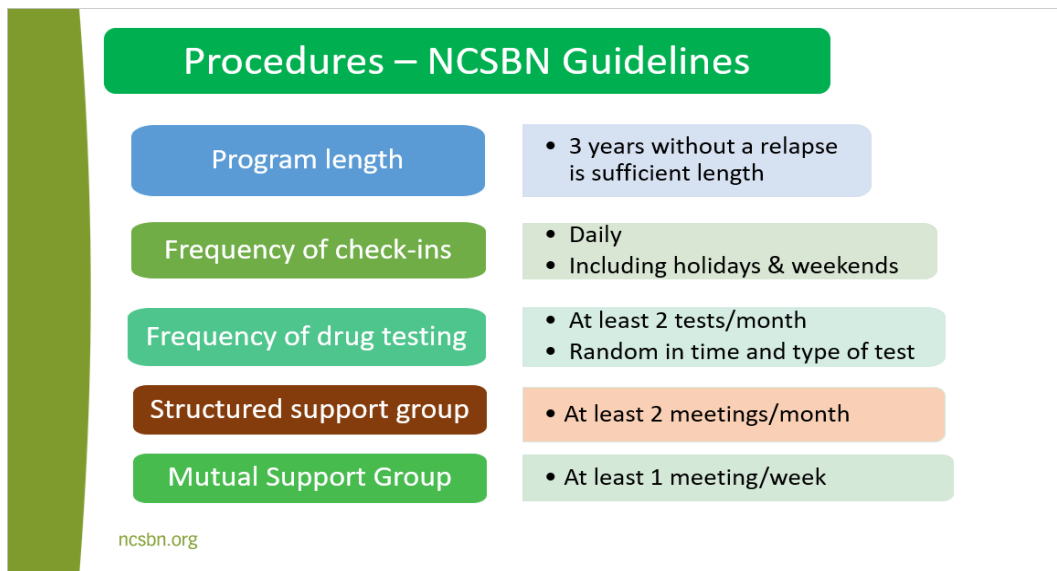
AGENDA ITEM: 4.0
DATE: April 17, 2025

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
- School Nursing
- Medical/Surgical
- Pediatric ICU
- CCU/Telemetry
- Dialysis

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.

CIU continues to triage cases to obtain preliminary documents before referring them for a field investigation.

Discipline

As of March 25, 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 and getting up to speed 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 48 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	FY 2024/25 FYTD as of 4/1/2025
Public Complaints	3,529	3,682	4,214	4,674	3,921
Convictions/Arrest	830	971	1,128	1,215	979
Applicants	3,269	3,086	2,605	1,816	1,145
Total Received	7,628	7,739	7,947	7,705	6,045
Complaints Pending	1,484	1,324	1,599	1,800	1,978
>1 year	59	379	330	433	676
Convictions/Arrests Pending	1,108	1,020	842	785	885
>1 year	509	427	290	185	254
Applicants Pending	178	151	130	96	75
>1 year	20	12	10	9	8
Expert Review Pending Referral	20	22	29	-	9
>1 year	-	2	8	-	-
Expert Review Pending Receipt	34	43	20	3	24
>1 year	-	-	-	-	-

