and law, which in turn led to remarkable social, economic, and political reform; however, it was the confluence of these factors that led to the modernization of the professions and the idea of professional regulation and licensing (Alexander, 2017).

Regulation implies government intervention to accomplish an end beneficial to its citizens. Because the United States Constitution does not include provisions to regulate nursing, the responsibility falls to the states. Under a state's police powers, it

practical/vocational nurses (LPN/VNs), advanced practice nurses,

- verification of no report of actions taken or initiated against a professional license, registration, or certification
- attestation of no report of acts or omissions that are grounds for disciplinary action as specified in the NPA.

The majority of jurisdictions include criminal background checks as an additional requirement for licensure (NCSBN, 2012c).

Further requirements are also included in NPAs for licensure by examination of internationally educated applicants, licensure by endorsement, as well as licensure renewals, reactivation, and continuing education. Endorsement is an approval process for a nurse who is licensed in another state. Obtaining licensure by endorsement often includes prelicensure requirements and verification of licensure status from the state where the nurse obtained licensure by examination (NCSBN, 2012a).

Although statutory language varies from state to state regarding the licensure of APRNs, most states recognize clinical nurse specialist, nurse midwife, nurse practitioner, and registered nurse anesthetist as APRN roles and require certification by a national nurse certification organization. Education and specific scope of practice for APRNs varies from state to state.

Grounds for Disciplinary Action, Violations, Statute of Limitations, Possible Remedies, and Reciprocal Discipline

The majority of nurses are competent and caring individuals who provide a satisfactory level of care; however, when a nurse deviates from the standard of care or commits an error, a complaint may be filed with the BON. The BON, through its statutory authority specified in the NPA, is responsible for reviewing and acting on complaints. A BON can take formal action only if it finds sufficient basis that the nurse violated the NPA or regulations. Each case varies and needs to be considered on its own merits (Brous, 2012, pp. 510–511; NCSBN, 2012d). Since BONs take disciplinary action in order to protect the public by ensuring that only properly qualified and ethical individuals practice nursing, this public safety objective is not time-limited. Therefore, in the absence of a specific statute to the contrary, statutes of limitations are inapplicable to BON license revocation and other disciplinary proceedings (NCSBN, 2017b).

For an overview of the disciplinary process from receipt of complaint to resolution, see Figure 1. Complaints about nursing care are often grouped into the following categories:

- Practice-related: breakdowns or errors during aspects of the nursing process (Wade, 2015)
- Drug-related: mishandling, misappropriation, or misuse of controlled substances
- Boundary violations: nontherapeutic relationships formed

For all other grounds, the final decision reached by the BON is based on the findings of an investigation and the results of the board proceedings. The language used to describe the types of actions available to BONs varies according to each state's statute.

Although terminology may differ, board action affects the nurse's licensure status and ability to practice nursing in the state taking action. BON actions may include the following:

- fine or civil penalty
- referral to an alternative-to-discipline program for practice monitoring and recovery support for those with drug- or alcohol-dependence or some other mental or physical condition
- public reprimand or censure for minor violation of the NPA, often with no restrictions on license
- imposition of requirements for monitoring, remediation, education, or other provision tailored to the particular situation
- limitation or restriction of one or more aspects of practice, such as probation with limits on role, setting, activities, or hours worked
- separation from practice for a period (suspension) or loss of license (revocation or voluntary surrender)
- other state-specific remedies (NCSBN, 2012g).

An attempt to evade disciplinary action merely by fleeing the state does not protect the public. Therefore, a state board of nursing is well within its legitimate authority to take action against a licensee on the basis of another state's disciplinary action that implicates the individual's ongoing ability and likelihood to practice professionally and safely. This reciprocal or retained jurisdiction action serves to assist the BON to fulfill the legislature's charge to protect the public (NCSBN, 2017b).

Public Access to Licensure Status and Board Actions

Licensure status and BON actions are public information, and BONs use a variety of methods to communicate this information, including newsletters, database and websites. Licensure information and board action for most states are also available to the public via Nursys QuickConfirm License Verification[®] (Nursys QuickConfirm[®], 2017). Any individual or entity may use this service free of charge.

Federal law requires that state adverse actions taken against a health care professional's license be reported to the federal data

References

- Alexander, M. (2017). The evolution of professional regulation. *Journal of Nursing Regulation, 8*(2), 3.
- Benner, P. E., Malloch, K., & Sheets, V. (Eds.). (2010). Nursing pathways for patient safety. Chicago, IL: National Council of State Boards of Nursing.
- Brent, N. J. (2012). *Protect yourself: Know your nurse practice act* [Online CE]. Retrieved from https://www.nurse.com/ce/protect-yourself-know-your-nurse-practice-act
- Brous, E. (2012). Nursing licensure and regulation. In D. J. Mason, J. K. Leavitt, & M. W. Chaffee (Eds.). *Policy & politics in nursing and health care* (6th ed.). St. Louis, MO: Saunders.
- Guido, G. W. (2010). *Legal & ethical issues in nursing* (5th ed.). Boston, MA: Pearson.
- Hamric, A. B, Spross, J. A., & Hanson, C. M. (2005). Advanced practice nursing: An integrative approach. St. Louis, MO: Elsevier Saunders.
- Holm, M., & Emrich, L. (2015). Justice with dignity alternative to discipline for nurses with practice errors. Retrieved from https://www.ncsbn.org/2015_ DCM_Holm_Emrich.pdf
- Howard, P. K. (2011). *The death of common sense: How law is suffocating America*. New York, NY: Random House.
- Mathes, M., & Reifsnyder, J. (2014). *Nurse's law: Legal questions & answers for the practicing nurse.* Indianapolis, IN: Sigma Theta Tau International, Center for Nursing.
- National Council of State Boards of Nursing. (2009). *Professional boundaries: A nurse's guide to the importance of appropriate professional boundaries* [Brochure]. Chicago, IL: Author.
- National Council of State Boards of Nursing. (2010). *Nurse practice act— Arkansas v4* [Online course]. Retrieved from http://learningext.com/
 hives/c3ce5f555a/summary
- National Council of State Boards of Nursing. (2011a). What you need to know about nursing licensure and bo313 Tw -2.0(l)alf(.)[TJ-2.041 -1.444 Td[(N)04 Td[(N)0.3 n)0.5w[d5,)-9 ()]TJ-6.4ounnure]. Chicago, L: Arthor.