



## OHIO BOARD OF NURSING

### MINUTES OF MEETING

#### REGULAR MEETING OF THE BOARD JANUARY 24-25, 2018

The regular meeting of the Ohio Board of Nursing (Board) was held on January 24-25, 2018, at the Board office located at 17 South High Street, Suite 660, Columbus, Ohio 43215.

On Wednesday, January 24, 2018, at 8:30 a.m., President Patricia Sharpnack called the Board meeting to order, welcomed students and guests, and requested that Board Members introduce themselves. On Thursday, January 25, 2018, at 9:00 a.m., President Patricia Sharpnack called the Board meeting to order. J. Jane McFee, serving as Acting Vice-President, read the Board mission each day.

Patricia Sharpnack, RN, President  
Brenda Boggs, LPN, Vice-President (Absent Wednesday and Thursday)  
Sandra Ranck, RN  
Janet Arwood, LPN (Absent Wednesday and Thursday)  
Matthew Carle, Consumer Member  
Barbara Douglas, RN, APRN-CRNA  
Nancy Fellows, RN  
Erin Keels, RN, APRN-CNP  
Lisa Klenke, RN  
Lauralee Krabill, RN  
Maryam Lyon, RN (Absent Wednesday and Thursday)  
J. Jane McFee, LPN  
Joanna Ridgeway, LPN

Unless noted in these minutes as exhibits, all written reports submitted to the Board are maintained in the Board office according to the Board record retention schedule.

#### **ADMINISTRATIVE MATTERS**

##### **SPECIAL PRESENTATION - GUEST SPEAKER**

On Wednesday, at 8:35 a.m., President Sharpnack introduced Cathy Costello, JD, CPHIMS, Director, CliniSyncPLUS Services. Ms. Costello provided a presentation to the Board on Ohio Health Information Partnership and responded to Board member questions.

##### **Board Meeting Overview**

On Wednesday, at 1:00 p.m., the following addressed the Board: Attorney James

McGovern, Jeanne McGinnis, R.N., and AAG James Wakley; Irene Patkowski, R.N., *pro se*, and AAG Melissa Wilburn; Attorney Elizabeth Collis, Jennifer Evans, R.N., and AAG James Wakley; Attorney Elizabeth Collis, Benjamin Clement, R.N., and AAG Charissa Payer; Attorney James McGovern represented his client, Linette Jones, R.N., who was not present, and AAG James Wakley; Attorney Jeffrey Jurca, Sherri Donchess, R.N., and AAG James Wakley. On Thursday, Open Forum was held at 10:30 a.m., and having no Open Forum speakers, Executive Session was at 10:30 a.m.

### **Approval of Minutes of the November 2017 Meeting**

**Action:** It was moved by Lauralee Krabill, seconded by Lisa Klenke, that the Board approve the minutes from the November 2017 Board meeting, as submitted. Motion adopted by a majority vote of the Board members present with Nancy Fellows abstaining.

### **Executive Director Report**

Director Betsy Houchen highlighted the following from the Executive Director Report:

- The Board welcomed Sherelle Dulaney, a paralegal in Compliance, Melissa Staggs, Compliance Agent; and Debbie McKnight, Certificate/Licensure Examiner in the Licensure Unit.
- JCARR met in December and “cleared” the acute care pain, Rule 4723-9-10, OAC. The 30 MED exception for APRNs became effective January 1, 2018. On January 2, 2018, the staff posted to the website an overview of provisions of the rule relating to prescribing for acute pain, and “Issuing a Valid Prescription: What Every Prescriber Needs to Know,” published by the Pharmacy Board.
- The 2017 RN and APRN Nursing Workforce Data Reports are completed and posted on the Board website, along with the raw data.
- The Board is pleased that the 2017 renewal and peak licensure season proceeded smoothly. The COA renewal/APRN license issuance process ended December 31, 2017 with 14,829 (91%) completing the process to become licensed. There was one problematic issue caused by an erroneous auto-generated message sent on January 1, 2018 that caused confusion for some APRN licensees that was resolved later that day.

### **Fiscal Report**

Kathy King, Fiscal Officer, presented the Fiscal Report for the second quarter of fiscal year 2018 and the Legislative Service Commission Fiscal Year 2017 Report for Occupational Licensing and Regulatory Boards Report. K. King reported that with the change in the renewal end date, all renewal revenues are now generated in one fiscal year resulting in a reporting of surplus revenue for the larger RN renewal and less revenue reported for LPN renewal. This does not

impact the operational functioning of the Board and there is no deficit in the Board's budget. The Board manages its budget within the appropriations allotted through the biennial budgeting process.

### **Legislative Report**

Tom Dilling presented the Legislative Report and summarized the status of the legislation highlighted in the written report.

### **EXECUTIVE SESSION**

On Thursday, January 24, 2018:

**Action:** It was moved by J. Jane McFee, seconded by Barbara Douglas that the Board go into Executive Session to discuss pending or imminent court action with legal counsel, and to consider the appointment, employment, dismissal, discipline, promotion, demotion, or compensation of a public employee or official. A roll call vote was taken and the Board unanimously voted to go into Executive Session, with the following members present and voting: J. McFee, L. Krabill, S. Ranck, E. Keels, J. Ridgeway, N. Fellows, B. Douglas, L. Klenke, M. Carle, P. Sharpnack. The Board entered Executive Session at 10:30 a.m. and reported out of Executive Session at 11:54 a.m.

### **APPROVALS**

#### **New Nursing Education Program**

##### Wittenberg University

**Action:** It was moved by J. Jane McFee, seconded by Sandra Ranck, that the Board grant Conditional approval, in accordance with Rule 4723-5-08, OAC, to Wittenberg University to operate a registered nursing program. I further move that the Program submit progress reports to the Board on or before September 21, 2018, February 21, 2019, September 23, 2019, September 23, 2020, September 22, 2021 and March 23, 2022. Motion adopted by a majority vote of the Board members present with Lauralee Krabill and Patricia Sharpnack abstaining.

#### **Nursing Education Programs – Approval Status**

##### Acadia Career Institute Registered Nursing Program

**Action:** It was moved by Sandra Ranck, seconded by Matthew Carle, that the Board continue Full approval, which expires in March 2019, for Acadia Career Institute Registered Nursing Program, in accordance with Rule 4723-5-04, OAC. Motion adopted by a majority vote of the Board members present with Lauralee Krabill and Patricia Sharpnack abstaining.

##### Athena Career Academy LPN to RN Program

**Action:** It was moved by Erin Keels, seconded by Matthew Carle, that the Board grant Full approval, in accordance with Rule 4723-5-04, OAC, to Athena Career Academy LPN to RN Program for a period of five years effective January 24, 2018. Motion adopted by a majority vote of the Board members present with Lauralee Krabill and Patricia Sharpnack abstaining.