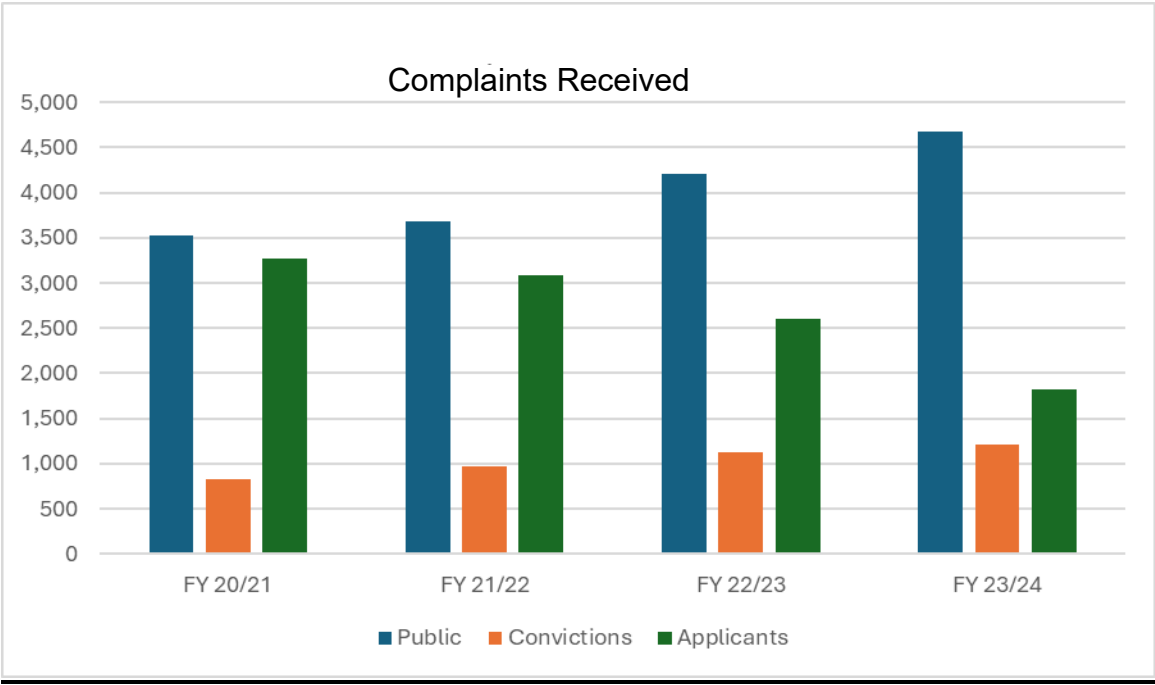


Table B – Citation and Fine

Citation and Fine	FY 2020/2021	FY 2021/2022	FY 2022/2023	FY 2023/2024	FY 2024/25 FYTD as of 4/1/2025
Citations Issued	145	149	149	237	23
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	\$14,022.00
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

