



Agenda Item 14.0

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

BRN Board Meeting | November 20-21, 2024

Enforcement, Investigations, and Intervention Committee November 20-21, 2024

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Agenda Item 14.1

**Information Only:
Intervention Program (IP) Presentation
by the Executive Officer**

BRN Board Meeting | November 20-21, 2024

BOARD OF REGISTERED NURSING
Board Meeting
Agenda Item Summary

AGENDA ITEM: 14.1
DATE: November 21, 2024

- ACTION REQUESTED:** **Information only:** Intervention Program (IP) presentation by the Executive Officer (EO) on the following:
- Actions taken after the approved Board motion from the August 22, 2024, Board meeting regarding 1) the requirement that participants work in direct patient care; 2) the requirement that participants work passing narcotics; and 3) if an IEC recommendation extends length in the program beyond three years.
 - General IP statistical data.

REQUESTED BY: Patricia Wynne, Esq., Chairperson

BACKGROUND:

During the Enforcement, Investigations, and Intervention Committee (EIIIC) report to the Board on Thursday August 22, 2024, the Board made a motion that directed Board executive management to provide an update to the EIIIC regarding Intervention Program participants who had these requirements removed or imposed pursuant to this 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.

In any cases in which either and/or both of those requirements were the only requirements preventing a participant from successfully completing the program, and where those requirements are removed pursuant to this motion, direct board executive management to work with the Intervention Program Manager to have such cases presented to an Intervention Evaluation Committee (IEC) as soon as practicable for consideration of program completion.

As it relates to the August 22, 2024, Board motion, provided above, and when the IEC is considering program completion, [Uniform Standard](#) Number 12 identifies criteria to “Petition for Reinstatement” for a full an unrestricted license¹. This is an informal request by the Intervention Program (IP) participant. The licensee must meet the following criteria to request (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.

¹ Per Uniform Standard 12, “Petition for Reinstatement” as used in this standard is an informal request (petition) as opposed to a “Petition for Reinstatement” under the Administrative Procedure Act.

On Tuesday August 27, 2024, an email was sent by the Board’s Executive Officer to Board staff and Maximus sharing the motion and requesting that the motion be shared with the IEC members, Nursing Support Group Facilitators (NSGF), and Maximus staff. In a subsequent email that day, the link to the webcast was provided as a convenience to allow for the review of the Board discussion prior to the motion and the vote by the Board.

On Thursday September 5, 2024, the Board motion and the link to the meeting’s webcast was shared, via email by Maximus, to all NSFGs and IEC members. Also contained in that email was the following statement by Maximus, “As you may be aware, Maximus will not be pursuing the rebid on the contract which ends December 31, 2024. We are working to ensure all participants are seen by a review committee before the end of the year.”

Since the August 21-22, 2024, Board meeting there have been ten (10) IEC meetings held:

IEC	Date(s)	Comment(s)
1	August 27, 2024	Special meeting – not on annual schedule
12	September 12, 2024	
4	September 26, 2024	
1	October 3-4, 2024	
11	October 10, 2024	
5	October 16-17, 2024	
9	October 23-24, 2024	
3	October 31, - November 1, 2024	No quorum on October 31, 2024
7	November 5, 2024	
1	November 8, 2024	

Additionally, there are three (3) more IECs scheduled prior to the end of the year:

IEC	Date(s)	Comment(s)
9	November 22, 2024	Special meeting - not on annual schedule
4	December 4, 2024	Rescheduled from original date of December 19, 2024
12	December 12-13, 2024	Special meeting - added December 13, 2024

August 2024 - Board Motion Data

The below reflects data related to the approved Board motion from August 22, 2024, through November 1, 2024, and does not include any data after the November 1st IEC meeting.

Successful Completion(s)	Totals
Petitioned for successful completion	42
Granted successful completion	30
Reviews sent to the Executive Officer (EO)	22
EO approved IEC recommendation(s)	4
EO referred to a re-reviewing IEC	10
Intervention Program New Applicant(s)	
Petitioned for acceptance ²	19
Granted acceptance ³	15
Denied or withdrew request for acceptance ⁴	4
Program Length	
Intake date greater than three (3) years	23
Program sobriety greater than three (3) years	9
Program Milestones	
Intake date to IEC acceptance date	5 - 182 / 71 (days)
Intake date to successful completion	3.1 - 6.0 / 3.7 (years)
Program sobriety date to successful completion	3.0 - 4.5 / 4.0 (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.