Auburn Practical Nursing Program

**Action:** It was moved by Nancy Fellows, seconded by Lisa Klenke, that the Board continue Full approval, which expires in July 2021, for Auburn Practical Nursing Program, in accordance with Rule 4723-5-04, OAC. Motion adopted by a majority vote of the Board members present with Lauralee Krabill, Sandra Ranck and Patricia Sharpnack abstaining.

Case Western Reserve University Frances Payne Bolton School of Nursing

**Action:** It was moved by Lisa Klenke, seconded by J. Jane McFee, that the Board grant Full approval, in accordance with Rule 4723-5-04, OAC, to Case Western Reserve University Frances Payne Bolton School of Nursing for a period of five years effective January 24, 2018. Motion adopted by a majority vote of the Board members present with Lauralee Krabill and Patricia Sharpnack abstaining.

Graduate Entry Nursing Program Frances Payne Bolton School of Nursing Case Western Reserve University

**Action:** It was moved by Matthew Carle, seconded by Erin Keels, that the Board grant Full approval, in accordance with Rule 4723-5-04, OAC, to Graduate Entry Nursing Program Frances Payne Bolton School of Nursing Case Western Reserve University for a period of five years effective January 24, 2018. Motion adopted by a majority vote of the Board members present with Lauralee Krabill and Patricia Sharpnack abstaining.

Hocking College Associate of Applied Science in Nursing

**Action:** It was moved by J. Jane McFee, seconded by Nancy Fellows, that the Board grant Full approval, in accordance with Rule 4723-5-04, OAC, to Hocking College Associate of Applied Science in Nursing for a period of two years effective January 24, 2018. It was further moved that the Program submit progress reports to the Board on or before March 15, 2018, and September 14, 2018. Motion adopted by a majority vote of the Board members present with Lauralee Krabill and Patricia Sharpnack abstaining.

Hocking College Practical Nursing Program

**Action:** It was moved by Sandra Ranck, seconded by Joanna Ridgeway, that after consideration of the survey visit report, and noting that the Program did not timely respond to the survey report, the Board place Hocking College Practical Nursing Program on Provisional approval, effective January 24, 2018 to January 31, 2020, in accordance with Section 4723.06(A)(7), ORC, based on the Program's failure to meet and maintain the minimum standards for education programs established in Rules 4723-5-06(C); 4723-5-12(C); 4723-5-14(C)(3) and (D)(3); 4723-5-15(A)(5); 4723-5-19(A)(1), (A)(2), and (A)(3); and 4723-5-21(D)(2),(D)(3), and (E)(2), OAC. It was further moved that the Program submit progress reports to the Board on or before March 15, 2018, September 14, 2018, and July 18, 2019. Motion adopted by a majority vote of the Board members present with Lauralee Krabill and Patricia Sharpnack abstaining.

Ohio University Associate Degree Nursing Program

**Action:** It was moved by Erin Keels, seconded by J. Jane McFee, that the Board continue Full approval, which expires in November 2021, for Ohio University Associate Degree Nursing Program, in accordance with Rule 4723-5-04, OAC. Motion adopted by a majority vote of the Board members present with Lauralee Krabill and Patricia Sharpnack abstaining.

The Ohio State University College of Nursing

**Action:** It was moved by Nancy Fellows, seconded by Lisa Klenke, that the Board grant Full approval, in accordance with Rule 4723-5-04, OAC, to The Ohio State University College of Nursing for a period of five years effective January 24, 2018. It was further moved that the Program submit a progress report to the Board on or before March 15, 2018. Motion adopted by a majority vote of the Board members present with Erin Keels, Lauralee Krabill, Joanna Ridgeway and Patricia Sharpnack abstaining.

Upper Valley Career Center Practical Nursing Program

**Action:** It was moved by Lisa Klenke, seconded by Nancy Fellows, that the Board grant Full approval in accordance with Rule 4723-5-04, OAC, to Upper Valley Career Center Practical Nursing Program for a period of five years effective January 24, 2018. Motion adopted by a majority vote of the Board members present with Lauralee Krabill and Patricia Sharpnack abstaining.

Wayne County Schools Career Center High School Practical Nursing Program

**Action:** It was moved by Matthew Carle, seconded by Lisa Klenke, that after consideration of the survey visit report and the Program's response to the report, the Board place Wayne County Schools Career Center High School Practical Nursing Program on Provisional approval, effective January 24, 2018 to January 31, 2020, in accordance with Section 4723.06(A)(7), ORC, based on the Program's failure to meet and maintain the minimum standards for education programs established in Rules 4723-5-06(C); 4723-5-12(A)(5); and 4723-5-14(C) and (D), OAC. It was further moved that the Program submit progress reports to the Board on or before March 15, 2018, September 14, 2018, and July 18, 2019. Motion adopted by a majority vote of the Board members present with Lauralee Krabill and Patricia Sharpnack abstaining.

The University of Akron School of Nursing BSN Program

**Action:** It was moved by J. Jane McFee, seconded by Matthew Carle, that the Board grant Full approval in accordance with Rule 4723-5-04, OAC, to The University of Akron School of Nursing BSN Program for a period of five years effective January 24, 2018. It was further moved that the Program submit progress reports to the Board on or before March 15, 2018 and September 14, 2018. Motion adopted by a majority vote of the Board members present with Lauralee Krabill and Patricia Sharpnack abstaining.

Eastern Gateway Community College Associate Degree of Nursing Program

**Action:** It was moved by Sandra Ranck, seconded by Erin Keels, that the Board continue Full approval, which expires in July 2019, for Eastern Gateway Community College Associate Degree of Nursing Program, in accordance with Rule 4723-5-04, OAC. It was further moved that the Program submit a progress report to the Board on or before March 30, 2018. Motion adopted by a majority vote of the Board members present with Lauralee Krabill and Patricia Sharpnack abstaining.

**Nurse Education Programs Program Requests**

Columbiana County Career & Technical Center LPN-RN Diploma Nursing Program

**Action:** It was moved by Erin Keels, seconded by Matthew Carle, that the Board approve, in accordance with Rule 4723-5-08, OAC, the change in implementation date of the Columbiana County Career & Technical Center LPN-RN Diploma Nursing Program to April 9, 2018. It was further moved that the Program submit progress reports to the Board on or before August 9, 2018, December 10, 2018, and April 9, 2019. Motion adopted by a majority vote of the Board members present with Lauralee Krabill and Patricia Sharpnack abstaining.

Ohio Technical Center Practical Nursing Program

**Action:** It was moved by Joanna Ridgeway, seconded by J. Jane McFee, that the Board approve, in accordance with Rule 4723-5-08, OAC, the change in implementation date of Ohio Technical Center Practical Nursing Program to April 9, 2018. It was further moved that the Program submit progress reports to the Board on or before July 10, 2018, October 10, 2018, and January 10, 2019. Motion adopted by a majority vote of the Board members present with Lauralee Krabill and Patricia Sharpnack abstaining.

