



Minnesota Board of Nursing: Complaint Resolution Process

Update to 2015 Evaluation Report

March 2016

Problems Identified

- **Too Long to Resolve Serious Complaints.** The Minnesota Board of Nursing (MBN) has rarely issued temporary suspensions to quickly remove nurses from practice when public safety is at risk. It issued only 11 temporary suspensions in fiscal years 2009 through 2014—with only about half issued within four months of MBN receiving a complaint.
- **Limited Authority.** Statutes limit staff’s ability to routinely conduct interviews with nurses or others before holding formal “discipline conferences,” leading to delays in building sound cases. At times, MBN has processed complaints against nurses who enrolled themselves in the Health Professionals Services Program (HPSP), an alternative-to-discipline monitoring program, without the board’s knowledge, also limiting staff’s ability to thoroughly investigate complaints.
- **Process Not Always Fair.** State law is unduly harsh in making almost all board actions against individual nurses public information indefinitely. Also, MBN has been, at times, inconsistent in how it has handled low-level practice complaints against nurses. Finally, state law does not permit the board to grant emeritus status to some nurses who want to voluntarily give up their right to practice but retain their license and title.

Changes Implemented

- **More Temporary Suspensions.** MBN has significantly increased its use of temporary suspensions and supports passage of legislation in the 2016 session to clarify this authority.
- **Developing Sanction Guidelines for Different Types of Violations.** To help ensure more timely and consistent decisions, MBN is developing guidelines for reviewing complaints involving nurses with criminal convictions.

Actions Needed

- **Give Staff Greater Authority.** The Legislature should expand MBN staff’s authority to investigate complaints and permit the board to issue emeritus status to some retiring nurses. The board will be seeking such legislation as part of its 2017 legislative request. However, MBN has yet to implement OLA’s recommendation to give staff more authority to propose settlements in some cases instead of using discipline conferences.
- **Work More Closely with HPSP.** Although MBN has adopted a policy allowing HPSP to continue monitoring nurses who have not complied with HPSP requirements until MBN can take action, the two agencies still need to develop joint policies and procedures to identify when and how nurses participating in HPSP should be reported to the board.