² One applicant was deferred to a future IEC and then denied at the next meeting due to ineligibility.

³ One participant was accepted but was subsequently terminated from the IP during the same time period.

⁴ One applicant withdrew their request for acceptance during the IEC review.

The below reflects general IP data for the period of July - October 2024 based on information provided by Maximus:

Maximus Intervention Program Data				
	Jul 2024	Aug 2024	Sep 2024	Oct 2024
Beginning total IP participants	231	229	219	209
Intake(s) completed by Maximus of RNs requesting admission to the IP regardless of IEC acceptance or denial	4	8	6	6
Successful completion(s)	5	18	14	18
Termination(s) for other than successful completion(s)	1	0	2	6
Ending total number of IP participants	229	219	209	191
IP participants seen by an IEC (all applicants and participants listed on an IEC agenda regardless of if a recommendation(s) decision was made by the IEC)	67	72	31	85

RESOURCES:

NEXT STEPS:

FISCAL IMPACT, IF ANY: None

PERSON(S) TO CONTACT: Loretta Melby
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California Board of Registered Nursing
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Agenda Item 14.2

Information Only: Enforcement, Investigations, and Intervention Update

BRN Board Meeting | November 20-21, 2024

BOARD OF REGISTERED NURSING
Agenda Item Summary

AGENDA ITEM: 14.2
DATE: November 21, 2024

ACTION REQUESTED: Information Only: Enforcement, Investigations, and Intervention 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) pilot study to test substance use disorder (SUD) monitoring program guidelines. This is a five-year study of alternative to discipline programs for nurses, and we will provide data biannually for the next five years to see if the nurses can return safely to practice.

The Office of Organizational Improvement (OIO) continues working with the Enforcement Division and Investigations Division, 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. We will continue to report on the progress of this project in future meetings.

On October 29, 2024, BRN and the Office of Attorney General (OAG) conducted the third of a four-part Deputy Attorney General (DAG) training series. The fourth and final training will be held in November 2024. In attendance were both BRN Investigations, Complaint Intake Unit (CIU), and Division of Investigation (DOI).

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 is continuing to use 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 prior to a field investigation referral.

Discipline

As of November 5, 2024, only 13 percent of our cases are pending at the OAG, for over a year.

The Office of Administrative Hearings (OAH) is beginning to hold in-person hearings; however, if all parties agree, the hearing may be held remotely via online platforms. OAH will calendar cases no further than seven months out. We are monitoring this change to see if it will impact the aging of our AG cases.

Probation

The Probation Unit is currently working on enhancements to the BRN website and creating an informational video that provides an overview of probation and what to expect should it be the final disposition of a case.

Probation monitors have an average of 47 active cases each.

Investigations

As a result of the California State Auditor (CSA) audit, [2016-046](#) Investigators caseloads are limited to a maximum of thirty (30) cases, pursuant to [Recommendation #7](#). As of October 30, 2024, the full-time Special Investigators (Investigators) have an average of twenty-nine (29) active cases. Some Investigators may carry a lower caseload during their probationary period or for other administrative reasons. The retired annuitant Investigators shall not carry a caseload exceeding fifteen (15) cases.

Due to the Investigator's caseloads at maximum limits, the three (3) Supervising Special Investigators and the Investigations Deputy Chief are assigned and actively working an average caseload of eighteen (18) cases. In addition, the one (1) full-time Investigations Analyst is actively performing supportive investigative activities, including but not limited to, obtaining additional preliminary information, and identifying anonymous subjects.