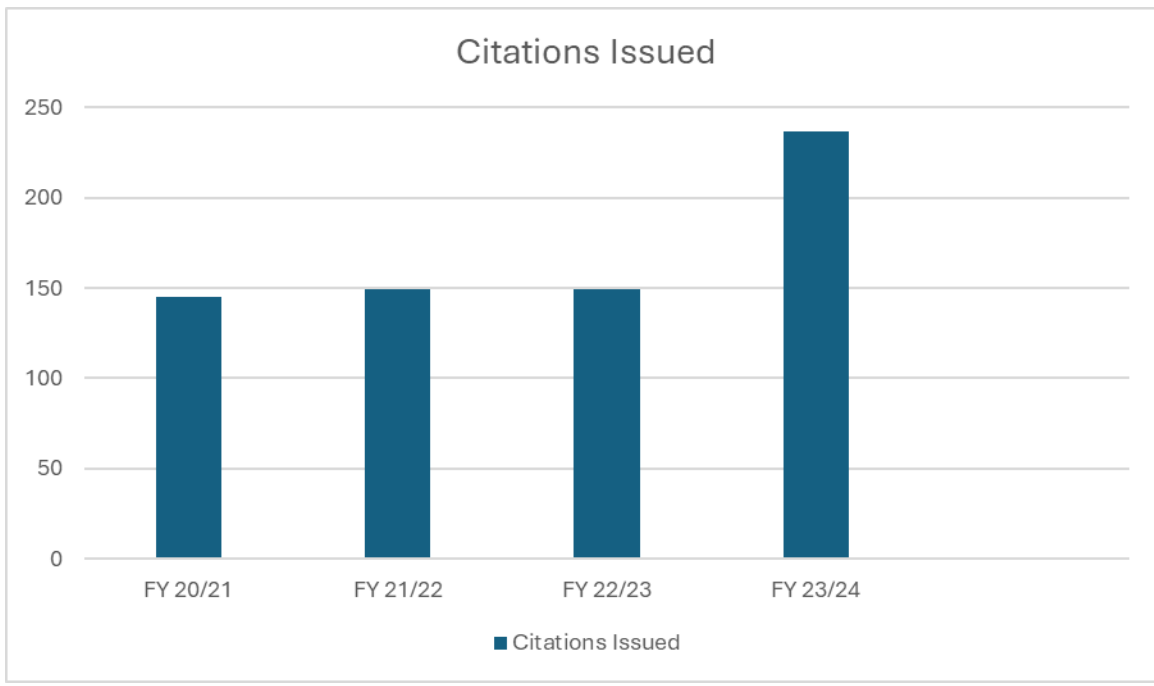


Table C – Discipline

Discipline	FY 2020/20 21	FY 2021/20 22	FY 2022/20 23	FY 2023/20 24	FY 2024/25 FYTD as of 4/1/2025
AG Referrals					
Cases	885	1240	1185	1271	976
Cases Pending					
< 1 Year	*	529	677	602	677
> 1 Year	*	46	56	76	98
> 2 Year	*	2	7	9	11
Cases Pending >1 Year W/O Pleading Filed	*	13	12	23	10
Cases Pending Hearing	*	133	116	161	187
Average Days at AG	369	321	325	313	356
Pending Board Vote	*	24	69	40	45

* 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	FY 2024/25 FYTD as of 4/1/2025
Interim Suspension Orders (ISO)	1	4	0	0	2
PC 23	7	12	10	9	2
Pleadings Served					
Accusations	549	699	737	881	551
Statements of Issues	23	14	8	33	16
Orders to Compel	49	64	58	123	98
Petitions to Revoke Probation	83	69	80	69	62
Withdrawals of Pleadings	50	20	30	42	40
Decisions Adopted					
Surrenders	148	132	178	169	121
Default Revocations	165	181	243	102	170
Ordered Revocations	44	41	40	170	5
Probation	399	389	420	433	259
Public Reprovals	135	70	90	120	113

