**Complaint Procedures**

**If You Need to File a Complaint**

 **WHAT:** Filing a Complaint against a Medication Technician (MT), Certified Nursing Assistant (CNA), Licensed Practical Nurse (LPN), Registered Nurse (RN), or Advanced Practice Registered Nurse (APRN).

A license or certificate exists even if it is inactive, non-renewed or expired.

**WHO:** Anyone may file a complaint

Please see the Nurse Practice Act §8-505.Report of certain actions or conditions.

1. Required: immunity from civil liability.-Except as provided in subsection (b) of this section, the following applies:
2. If a nursing home administrator, registered nurse, licensed practical nurse, or certified nursing assistant knows of an action or condition that might be grounds for action under §8-316 or Subtitle 6A of this title, the nursing administrator, registered nurse, licensed practical nurse, or certified nursing assistant **shall report** (emphasis added) the action or condition to the Board;
3. An individual shall have the immunity from liability described under § 5-709 of the Courts and Judicial Proceedings Article for making a report as required under this subsection.

and

Nurse Practice Act §8-207. Good faith exemption from civil liability.

 A person shall have the immunity from liability described under § 5-708 of the Courts and Judicial Proceedings Article for giving information to the Board or otherwise participating in its activities.

**WHEN:** As soon as possible after the incident.

**WHERE:**Complaint form provided on this website. **(Lynn please inset hyperlink to the complaint form)** Submit to Maryland Board of Nursing.

**WHY:**To ensure that the public is protected from incompetent or impaired nurses.

* Please complete the form(s), providing as much information as possible.  If a question or section does not apply to this complaint, indicate "N/A"
* Provide a detailed description of the incident: dates, patient identification, specific nurse behavior, action, or inaction.  Attach documentation supporting your allegation (i.e. copies of patient records, Medication Administration Records (MARs) and controlled substance records, name and/or statements of witnesses and/or persons involved, confession, applicable policies and procedures, employee handbook, staffing schedule, patient assignment, incident reports, termination notice, names and address of all witnesses).  Other forms of evidence may include pictures, copies of text messages or social network pages.
* **The Maryland Board of Nursing does not accept anonymous complaints.**
* Once the complaint is received at the Board office, an investigator will be assigned. You will be notified when the Board makes a final decision. This may take up to a year or longer.