With the implementation of the [CPRG](#), March 1, 2024, the BRN retains the following:

- Category 2 – High priority cases involving quality of care complaints of serious patient or consumer harm, gross negligence, incompetence resulting in great bodily injury or death (non-criminal) patient harm and patient death cases.
- Category 3 - Cases involving general unprofessional conduct and quality of care cases without patient harm. These cases are to be investigated with the highest priority by the BRN Investigators.
- Category 4 – Subsequent arrest notifications, continuing education violations, probation violations, and all other administrative violations.

Since the implementation of the CPRGs, Investigations experienced a 70 percent increase of case referrals to 110, compared to the same time frame in the previous year of 65.

Investigations is exploring multiple options to address the high caseload and has been actively recruiting for one (1) full-time position in the central region and limited-term Investigators statewide.

Intervention

Management has been attending all Intervention Evaluation Committee (IEC) meetings, providing education 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 work on a regulation package.

Although the contract with Maximus expires December 31, 2024, we continue to work closely with Maximus, to discuss and develop best practices, identify areas of improvement, and adherence to all laws and regulations. Department of Consumer Affairs (DCA) is currently engaging in contract negotiation activities with the newly awarded vendor, Premier Health Group.

The Board continues to recruit IEC members with knowledge and experience in substance use disorder (SUD) treatment, recovery, and mental health.

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

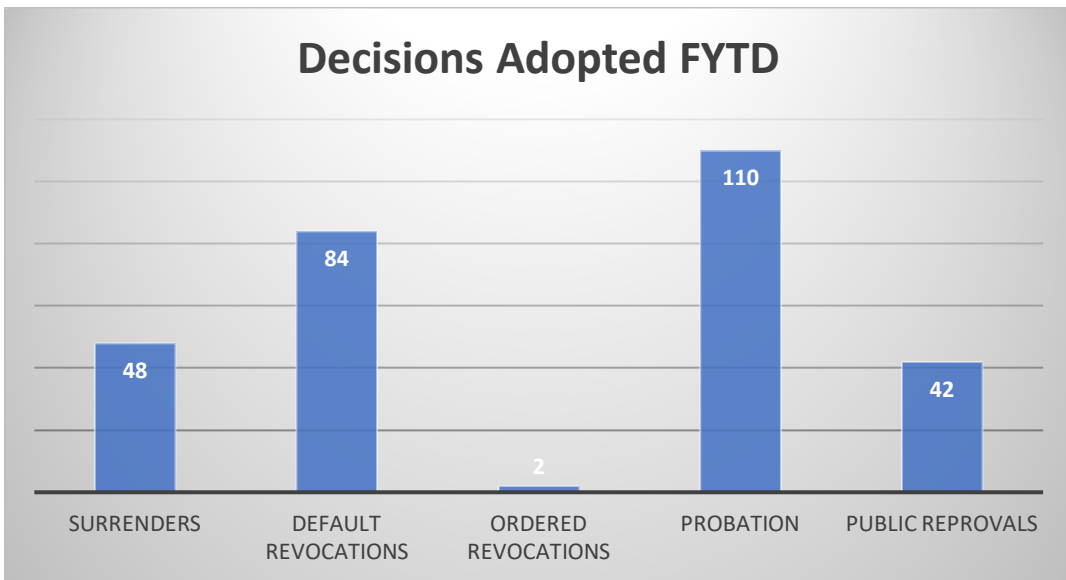
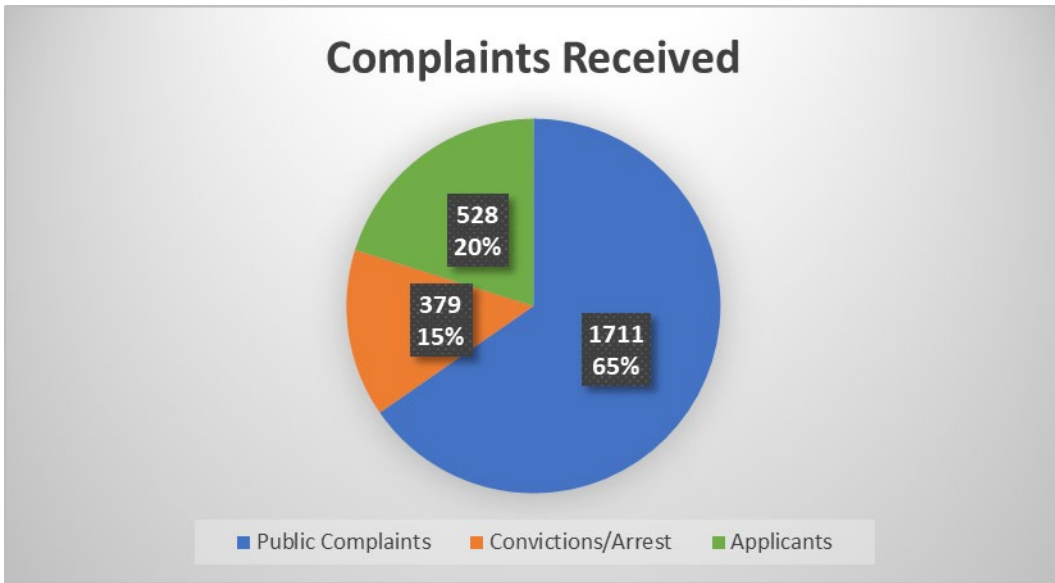
Table A