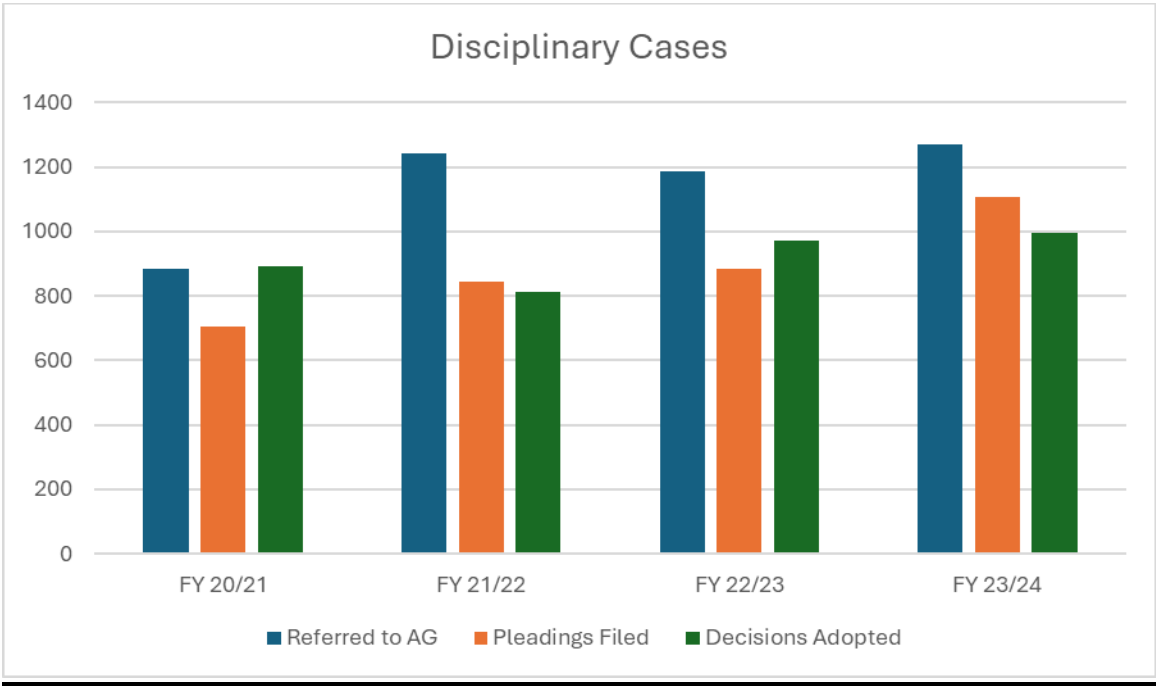


Table E - Probation

Probation	FY 2020/2021	FY 2021/2022	FY 2022/2023	FY 2023/2024	FY 2024/25 FYTD as of 4/1/2025
Active In-State Probationers	*	627	602	664	682
Tolled Probationers	428	426	441	485	506
Revoked	50	27	47	21	16
Surrendered	87	64	49	47	46
Completed	216	208	223	187	120
Subsequent Cases Pending at AG					
<1 Year	*	53	63	59	83
>1 Years	*	4	4	6	11
>2 Years	*	2	0	1	0

* 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	FY 2024/25 FYTD as of 4/1/2025
Average Days to Complete	651	644	685	680	733
> 540 Days*	56%	44%	57%	58%	64%
< 540 Days*	44%	56%	43%	42%	36%

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

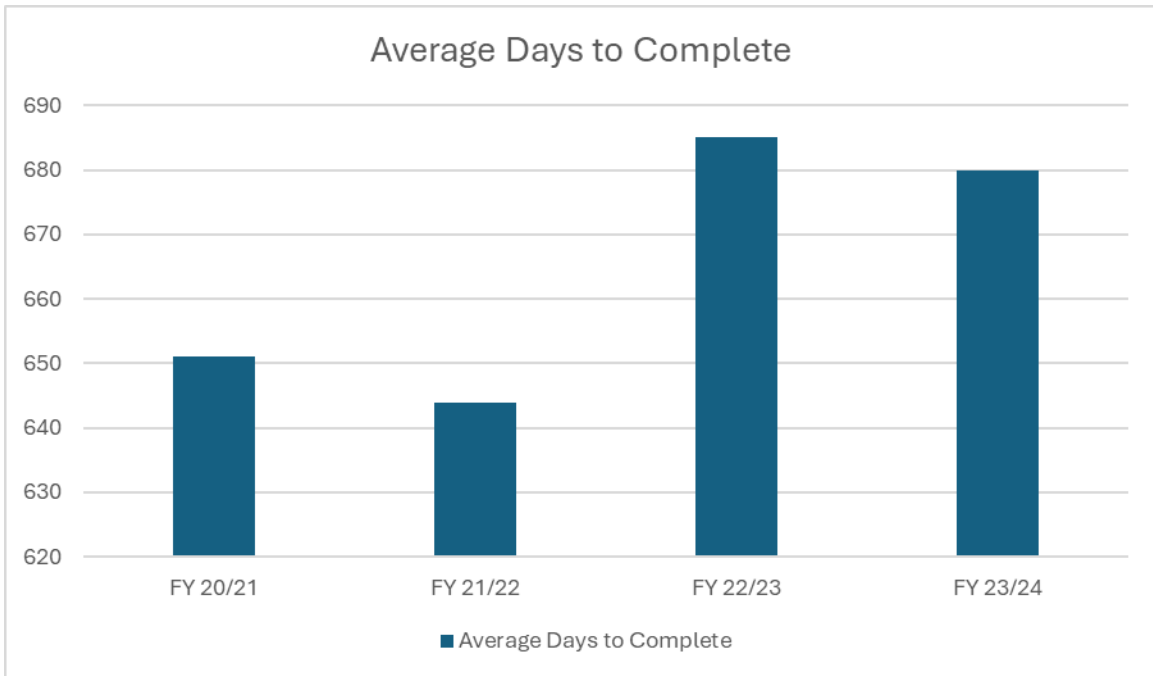


Table G – Performance Measure 4

	Case Volume	Intake	Investigation	Pre-AG Time	Post AG Time	Cycle Time
<i>FY 2024/25 FYTD</i>	745	5	346	26	356	733
<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 5.0

Information Only: Investigations Division updates

BRN Enforcement, Investigations, and Intervention Committee |
April 17, 2025

BOARD OF REGISTERED NURSING
Agenda Item Summary

AGENDA ITEM: 5.0
DATE: April 17, 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.