**Training Programs**

Salida Woods Assisted Living

**Action:** It was moved by Nancy Fellows, seconded by Joanna Ridgeway, that the Board reapprove, in accordance with Rule 4723-27-07, OAC, Salida Woods Assisted Living as a medication aide training program, for a period of two years effective January 24, 2018. Motion adopted by a majority vote of the Board members present with Sandra Ranck abstaining.

Mercy College of Ohio Community Health Worker Program

**Action:** It was moved by Lisa Klenke, seconded by Nancy Fellows, that the Board reapprove, in accordance with Rule 4723-26-14(B), OAC, Mercy College of Ohio Community Health Worker Program for a period of two years effective January 24, 2018. Motion adopted by unanimous vote of the Board members present.

North Central State College Community Health Worker Program

**Action:** It was moved by Matthew Carle, seconded by Lisa Klenke, that the Board reapprove, in accordance with Rule 4723-26-14(B), OAC, North Central

State College Community Health Worker Program, for a period of two years effective January 24, 2018. Motion adopted by unanimous vote of the Board members present.

ABBE Education Center & Staffing, LLC

**Action:** It was moved by Patricia Sharpnack, seconded by Lauralee Krabill, that the Board approve, in accordance with Rule 4723-27-07, OAC, ABBE Education Center & Staffing, LLC as a medication aide training program for a period of two years effective January 24, 2018. Motion adopted by unanimous vote of the Board members present.

**Retroactive Approvals for Licensees and Certificate Holders**

**Action:** It was moved by J. Jane McFee, seconded by Sandra Ranck, that the Board retroactively ratify, as submitted, the licenses and certificates, including temporary work permits, initially issued by the Board November 1, 2017 through December 31, 2017 to the following: registered nurses; licensed practical nurses; APRN-CRNAs; APRN-CNPs; APRN-CNSs; APRN-CNMs; Ohio certified dialysis technicians; dialysis technician interns; community health workers; and medication aides, taking into account those licenses and certificates subject to discipline, surrender or non-renewal. Motion adopted by unanimous vote of the Board members present.

**ADJUDICATION AND COMPLIANCE**

On Thursday, January 25, 2018, Patricia Sharpnack requested that each voting Board member verify that they reviewed in depth all materials pertaining to these matters by saying “yes” or “no and that any Board member who did not review the materials abstain from voting on the matters.

**Board Actions**

**NOTICES OF OPPORTUNITY FOR HEARING**

**Action:** It was moved by Patricia Sharpnack, seconded by J. Jane McFee, that the Board issue a Notice of Opportunity for Hearing for violations of Chapter 4723, ORC for the following case(s):

Alnoubani, Muna, R.N. 304829 (CASE #15-3530); Jones, Robert, R.N. 315597 (CASE #17-6471); Barger, Kelly, P.N. 105131 (CASE #16-4492); Weber, Anthony, P.N. 151232 (CASE #17-6260); Thier, Penny, R.N. 178450 (CASE #17-2761); Melley, Charles, P.N. 150579 (CASE #17-2801); Lawhorn, Brandy, P.N. 139972 (CASE #16-7436); Page, Tammy, P.N. 109984 (CASE #17-3391); Fry, Melissa, R.N. 357423 (CASE #17-3599); McCormick, Brendan, R.N. 258409 (CASE #17-6648); Greene, Amanda, R.N. 368825 (CASE #16-3552); Adams, Andrea, P.N. 155482 (CASE #17-6511); Shimandle, Sharon, R.N. 168537, CNS 04347, CRNA 06696 (CASE #16-6514); Steele, Gina, R.N. 425481 (CASE #17-5788); Berry, Michelle, R.N. 334081 (CASE #17-4292); Wears, Tonya, P.N. 108768 (CASE #17-0967); Morgan, Angelina, P.N. 150873 (CASE #17-6686); Kirk, Angel, P.N. 147619 (CASE #17-3482); Walls, Shelia, P.N. 107091 (CASE

#17-4907); Halley, Angel, R.N. 319627 (CASE #17-4581); Wagel, Amber, P.N. 141934 (CASE #17-6670); Gibson, Lori, R.N. 369619 (CASE #16-4073); Chin, Rita, R.N. endorse (CASE #17-5538); Bohme, Melissa, R.N. 227352 (CASE #17-4473); Jones, Leslie, R.N. 366274 (CASE #17-3341); Todd, Tracie, R.N. 424229 (CASE #17-6874); Perakovic, Sherry, R.N. 267740, P.N. 094709 (CASE #17-2778); LaRue, Denise, MAC 000092 (CASE #17-4863); Bish, Lynn, P.N. 105113 (CASE #17-5285); Ricciardo, Heather, R.N. 433249 (CASE #17-7203); Mahilo, Sarah, R.N. 330620 (CASE #17-1155); Puskar, Terrisa, P.N. 119747 (CASE #17-3365); Pernell, Cristy, P.N. NCLEX (CASE #17-4430); Mayer, Samantha, R.N. 400811 (CASE #16-1802); Stone, Kevin, R.N. 356447 (CASE #16-7069); Hobbs, Elizabeth, P.N. 121847 (CASE #17-2828); Shaw, Marlena, P.N. endorse (CASE #17-6496); Haas, Cara, P.N. 122447 (CASE #17-2809); Balog, Maegan, R.N. 391457 (CASE #17-3721); Guenther, Becky, R.N. 270737 (CASE #17-4575); Wright, Krystal, P.N. 155693 (CASE #17-4229); Maynard, Christina, P.N. 146658 (CASE #16-6004); Cvijanovic, Carol, R.N. 241646 (CASE #17-2311); Porta, Carissa, R.N. 227085, CNP 09046 (CASE #17-5038); Napier, Jessica, P.N. 150108 (CASE #18-0159); Bodnar, Mark, R.N. 396018 (CASE #17-4572); McCoy, April, R.N. 355036 (CASE #17-0378); Freshwater, Jacqueline, P.N. NCLEX (CASE #17-5797); Otieno, Susan, P.N. 142877 (CASE #17-4690); Hauser, Jennifer, P.N. 135558 (CASE #17-6702); Pascarella, Leila, R.N. endorse (CASE #17-6001); Collins, Samantha, P.N. 121264 (CASE #17-1163); Price, Tara, P.N. 103887 (CASE #17-6924).

Lauralee Krabill abstained on Shimandle, Sharon, R.N. 168537, CNS 04347, CRNA 06696 (CASE #16-6514). Motion adopted by a majority vote of the Board members present with Sandra Ranck abstaining.

#### **IMMEDIATE SUSPENSIONS AND NOTICE OF OPPORTUNITY FOR HEARING**

**Action:** It was moved by J. Jane McFee, seconded by Patricia Sharpnack, that the Board issue a Notice of Immediate Suspension and Opportunity for Hearing for violations of Chapter 4723, ORC for the following case:

Mearns, Alice, R.N. 384325 (CASE #17-5145).

Motion adopted by a majority vote of the Board members present with Sandra Ranck abstaining.