Board of Registered Nursing Enforcement Statistics Fiscal Year 2024/2025 As of 10/30/2024		
Complaint Intake	Total Received	2618
	Public Complaints	1711
	Convictions/Arrest	379
	Applicants	528
	Complaints Pending	1884
	Convictions/Arrests Pending	785
	Applicants Pending	80
	Public Complaints	1019
	Expert Review Pending Referral	10
	Expert Review Pending Receipt	32
Intervention	Total Participants	190
	Intakes	23
	Accepted by IEC	15
	Declined by IEC	3
	Withdrew Pre IEC	2
	Pending IEC acceptance	3
	Closed	59
	Successful Completions	55
	Withdrew	2
	Terminated	2
Citation and Fine	Citations Issued	10
	Formal Hearing	0
	Informal Conference	0
	Modified	0
	Dismissed	0
	Upheld	0
	Amount Ordered	\$0.00
	Amount Received	\$21,698.00
	Amount Referred to FTB	\$0.00
	Amount Received from FTB	\$0.00

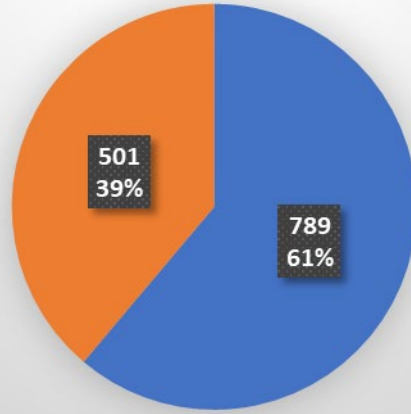
<i>Discipline</i>	AG Referrals	454
	AG Cases Pending	801
	< 1 Year	689
	> 1 Year	105
	> 2 Year	7
	Cases Pending Hearing	157
	Average Days at AG	342
Pending Board Vote	28	
<i>Legal Support</i>	Interim Suspension Orders (ISO) Granted	2
	PC 23 Granted	0
	Pleadings Served	297
	Accusations	212
	Statements of Issue	13
	Orders to Compel	45
	Petitions to revoke Probation	27
	Withdrawal of Pleading	23
	Decisions Adopted	286
	Surrenders	48
	Default Revocations	84
	Ordered Revocations	2
	Probation	110
	Public Reprovals	42
<i>Investigations</i>	BRN Cases Referred	471
	BRN Cases Pending	789
	BRN Cases Completed	333
	DOI Cases Referred	113
	DOI Cases Pending	501
	DOI Cases Completed	116
<i>Probation</i>	Active In-State Probationers	674
	Tolled Probationers	489
	Revoked	5
	Surrendered	16
	Completed	53
	Subsequent Cases Pending at AG	86

Total Case Processing Time	Average Days to Complete	723
	> 540 Days	64%
	< 540 Days	36%
	DCA goal of 540 days for all healing arts boards	