In March 2025, a workload analysis was conducted on the Investigations Analyst position for Budget Change Proposal (BCP) purposes. A BCP is a proposal to change the level of service or funding sources for activities authorized by the Legislature, or to propose new program activities not currently authorized. The work analysis supports BRN's request for four additional analyst positions within Investigations.

Investigations

Investigations continue to adhere to Recommendation 7 of the 2016-046 audit by the California State Auditor. As of April 4, 2025, the full time Special Investigators have an average of 28 active cases. Due to the high caseloads, the Supervising Special Investigator 1s and the Deputy Chief continue to actively work cases. Investigations received 109 cases in February 2025, which is a decrease from the 185 cases received in January 2025. Investigations is exploring multiple options to address the high caseload and continues to actively recruit for one (1) full-time position in the central region and limited-term Investigators statewide.

Table A – Investigations

Investigations	FY 2020/2021	FY 2021/2022	FY 2022/2023	FY 2023/2024	FY 2024/25 FYTD as of 4/1/2025
BRN Cases Referred	793	980	1094	945	994
BRN Cases Pending	*	442	636	649	889
BRN Cases Completed	859	918	907	942	756
DOI Cases Referred	626	586	487	483	222
DOI Cases Pending	*	536	347	482	523
DOI Cases Completed	616	503	629	383	216
Total Received	1419	1566	1581	1428	1,216

*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 6.0

Information Only: Intervention Program updates

BRN Enforcement, Investigations, and Intervention Committee |
April 17, 2025

BOARD OF REGISTERED NURSING
Agenda Item Summary

AGENDA ITEM: 6.0
DATE: April 17, 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 7.0

**Information Only: Presentation by the Executive Officer
regarding cases affected by the motion during the
August 2024 Board meeting**

BRN Enforcement, Investigations, and Intervention Committee |
April 17, 2025

BOARD OF REGISTERED NURSING
Agenda Item Summary

AGENDA ITEM: 7.0
DATE: April 17, 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 March 31, 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	90
Granted successful completion	67
Reviews sent to the Executive Officer (EO)	41
EO approved IEC recommendation(s)	14
EO referred to a re-reviewing IEC	27
Intervention Program New Applicant(s)	
Petitioned for acceptance	39
Granted acceptance	28
Denied or withdrew request for acceptance	6
Program Length	
Intake date greater than three (3) years	22
Program sobriety date greater than three (3) years	5
Program Milestones	
	Low - High / Average
Intake date to IEC acceptance date	5 - 182 / 71 (days)
Intake date to successful completion	3.0 - 7.6 / 3.6 (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
Beginning total IP participants	231	229	219	209	191	173	170	169	166
Intake(s) completed regardless of IEC acceptance or denial	4	8	6	6	2	5	7	4	3
Successful completion(s)	5	18	14	18	18	5	9	5	5
Termination(s) for other than successful completion(s)	1	0	2	6	2	3	1	1	1
Ending total IP participants	229	219	209	191	173	170	169	166	163
IP participants seen by an IEC	67	72	31	85	56	48	33	27	41

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 8.0

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 Enforcement, Investigations, and Intervention Committee |
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**BOARD OF REGISTERED NURSING
Agenda Item Summary**

AGENDA ITEM: 8.0
DATE: April 17, 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 9.0

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.; presentation by Vault Health

BRN Enforcement, Investigations, and Intervention Committee |
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**BOARD OF REGISTERED NonURSING
Agenda Item Summary**

AGENDA ITEM: 9.0
DATE: April 17, 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
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