#### **AUTOMATIC SUSPENSIONS AND NOTICES OF OPPORTUNITY FOR HEARING**

**Action:** It was moved by Lauralee Krabill, seconded by Matthew Carle, that the Board issue a Notice of Automatic Suspension and Opportunity for Hearing for violations of Chapter 4723, ORC for the following case(s):

Adkins, Rebecca, R.N. 282637 (CASE #17-6617); Hutchinson, Marian, P.N. 095939 (CASE #17-6390); Willis, Charmaine, P.N. 154883 (CASE #17-6719); Tighe, Shannon, R.N. 411466 (CASE #17-3949); Plaster, Christine, P.N. 113853

(CASE #17-6366); Frazier, Crystal, P.N. 097744 (CASE #17-6966); Marston, Angela, P.N. 143163 (CASE #17-6598); George, Taaffe, P.N. 137474 (CASE #17-6177); Donnally, Anna, P.N. 146170 (CASE #17-6962); Weber, Carly, R.N. 402330 (CASE #17-6616); Rutherford, Christina, R.N. 323227 (CASE #17-6876); Dizon, Rolando, P.N. 162034 (CASE #17-6172); Stack, Kathryn, R.N. 383195 (CASE #17-5508); Whetsel, Shannon, P.N. 117072 (CASE #17-6751); Payne, Linda, R.N. 280722 (CASE #17-7197); Smith, Tiffany, P.N. 127805 (CASE #17-7262); Whitney, Danielle, R.N. 409744, P.N. 122878 (CASE #17-6650); Suiter, Julie, P.N. 082761 (CASE #17-4427); Curry, Kathy, R.N. 378255 (CASE #17-7273); Capell, Wilburn, DTI 005258 (CASE #17-7127); Coppess, Jennifer, R.N. 410319 (CASE #17-6620); Paul, Melinda, P.N. 102957 (CASE #17-7076); Mancini, Rita, R.N. 414724 (CASE #17-7484); Kolanko, Lindsay, R.N. 333176 (CASE #18-0121); Lang, Alicia, P.N. 113701 (CASE #17-7161); Leister, Laretta, R.N. 349835 (CASE #18-0030).

Motion adopted by a majority vote of the Board members present with Sandra Ranck abstaining.

#### **AUTOMATIC SUSPENSION AND NOTICE OF OPPORTUNITY FOR HEARING**

**Action:** It was moved by Erin Keels, seconded by Joanna Ridgeway, that the Board issue a Notice of Automatic Suspension and Opportunity for Hearing for violations of Chapter 4723, ORC for the following case:

Walker, Nicolette, P.N. 160139 (CASE #17-6755).

Motion adopted by a majority vote of the Board members present with Sandra Ranck abstaining.

#### **POST IMMEDIATE SUSPENSION AND NOTICE OF OPPORTUNITY FOR HEARING**

**Action:** It was moved by Joanna Ridgeway, seconded by Erin Keels, that the Board issue a Post Immediate Suspension and Notice of Opportunity for Hearing for violations of Chapter 4723, ORC for the following case:

Miller, Penni, R.N. 325943 (CASE #17-1497).

Motion adopted by a majority vote of the Board members present with Sandra Ranck abstaining.

The Immediate Suspension Notice for this case had already been issued by the time the Notice of Opportunity for Hearing was approved during the meeting.

#### **SURRENDERS/WITHDRAWALS**

##### **Permanent Voluntary Surrender**

**Action:** It was moved by Nancy Fellows, seconded by Barbara Douglas, that the Board accept the Permanent Voluntary Surrender of License for the following case(s):

Coates, Dusty, R.N. 315847 (CASE #17-2460); Dixon, Darrell, P.N. 115238 (CASE #17-1409); Justice, Derek, R.N. 300970 (CASE #17-3501); Saunders, Shelley, R.N. 406855, P.N. 111432 (CASE #17-5489); Walters, Jo, R.N. 192005 (CASE #17-5461); Hamm, Eric, P.N. 153502 (CASE #17-4431); Herrold, Rex, P.N. 164209 (CASE #16-3645); Monstwil, Kenneth, R.N. 256439 (CASE #17-6637).

Motion adopted by a majority vote of the Board members present with Sandra Ranck abstaining.

### **CONSENT AGREEMENTS**

**Action:** It was moved by J. Jane McFee, seconded by Patricia Sharpnack, that the Board approve the Consent Agreements for violations of Chapter 4723, ORC entered into by and between the Board in the following case(s):

Shirley, Shalia, DT 005100 (CASE #17-4583); Conley, Jodi, R.N. 278478 (CASE #17-1260); Haas-Dugan, Marylynn, R.N. 196980 (CASE #15-4016); Geisler, Gregory, R.N. 399277 (CASE #16-5260); Smith, Lori, R.N. 305805 (CASE #17-5755, #15-5335); Becker, Stacy, R.N. 390569 (CASE #14-2261); Chenault, Sarah, R.N. 411858 (CASE #17-5994); Klawonn, Kristina, R.N. 365704, P.N. 122399 (CASE #17-3757); Stewart, Amanda, P.N. 138804 (CASE #16-2277); Glosser, Stephen, R.N. 383192 (CASE #17-3060); Monroe, Erica, P.N. 121893 (CASE #17-4582); Case, Kimberly, R.N. 394852 (CASE #15-2524); Young-Cole, Jennifer, R.N. 366104 (CASE #16-2949); Douglass, Kayshia, P.N. 153649 (CASE #17-0099); Hall, Tamara, P.N. 128684 (CASE #17-5591); Woodall, Loretta, P.N. 129717 (CASE #17-1522); Parrigin, Rebecca, P.N. 158945 (CASE #17-6492); Smith, Angela, R.N. 216303 (CASE #16-3194); Williams, Tiffany, P.N. 142287 (CASE #17-6470); Reilly, Cara, R.N. 252103 (CASE #17-1832); Durinka, Kelly, P.N. 102412 (CASE #17-4095); Wilbon, Tiahna, P.N. 159687 (CASE #17-4825); Key, Katherine, R.N. 372984 (CASE #17-6489); Kolcun, Angelique, P.N. 105215 (CASE #17-2572); Caraveo, Dawn, D.T. 001054 (CASE #17-1825); Chambers, Valerie, R.N. 337496 (CASE #16-7696); Hopkins, Kelly, R.N. 312965 (CASE #17-1191); Turner, Tammy, R.N. 336872 (CASE #15-0231); Dorsten, Emily, R.N. 375153 (CASE #15-5337); Marshall, Ebony, R.N. 413603 (CASE #17-3140); Rowland, Nicole, R.N. 388863 (CASE #17-3905); Gettings, Lori, R.N. 392195 (CASE #17-3693); Decorte, Beth, P.N. 113489 (CASE #17-2675); Comstock, Randall, P.N. 141250 (CASE #17-5457); Zarick, Jennifer, R.N. 409222 (CASE #17-1682); Parabtani, Stephanie, R.N. NCLEX (CASE #17-3468); Hines, Kristen, R.N. 377924 (CASE #17-7136); Weisburn, Megan, R.N. 358345 (CASE #17-5949); Thomas, Julie, R.N. 273572 (CASE #17-6943); Compton, Deborah, R.N. 316883 (CASE #17-4296); Soltay, Christy, R.N. 347166 (CASE #16-5589); Dunn, John, P.N. 124814 (CASE #15-8402); Grunden, Jason, R.N. 341833 (CASE #16-0870); Wheeler, Tiffany, R.N. 404327 (CASE #17-0729); Latham, Lori, P.N. 163685 (CASE #17-5703); Spencer, Kaitlyn, R.N. 353226 (CASE #17-2165); Daria, Jeanette, R.N. 413759 (CASE #17-2405); Zimmerman, Tana, R.N. 311343 (CASE #17-0947); Spicer, Kelly, R.N. 284402

