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## Senate Commerce and Labor Committee

April 2, 2003

### Testimony by Debra Scott, MS, RN, Executive Director Nevada State Board of Nursing

Chairman Townsend and members of the committee, thank you for the opportunity to testify regarding Senate Bill 364. Section 5c of SB364 requires a consent agreement to be a public record.

The Nevada State Board of Nursing's Alternative Program for Chemically Dependent Nurses is our nonpublic program for nurses who voluntarily surrender their nursing licenses after self-reporting misconduct based on their chemical dependency issues. The nursing profession's position in the mid-eighties changed from one of punishing the nurse with a diagnosis of chemical dependency to one of supporting those individuals who were willing to temporarily surrender their licenses, complete an intensive chemical dependency treatment program, and, after beginning to work an individual 12-step recovery plan, return to practice while being closely monitored. More than 38 states have some form of nondisciplinary program to support nurses in recovery.

Our program currently monitors approximately 35 individuals who have met very stringent requirements. The program is available only if the nurse self reports her/his misconduct related to chemical dependency, has never been in another nondisciplinary monitoring program in this or any other state, and is willing to sign a set of two agreements with the Board. These agreements are a Contract for Temporary Voluntary Surrender of License and a five-year Agreement for Probation (Nondisciplinary). The agreements are listed on our Board agenda and are formally accepted by the Board, but are not reported with our disciplinary actions. The agreements are not necessarily confidential, but are "non-public." This means that the Board staff work very closely with treatment providers, potential employers, and the individual nurses to support an environment for safe practice.

Nurses have been hesitant to report their chemical dependency to regulatory boards in the past. This program encourages nurses to accept responsibility for their behavior related to their chemical dependency by being willing to seek treatment and be monitored for an extended period of time. Without the chance to be involved in a nondisciplinary program, the nurse may never seek the support of colleagues in receiving the treatment needed to remain a productive and safe member of the profession. Our program works. We have enjoyed an extremely low average relapse rate of about 5 %, as compared to an average relapse rate of about 50% in the general population.

We respectfully request the committee amend SB364 to allow our board to protect the citizens of Nevada by continuing to administer this program in support of Nevada nurses.