Graphs Based on Table A



Investigation Cases Pending



■ BRN Cases Pending ■ DOI Cases Pending

BRN Performance Measure YTD 24/25

TABLE B

Performance Measure 4 - AG Transmittals						
	Case Volume	Intake	Investigation	Pre-AG Time	Post AG Time	Cycle Time
<i>July</i>	101	12	408	27	351	797
<i>August</i>	71	6	311	23	324	664
<i>September</i>	75	1	371	15	350	736
<i>October</i>	72	2	313	23	340	678
Total/Average	319	5	356	22	342	726

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
(916) 515-5265
Nichole Bowles, Investigations Division Deputy Chief
(916) 597-7345

ENFORCEMENT PROCESS STATISTICS

REFERENCE GUIDE

Complaint Intake

- Complaints Received
 - The total number of public complaints received. This includes other state agencies and Boards.
- 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 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.

Intervention

- Total Participants
 - The current number of participants in the Intervention Program.
- Intakes - The number of intakes conducted by recovery vendor.
 - Accepted
 - The number of referrals that have been accepted by IEC.
 - Declined
 - The number RN's that decided to decline the Intervention Program
 - Withdrew Pre IEC
 - The number of applicants that withdrew prior to being accepted by the IEC.
 - Pending IEC approval
 - The number of applicants that have had an intake completed but has not yet been accepted by an IEC.
- Closures - The number of IP cases closed
 - Successful Completions
 - The number of RN's that were able to successfully complete the program.
 - Withdrew
 - The number of RN's that withdrew from the program after being accepted by an IEC but prior to successfully completing the program.
 - Terminated
 - The number of RN's that were terminated from the program by IEC.

Citation & Fine

- Citations Issued
 - The total number of citations issued.
- Formal Hearing
 - The number of hearings requested by the RN. The formal hearing is transmitted to the Attorney General's Office (AGO) and is heard by an Administrative Law Judge (ALJ). The results of this hearing would be either modify, dismiss or uphold the citation.
- 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.

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.

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 Public Reprovals.

Investigations

- BRN cases referred
 - This is the total number of cases that were referred to BRN Investigations.
 - Rejected
 - The total number that were rejected. Rejected cases are either referred to Division of Investigation (DOI), per Consumer Protection Enforcement Initiative (CPEI), closed or sent for citation.
 - Triage
 - The total number of cases that require additional information and discussion to determine the CPEI level, before assignment to either BRN Investigations or DOI.
- 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.
 - Rejected
 - The total number that were rejected. Rejected cases are either referred to BRN Investigations per Consumer Protection Enforcement Initiative (CPEI), closed or sent for citation.
 - Supplemental requested
 - The total number of DOI cases that needed additional investigation for evidence or interviews. These are normally requested by BRN staff, AG or Expert.
- DOI cases pending
 - Total number of cases pending with DOI
 - Cases over 1 year old
 - The total number of cases pending that are over 1 year old with DOI.
- DOI cases completed
 - The total number of cases that have been completed by DOI.
- DOI pilot cases initiated
 - The total number of cases that were sent to BRN for investigation, that were outside the CPEI guidelines, and would have normally been sent to DOI for investigation.
- DOI pilot cases pending
 - The number of cases that were referred to DOI and are still pending completion.
- DOI pilot cases closed
 - The number of cases that were referred to DOI and have been completed.

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.

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 A

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

Table B

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.

Table C

This is DCA's reported Performance Measure 4, which is the formal disciplinary cycle time for all DCA entities.

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



Agenda Item 14.3

**Information Only:
Overview of the recruitment and selection process of
the Intervention Evaluation Committee Members and
Nurse Support Group Facilitators**

BRN Board Meeting | November 20-21, 2024

BOARD OF REGISTERED NURSING
Board Meeting
Agenda Item Summary

AGENDA ITEM: 14.3
DATE: November 21, 2024

ACTION REQUESTED: **Information only:** Overview of the recruitment and selection process of the Intervention Evaluation Committee Members and Nurse Support Group Facilitators

REQUESTED BY: Patricia Wynne, Esq., Chairperson

BACKGROUND:

The [Intervention Program](#) is an alternative to discipline for California registered nurses (RNs) whose practice may be impaired by a substance use disorder (SUD) and/or mental health illness. The statutory guidelines are found in Division 2, Chapter 6, Article 3.1, [Business and Professions Code \(BPC\) 2770-2770.14](#). A component of the Intervention Program is the Intervention Evaluation Committee (IEC). [Business and Professions Code \(BPC\) section 2770.2\(b\)](#) identifies the composition of the IEC and is as follows:

1. Three registered nurses, holding active California licenses, who have demonstrated expertise in the field of chemical dependency or psychiatric nursing.
2. One physician, holding an active California license, who specializes in the diagnosis and treatment of addictive diseases or mental illness.
3. One public member who is knowledgeable in the field of chemical dependency or mental illness.

Recruitment for IEC members are done by the Board and per [BPC section 2770.2\(c\)](#) a majority vote of the Board is required for an appointment to an IEC. An [overview](#) of the IEC and their role in the Intervention Program is available on the Board's website. A candidate for an IEC member must submit an [application](#) and a curriculum vitae and/or resume. The current process is an application is reviewed by Board staff and if minimum qualifications are met and there is an IEC vacancy the package is presented to the Board for review and consideration. The new process discussed in Agenda Item 6.2, if approved, will allow for the participation in interviews of potential IEC members by the new Board subcommittee.

Nurse Support Group

Another component of the Intervention Program is nurse support group (NSG). Outlined in [BPC section 315](#) are the [Uniform Standards](#) that are used by healing arts boards for licensees with substance use disorders and/or mental health issues. Specifically, Uniform Standard Number 5, Group Meeting Facilitator Qualifications, and Requirements states the following:

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.

Nurse Support Group Facilitators

Additionally, Uniform Standard 13(b), Group Meeting Facilitators, delineates the qualifications and requirements which are applied to the Intervention Program Nurse Support Group Facilitators (NSGF) for the Board of Registered Nursing, which states:

A group meeting facilitator for any support group meeting:

1. must have a minimum of three (3) years' experience in the treatment and rehabilitation of substance abuse;
2. must be licensed or certified by the state or other nationally certified organization;
3. must not have a financial relationship, personal relationship, or business relationship with the licensee within the last year;
4. shall report any unexcused absence within 24 hours to the board, and,
5. 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.

Additional [NSG and NSGF information](#) is located on the Board's website, including the current [list](#) of NSG meetings with dates, times, and names of the NSGF. The [NSGF application](#) is available on the Board's website.

The current contract with the third-party recovery vendor, Maximus, requires the vendor to participate in the interview process for NSGFs as directed by the Board. Additionally, Maximus is to monitor the number of participants assigned to a nurse support group and adjust as appropriate, perform annual unannounced visits to the nurse support group meetings and recruit and manage the NSGFs.

RESOURCES:

The IEC member, NSGF and Expert Practice Consultant [job announcements](#) are posted on the Board's website.

NEXT STEPS:

FISCAL IMPACT, IF ANY: None

PERSON(S) TO CONTACT: Shannon Johnson
Enforcement Division Chief
California Board of Registered Nursing
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Agenda Item 14.4

Discussion and Possible Action: Appointment of Intervention Evaluation Committee (IEC) members

BRN Board Meeting | November 20-21, 2024

BOARD OF REGISTERED NURSING
Agenda Item Summary

AGENDA ITEM: 14.4
DATE: November 21, 2024

ACTION REQUESTED: Discussion and possible action regarding appointment 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.

APPOINTMENTS:

If approved, all vacancies will be filled.

Name	Member Type	IEC	Appointment Type	Term Expiration
Eriam Nnamaliri, RN	Nurse	1	New	11/30/2028
Osazuwa Omede, PsyD.	Public	3	New	11/30/2028
Jennifer Pursley, RN	Nurse	7	New	11/30/2028
Liberty Macias, RN	Nurse	10	New	11/30/2028
Lori Berkemer, RN	Nurse	10	New	11/30/2028
Salma Khan, MD	Physician	11	Reappointment	06/30/2028

NEXT STEPS: Continue recruitment efforts

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