(CASE #14-6465); Davis, Adrianna, P.N. endorse (CASE #17-7097); Cupps, Rita, R.N. 233002 (CASE #17-6146); Adams, Lisa, P.N. 094210 (CASE #17-6432); Sellers, Matthew, P.N. 157402 (CASE #17-6586); Heavelyn, Darden, P.N. 134676 (CASE #17-2545); Dawson, Shannon, R.N. 413332, P.N. 148086 (CASE #17-3536); Wright, Ashley, P.N. 160515, D.T. 002747 (CASE #17-6615); White, Amber, P.N. NCLEX (CASE #17-4017); Okagu, Driemonnetta, P.N. 155279 (CASE #17-6537); Stratton, Cody, R.N. 315060 (CASE #17-1411); Stawicki, Rachelle, R.N. 383762 (CASE #17-5433); McGucken, Rachel, R.N. 389734 (CASE #17-3946); Walls, Shawn, R.N. 365897 (CASE #17-2678); Smith, Deborah, P.N. 153565 (CASE #17-5352); Lee, Sheena, R.N. 380597, P.N. 133447, CNP 020753 (CASE #17-6431); Wireman, Danielle, R.N. 257798 (CASE #16-6810); Marcum, Leanna, P.N. 162721 (CASE #17-3000); Banks, Lori, P.N. 108792 (CASE #16-2246); Shambarger, Jennifer, R.N. 316301 (CASE #17-5214); Carmichael, Crystalee, P.N. 119499 (CASE #16-5780); Jones, Thirkeshia, P.N. NCLEX (CASE #17-6774); Pack, Heather, R.N. 410859 (CASE #17-6314); Conteh, Alieu, P.N. 149148 (CASE #17-3893); Jones, Stephanie, MAC Applicant (CASE #17-1705); Goetz, Margaret, R.N. 159619 (CASE #16-6909); Halleran, Rachel, R.N. 419746 (CASE #17-2085); Yeagley, Diane, P.N. 136740 (CASE #17-1592); Warner, Beth, P.N. 116813 (CASE #17-1583); Smith, Samara, P.N. 140354 (CASE #17-5499); Noonan, Catherine, R.N. 356958 (CASE #18-0151); Congeni, Karen, R.N. 293435 (CASE #17-2979); Kidd, Brandy, P.N. 158265 (CASE #17-4661); Howdeshell, Ethel, R.N. 251273, CNP 08855 (CASE #15-4875); Pierce, Tammy, P.N. 111308 (CASE #17-0110); Rush, Colleen, P.N. 139469 (CASE #17-3987); Garber, Tiffany, DTI applicant (CASE #17-6752); Fox, Julie, R.N. 342795 (CASE #17-7285); Ferrer-Arrington, Yvonne, R.N. endorse (CASE #17-4321); Woods, Christina, R.N. 356346, P.N. 118979 (CASE #17-6600); Flynn, Natalie, R.N. 266263, CNP 09772 (CASE #17-4699); Christensen, Laura, R.N. 365749 (CASE #17-6120, #16-5180); Wash, Jennifer, R.N. 283968 (CASE #17-2683); Daley, Jessica, R.N. NCLEX (CASE #17-5201); Kish, James, R.N. 196032 (CASE #17-6477); Semelsberger, Dawn, R.N. 260510 (CASE #16-7204); Withers, Christina, P.N. 147949 (CASE #17-2531); Bosley, Mary, R.N. endorse (CASE #17-5452); Cerha, Michelle, P.N. 095378 (CASE #16-5419); Muetzel, Megan, P.N. NCLEX (CASE #17-4853).

Lauralee Krabill voted no on Bosley, Mary, R.N. endorse (CASE #17-5452); and abstained on Jones, Thirkeshia, P.N. NCLEX (CASE #17-6774); Joanna Ridgeway abstained on Glosser, Stephen, R.N. 383192 (CASE #17-3060); Hopkins, Kelly, R.N. 312965 (CASE #17-1191); and White, Amber, P.N. NCLEX (CASE #17-4017); Erin Keels abstained on Geisler, Gregory, R.N. 399277 (CASE #16-5260); Glosser, Stephen, R.N. 383192 (CASE #17-3060); Hopkins, Kelly, R.N. 312965 (CASE #17-1191); Shambarger, Jennifer, R.N. 316301 (CASE #17-5214); and Rush, Colleen, P.N. 139469 (CASE #17-3987); Barbara Douglas voted no on Comstock, Randall, P.N. 141250 (CASE #17-5457); and Spicer, Kelly, R.N. 284402 (CASE #14-6465); Patricia Sharpnack voted no on Case, Kimberly, R.N. 394852 (CASE #15-2524); and Comstock, Randall, P.N. 141250 (CASE #17-5457); J. Jane McFee voted no on Parrigin, Rebecca, P.N.

158945 (CASE #17-6492); Comstock, Randall, P.N. 141250 (CASE #17-5457); and Parabtani, Stephanie, R.N. NCLEX (CASE #17-3468).

Motion adopted by a majority vote of the Board members present with Sandra Ranck abstaining.

### **HEARING EXAMINER'S REPORT AND RECOMMENDATION**

McGinnis, Jeanne Sue, R.N. 320815 (CASE #16-7361)

**Action:** It was moved by Patricia Sharpnack, seconded by Lauralee Krabill, that the Board admit State's Exhibit 6 under seal in order to preserve patient confidentiality in accordance with Section 4723.28(I), ORC, and grant the State's Motion to redact a patient name from State's Exhibit 9, according to Section 4723.28(I)(1), ORC. It was further moved that the Board overrule the Hearing Examiner's exclusion of Respondent's proffered Exhibits N and V and admit those exhibits into evidence. It was further moved that the Board grant Respondent's Motion to Admit or Consider Additional Evidence, filed on December 27, 2017, deny State's Motion to Strike, filed on January 8, 2017, and admit Respondent's additional evidence, and accept all of the Findings of Fact and Conclusions of Law, and modify the Recommendation in the Hearing Examiner's Report and Recommendation and that **JEANNE SUE MCGINNIS's** license to practice nursing as a registered nurse in the State of Ohio be suspended and that the suspension be stayed subject to the probationary terms and restrictions set forth below for a minimum period of two (2) years including the **Temporary Practice Restrictions**, prohibiting **MS. MCGINNIS** from practicing nursing as a registered nurse in emergency departments, and in settings established primarily for the care of patients with psychiatric and mental health conditions, unless otherwise approved in advance by the Board or its designee, and if recommended by **MS. MCGINNIS's** counselor, as set forth below.

