

# Filing a Complaint

## **Frequently Asked Questions**

#### 1. Do I have to be a patient to file a complaint?

No, in addition to patients, complainants could be patient family members, employers, other nurses, co-workers or other professionals. Any person who has knowledge of conduct by a licensed nurse that may violate a nursing law or rule or related state or federal law may report the alleged violation to the State Board of Nursing where the situation occurred.

#### 2. Do I have to report?

It depends on your state and the situation. Some states have mandatory reporting requirements for certain professionals or agencies. <u>Contact the State Board of Nursing</u> for more information about any reporting obligations in your state.

# 3. How do I file a complaint?

<u>Check your Board of Nursing</u> Web Site or call the Board for information about how to file a complaint in your state.

## 4. What part will I play, if any, after filing a complaint?

You may be contacted by Board staff, investigator and/or attorney to be interviewed or to provide additional information. If the case proceeds to a hearing, you may be called as a witness for the state.

# 5. How long will it take to resolve a complaint?

The processing of complaints, including investigation and proceedings, may be lengthy. Depending on the nature of the case and the Board's caseload, the time could range from a few weeks to a few months to over one year.

#### 6. Why would a case take so long?

The length of time required to resolve a complaint depends on the seriousness, complexity, the level of investigation required and whether it goes through informal or formal proceedings. Each case is unique and needs to be considered on its own merits.

#### 7. Is there a time limit for filing a complaint?

Most states do not have a time limit for filing complaints. However, complaints that involve situations distant in time may be given less priority.

#### 8. Will my complaint remain confidential?

The states vary as to requirements for confidentiality. Some states do not reveal the source of a complaint (although it may become obvious during hearing testimony). Other states are required to share the complaint with the subject nurse. Other states have different guidelines. If you have questions, contact your State Board of Nursing.

# 9. Can I be sued for making the complaint?

In most states, anyone who files a report in good faith is immune for doing so, regardless of whether you are a patient, family member or other health care provider.

# 10. What kinds of issues are not within the authority of the Board?

Bedside manners, rudeness, personality conflicts and dress code concerns do not typically rise to the level of Board action. Matters that are clearly employment issues or fees issues (unless fraud is being alleged) are not within the Board's authority.

# 11. If the Board determines the nurse violated the law in my case, will I be compensated for any loss or suffering?

Boards of Nursing do not have jurisdiction in matters of malpractice compensation. Although a few Boards may be authorized to require a nurse to provide restitution to patients harmed by a nurse's practice or behavior, typically that kind of compensation is pursued in civil court.

#### 12. Should I file a malpractice suit or just report a nurse?

That is a decision the patient must make. You may seek legal advice regarding your situation as well as file a report with the disciplining authority simultaneously.

#### 13. Will the nurse lose her/his license?

Boards of Nursing are charged to protect the public. Their challenge is to weigh that responsibility with the right of an individual to practice a chosen profession. A nurse may be separated from practice if the Board determines that this is necessary to protect the public. However Boards utilize a variety of actions, and base the action chosen on the seriousness of the violation and the evidence that substantiates the violation.

#### 14. What is an Alternative Program?

Many states have developed Alternative to Discipline Programs for nurses with drug or alcohol dependency who also meets specific requirements. These programs promote early intervention, support of treatment and recovery, and most importantly practice monitoring when a nurse returns to work.