

Jonathan Rosenfeld's Nursing Homes Abuse Blog

Wait A While & Bad Nurses May Just Migrate To Your State To Care For Your Loved One

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Loopholes in a reciprocity program amongst 24 states that allows nurses from one state to transfer to another may be putting a tremendous number of nursing home and hospital patients at risk for receiving poor care-- or perhaps more accurately downright dangerous care.

A recent USA Today [article](#) "Bad nurses able to keep working in other states" highlights the problems associated with the lack of a national database to keep track of nurses with blemishes on their records. The article chronicles how some nurses legally obtain work in one state when they may have been disciplined for poor care in another.

The 24-state pact was originally intended help under-utilized areas of the county get the nurses when they need them--- without the nurses having to obtain licensing from the state board. However, it seems like the dangers associated with states almost blindly allowing nurses to transfer into their state are alarming.

In particular, there are multiple episodes where nurses have admitted and/or been disciplined in the following circumstances:

- Stealing patients medicine
- Medication errors
- Providing negligent medical care
- Neglected patient needs
- Physically abusing patients
- Failing to register as a convicted sex offender

Jonathan Rosenfeld represents victims of nursing home abuse and neglect throughout the country. For more information please visit Nursing Homes Abuse Blog (www.nursinghomesabuseblog.com), Bed Sore FAQ (www.bedsorefaq.com) or call Jonathan directly at (888) 424-5757.

Certainly, after reading this article, you will likely be left with a similar impression to myself that there needs to be a national tracking system for nurses and all health professionals who may have reciprocity rights that allow them to transfer from one state to another.

However, until such a system is put into place, I firmly believe it is the responsibility of individual facilities (and staffing agencies) to provide qualified staff at their facilities to assure proper care and patient safety. In my opinion, these responsibilities are non-delegable and when a facility fails to uphold their end of the bargain and a patient suffers harm they certainly expose themselves to civil responsibility.

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