The rationale for the modification is the following: The Board in its expertise finds that a two (2) year stayed suspension with probationary terms and restrictions will adequately protect the public.

### **PROBATIONARY PERIOD**

**MS. MCGINNIS's** license shall be subject to Probationary Terms and Restrictions for a minimum period of two (2) years.

### **PROBATIONARY TERMS AND RESTRICTIONS**

**MS. MCGINNIS shall:**

1. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.

2. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
3. **Within ninety (90) days of the effective date of this Order**, submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MS. MCGINNIS**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MS. MCGINNIS's** criminal records check to the Board.

### ***Evaluations***

4. **Within ninety (90) days of the effective date of this Order**, at **MS. MCGINNIS's** expense, obtain a mental health evaluation from a Board approved evaluator and provide the Board with complete documentation of such evaluation. Prior to the evaluation, **MS. MCGINNIS** shall provide the mental health evaluator with a copy of this Order. **MS. MCGINNIS** shall execute releases to permit the mental health evaluator to obtain any information deemed appropriate and necessary for the evaluation. The mental health evaluator shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on **MS. MCGINNIS's** license, and a statement as to whether **MS. MCGINNIS** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
5. Provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the mental health evaluator described above until released. Further, the Board may utilize the mental health evaluator's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on **MS. MCGINNIS's** license.

### ***Counseling***

6. **Within sixty (60) days following the effective date of this Order**, **MS. MCGINNIS** shall, at her expense, begin mental health counseling with a licensed therapist that is approved in advance by the Board or its designee. **MS. MCGINNIS** shall cause the therapist to submit quarterly written reports to the Board regarding: (i) **MS. MCGINNIS's** current diagnosis; (ii) **MS. MCGINNIS's** compliance with treatment recommendations/plans, including but not limited to appropriate use of prescribed medications; (iii) all dates **MS. MCGINNIS** was seen in the three month period prior to the date of the report; and (iv) any concerns regarding **MS. MCGINNIS's** ability to practice nursing in accordance with acceptable and prevailing standards of safe nursing care. Further, the Board may use the therapist's recommendations during the course of treatment as a basis for additional terms, conditions, and limitations on

**MS. MCGINNIS's** license. **MS. MCGINNIS** shall see the therapist as deemed necessary by the therapist, until released.

7. At the first appointment following the effective date of this Order, **MS. MCGINNIS shall provide the therapist with a copy of this Order.** In addition, **MS. MCGINNIS** shall execute releases to permit the therapist to obtain any information deemed appropriate and necessary for the treatment and evaluation of **MS. MCGINNIS.**

### ***Employment Conditions***

8. **Upon the request of the Board or its designee,** complete and submit satisfactory documentation of completion of a nurse refresher course or an extensive orientation approved in advance by the Board or its designee.
9. Notify the Board, in writing, of the name and address of any current employer **within thirty (30) days following the effective date of this Order,** or any new employer prior to accepting nursing employment. Any period during which **MS. MCGINNIS** does not work in a position within the State of Ohio for which a license to practice nursing is required **shall not count** toward fulfilling the probationary period imposed by this Order.
10. **Within fifteen (15) days of the effective date of this Order,** provide her current employer(s) with a copy of this Order, if working in a position in which a nursing license is required. **MS. MCGINNIS** is under a continuing duty to provide a copy of this Order to any new employer(s) **prior to accepting employment as a nurse.**
11. Have current employer(s), if working in a position where a license to practice nursing is required, submit written reports regarding job performance **on a quarterly basis beginning within thirty (30) days of the effective date of this Order or beginning within thirty (30) days of working in a position as a nurse.**
12. Have current employer(s) send documentation to the Board, along with the first employer report, of receipt of a copy of this Order, including the date this Order was received.

### ***Reporting Requirements for Probationary Period***

13. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.

14. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
15. Submit any and all information that the Board may request regarding **MS. MCGINNIS's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
16. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.
17. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: [monitoring@nursing.ohio.gov](mailto:monitoring@nursing.ohio.gov) or by mail to:

**Compliance Unit  
Ohio Board of Nursing  
17 South High Street, Suite 660  
Columbus, OH 43215-3466**

18. Verify that the reports and documentation required by this Order are received in the Board office.
19. Inform the Board **within five (5) business days**, in writing, of any change in employment status or of any change in residential or home address or telephone number.

### **LICENSE RESTRICTIONS**

**In addition to Probationary Terms and Restrictions, MS. MCGINNIS's license is subject to the following License Restrictions:**

#### **Temporary Practice Restrictions**

**Unless otherwise approved in advance, in writing, by the Board or its designee, and unless recommended by MS. MCGINNIS'S counselor, MS. MCGINNIS shall not practice nursing as a registered nurse in emergency departments, and in settings established primarily for the care of patients with psychiatric and mental health conditions.**

#### **FAILURE TO COMPLY**

The stay of **MS. MCGINNIS's** suspension shall be lifted and **MS. MCGINNIS's** license to practice nursing as a registered nurse will be automatically suspended if it appears to the Board that **MS. MCGINNIS** has violated or breached any

terms or conditions of this Order. Following the automatic suspension, the Board shall notify **MS. MCGINNIS** via certified mail of the specific nature of the charges and automatic suspension of **MS. MCGINNIS's** license. **MS. MCGINNIS** may request a hearing regarding the charges.

### **DURATION**

The Board may only alter the probationary period imposed by this Order if: (1) the Board determines that **MS. MCGINNIS** has complied with all aspects of this Order; and (2) the Board determines that **MS. MCGINNIS** is able to practice nursing according to acceptable and prevailing standards of safe nursing care without Board monitoring, based upon an interview with **MS. MCGINNIS** and review of the reports as required herein.

As indicated above under Employment Conditions, any period during which **MS. MCGINNIS** does not work in a position within the State of Ohio for which a license to practice nursing is required shall not count toward fulfilling the probationary period imposed by this Order.

Motion adopted by a majority vote of the Board members present with Lisa Klenke and Sandra Ranck abstaining.

This Order shall become effective immediately and is hereby entered upon the Journal of the Board for the 25<sup>th</sup> day of January 2018.

Kirkendall, Angela Dawna, P.N. 121383 (CASE #15-4744)

**Action:** It was moved by J. Jane McFee, seconded by Patricia Sharpnack, that the Board accept all of the Findings of Fact and Conclusions of Law, and modify the Recommendation in the Hearing Examiner's Report and Recommendation and that **ANGELA DAWNA KIRKENDALL's** license to practice nursing as a licensed practical nurse in the State of Ohio be suspended and that the suspension is stayed subject to the probationary terms and restrictions set forth below for a minimum period of one (1) year including the **Temporary Narcotic Restrictions, unless otherwise approved in advance, and Temporary Practice Restrictions**, set forth below.

The rationale for the modification is the following: The Board in its expertise finds that a reduction to a minimum of at least three (3) months of drug screening, during the probationary period, will adequately protect the public.

### **PROBATIONARY PERIOD**

**MS. KIRKENDALL's** license shall be subject to Probationary Terms and Restrictions for a minimum period of one (1) year.

## **PROBATIONARY TERMS AND RESTRICTIONS**

### **MS. KIRKENDALL shall:**

1. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
2. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
3. **Within ninety (90) days of the effective date of this Order**, submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MS. KIRKENDALL**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MS. KIRKENDALL's** criminal records check to the Board.

### ***Educational Requirements***

4. **Within six (6) months of the effective date of this Order**, successfully complete and submit satisfactory documentation of successful completion of the following continuing education, or other comparable course(s) approved in advance by the Board or its designee: five (5) hours Professional Accountability and Legal Liability; five (5) hours Nurses and Drugs; and two (2) hours Ohio Nursing Laws and Rules. Continuing education required by this Order **does not meet the continuing education requirements for license renewal**.

### ***Evaluations***

5. **Upon the request of the Board or its designee and within sixty (60) days of that request, MS. KIRKENDALL** shall, at her expense, obtain a comprehensive physical examination by a Board approved physician for the purposes of evaluating **MS. KIRKENDALL's** fitness for duty and safety to practice nursing as a licensed practical nurse. This Board approved physician shall provide the Board with complete documentation of **MS. KIRKENDALL's** comprehensive physical examination, and with a comprehensive assessment regarding **MS. KIRKENDALL's** fitness for duty and safety to practice nursing as a licensed practical nurse. Prior to the examination, **MS. KIRKENDALL** shall provide the Board approved physician with a copy of this Order. Further, **MS. KIRKENDALL** shall execute releases to permit the Board approved physician performing the comprehensive physical examination and assessment to obtain any information deemed appropriate and necessary for the assessment. The evaluating physician shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on **MS. KIRKENDALL's**

- license to practice, and stating whether **MS. KIRKENDALL** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
6. **If a comprehensive physical examination is requested**, the Board may utilize the Board approved physician's recommendations and conclusions from the comprehensive physical examination and assessment as a basis for additional terms and restrictions on **MS. KIRKENDALL's** license.
  7. **Upon the request of the Board or its designee and within sixty (60) days of that request**, at **MS. KIRKENDALL's** expense, obtain a chemical dependency evaluation by a chemical dependency professional approved by the Board or its designee and, prior to the evaluation, provide the chemical dependency professional with a copy of this Order. **MS. KIRKENDALL** shall execute releases to permit the chemical dependency professional to obtain any information deemed appropriate and necessary for the evaluation. The chemical dependency professional shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on **MS. KIRKENDALL's** license, and a statement as to whether **MS. KIRKENDALL** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
  8. **If a chemical dependency evaluation is requested**, provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the chemical dependency professional described above until released. Further, the Board may utilize the professional's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on **MS. KIRKENDALL's** license.

### ***Monitoring***

9. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. KIRKENDALL's** history. **MS. KIRKENDALL** shall self-administer prescribed drugs only in the manner prescribed.
10. Abstain completely from the use of alcohol or any products containing alcohol.
11. **Within sixty (60) days of the effective date of this Order**, submit, at her expense, and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. **MS. KIRKENDALL may request release from this requirement after three (3) months of the probationary period.** Refusal to submit such specimen, or failure to

submit such specimen on the day she is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MS. KIRKENDALL** shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. KIRKENDALL's** history.

**MS. KIRKENDALL** shall:

- a. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
- b. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;
- c. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and
- d. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. KIRKENDALL** and submit the report directly to the Board.

### ***Employment Conditions***

12. **Upon the request of the Board or its designee**, complete and submit satisfactory documentation of completion of a nurse refresher course or an extensive orientation approved in advance by the Board or its designee.
13. Notify the Board, in writing, of the name and address of any current employer **within thirty (30) days following the effective date of this Order**, or any new employer prior to accepting nursing employment. Any period during which **MS. KIRKENDALL** does not work in a position within the State of Ohio for which a license to practice nursing is required **shall not count** toward fulfilling the probationary period imposed by this Order.
14. **Within fifteen (15) days of the effective date of this Order**, provide her current employer(s) with a copy of this Order, if working in a position in which a nursing license is required. **MS. KIRKENDALL** is under a continuing duty to provide a copy of this Order to any new employer(s) **prior to accepting employment as a nurse**.
15. Have current employer(s), if working in a position where a license to practice nursing is required, submit written reports regarding job performance **on a quarterly basis beginning within thirty (30) days of**

**the effective date of this Order or beginning within thirty (30) days of working in a position as a nurse.**

16. Have current employer(s) send documentation to the Board, along with the first employer report, of receipt of a copy of this Order, including the date this Order was received.

***Reporting Requirements for Probationary Period***

17. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
18. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
19. Submit any and all information that the Board may request regarding **MS. KIRKENDALL's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
20. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.
21. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: [monitoring@nursing.ohio.gov](mailto:monitoring@nursing.ohio.gov) or by mail to:

**Compliance Unit  
Ohio Board of Nursing  
17 South High Street, Suite 660  
Columbus, OH 43215-3466**

22. Verify that the reports and documentation required by this Order are received in the Board office.
23. Inform the Board **within five (5) business days**, in writing, of any change in employment status or of any change in residential or home address or telephone number.

**LICENSE RESTRICTIONS**

**In addition to Probationary Terms and Restrictions, MS. KIRKENDALL's license is subject to the following License Restrictions:**

### **Temporary Narcotic Restriction**

**Unless otherwise approved in advance, in writing, by the Board or its designee, MS. KIRKENDALL** shall not administer, have access to, or possess (except as prescribed for **MS. KIRKENDALL's** use by another so authorized by law who has full knowledge of **MS. KIRKENDALL's** history) any narcotics, other controlled substances, or mood altering drugs. In addition, **MS. KIRKENDALL** shall not count narcotics or possess or carry any work keys for locked medication carts, cabinets, drawers, or containers. **MS. KIRKENDALL** shall not call in or order prescriptions or prescription refills.

### **Temporary Practice Restrictions**

**MS. KIRKENDALL** shall not practice nursing as a licensed practical nurse (1) in a patient's residence; (2) for staffing agencies or pools; (3) for an individual or group of individuals who directly engage **MS. KIRKENDALL** to provide nursing services for fees, compensation, or other consideration or who engage **MS. KIRKENDALL** as a volunteer; or (4) as an independent contractor or for *locum tenens* assignments.

**MS. KIRKENDALL** shall not function in a position or employment where the job duties or requirements involve management of nursing and nursing responsibilities. Such positions include, but are not limited to, the following: Director of Nursing, Assistant Director of Nursing, Nurse Manager, Vice President of Nursing.

### **FAILURE TO COMPLY**

The stay of **MS. KIRKENDALL's** suspension shall be lifted and **MS. KIRKENDALL's** license to practice nursing as a licensed practical nurse will be automatically suspended if it appears to the Board that **MS. KIRKENDALL** has violated or breached any terms or conditions of this Order. Following the automatic suspension, the Board shall notify **MS. KIRKENDALL** via certified mail of the specific nature of the charges and automatic suspension of **MS. KIRKENDALL's** license. **MS. KIRKENDALL** may request a hearing regarding the charges.

### **DURATION**

The Board may only alter the probationary period imposed by this Order if: (1) the Board determines that **MS. KIRKENDALL** has complied with all aspects of this Order; and (2) the Board determines that **MS. KIRKENDALL** is able to practice nursing according to acceptable and prevailing standards of safe nursing care without Board monitoring, based upon an interview with **MS. KIRKENDALL** and review of the reports as required herein.

As indicated above under Employment Conditions, any period during which **MS. KIRKENDALL** does not work in a position within the State of Ohio for which a license to practice nursing is required shall not count toward fulfilling the probationary period imposed by this Order.

Motion adopted by a majority vote of the Board members present with Lisa Klenke and Sandra Ranck abstaining.

This Order shall become effective immediately and is hereby entered upon the Journal of the Board for the 25<sup>th</sup> day of January 2018.

Westfall, Angela Rose, R.N. 348161 (CASE #16-5960)

**Action:** It was moved by Lauralee Krabill, seconded by Matthew Carle, that the the Board accept all of the Findings of Fact, Conclusions of Law, and the Recommendation in the Hearing Examiner's Report and Recommendation, and that **ANGELA ROSE WESTFALL's** license to practice nursing as a registered nurse in the State of Ohio be suspended for an indefinite period of time with the conditions for reinstatement set forth below, and following reinstatement, **MS. WESTFALL's** license to practice nursing as a registered nurse shall be subject to a stayed suspension under the probationary terms and restrictions set forth below for a minimum period of two (2) years including the **Temporary Practice Restrictions**, set forth below.

### **SUSPENSION OF LICENSE**

**MS. WESTFALL's** license to practice as a registered nurse is suspended for an indefinite period of time.

The Board may reinstate **MS. WESTFALL's** license to practice as a registered nurse if **MS. WESTFALL** submits a written request for reinstatement and is determined by the Board or its designee to have complied with the Conditions for Reinstatement.

### **CONDITIONS FOR REINSTATEMENT**

**MS. WESTFALL shall:**

1. Be determined, by the Board or its designee, to be able to practice nursing according to acceptable and prevailing standards of safe nursing care based upon an interview and review of the documentation specified in this Order.
2. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
3. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.

4. **Within ninety (90) days immediately prior to requesting reinstatement**, submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MS. WESTFALL**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MS. WESTFALL's** criminal records check to the Board. The Board will not consider a request for reinstatement until **MS. WESTFALL's** completed criminal records check, including the FBI check, is received by the Board.
5. Pay a fine of five hundred dollars (\$500.00), payable: online by credit or debit card; or payable to the "Treasurer, State of Ohio," by certified check, cashier check, or money order mailed to the attention of the Compliance Unit, Ohio Board of Nursing, 17 South High Street, Suite 660, Columbus, OH 43215-3466.

### ***Educational Requirements***

6. Successfully complete and submit satisfactory documentation of successful completion of the following continuing education, or other comparable course(s) approved in advance by the Board or its designee: fifteen (15) hours Chemical Dependency and Substance Abuse; and two (2) hours Ohio Nursing Laws and Rules. Continuing education required by this Order **does not meet the continuing education requirements for license renewal**.
7. Establish contact with a nursing educator, approved in advance by the Board or its designee, who has no less than a master's degree and who is affiliated with a nursing educational program.
  - a. Have the educator provide the Board with a written report of an assessment of **MS. WESTFALL**, which identifies **MS. WESTFALL's** knowledge/practice deficiencies and remedial educational needs.
  - b. Prior to the assessment, provide the nursing educator with a copy of this Order and submit to any nursing skills or knowledge assessments required by the educator. **MS. WESTFALL** shall also execute releases prior to the assessment to permit the educator to obtain any information deemed appropriate and necessary for the assessment including information from **MS. WESTFALL's** employer(s), former employers, and Board staff.
  - c. Following the assessment, have the educator provide the Board with a copy of a learning plan developed by the educator for **MS. WESTFALL** and obtain approval of the learning plan by the Board or its designee. The learning plan shall identify specific remediation

that **MS. WESTFALL** shall complete to address any knowledge/practice deficiencies and remedial educational needs identified by the educator and shall identify the time frame during which **MS. WESTFALL** shall complete such learning plan.

- d. Successfully complete and submit satisfactory documentation of successful completion of the learning plan within the time frame specified in the learning plan.
- e. Be responsible for all costs associated with meeting the requirements of the learning plan.
- f. **After MS. WESTFALL has successfully completed the learning plan**, have the educator provide the Board with:
  - i. An assessment and any recommendations for additional remedial education and/or restrictions that should be placed on **MS. WESTFALL's** license; and
  - ii. A written opinion stating whether **MS. WESTFALL** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
- g. The Board may utilize the educator's recommendations and conclusions from the assessment as a basis for additional terms and restrictions on **MS. WESTFALL's** license.
- h. If **MS. WESTFALL** has met all other conditions for reinstatement, in the event that the educator's recommendations include a clinical component, this requirement will be completed following reinstatement of **MS. WESTFALL's** nursing license and prior to **MS. WESTFALL** practicing as a nurse.

### ***Reporting Requirements for Suspension Period***

8. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
9. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
10. Submit any and all information that the Board may request regarding **MS. WESTFALL's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
11. Not submit or cause to be submitted any false, misleading, or deceptive

statements, information, or documentation to the Board.

12. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: [monitoring@nursing.ohio.gov](mailto:monitoring@nursing.ohio.gov) or by mail to:

**Compliance Unit  
Ohio Board of Nursing  
17 South High Street, Suite 660  
Columbus, OH 43215-3466**

13. Verify that the reports and documentation required by this Order are received in the Board office.
14. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.

### **PROBATIONARY PERIOD**

Following reinstatement, the suspension shall be stayed and **MS. WESTFALL's** license shall be subject to Probationary Terms and Restrictions for a minimum period of two (2) years.

### **PROBATIONARY TERMS AND RESTRICTIONS**

**MS. WESTFALL shall:**

1. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
2. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.

#### ***Employment Conditions***

3. **Upon the request of the Board or its designee, prior to working in a position where a license to practice nursing is required**, complete and submit satisfactory documentation of completion of a nurse refresher course or an extensive orientation approved in advance by the Board or its designee.
4. **Prior to accepting employment as a nurse**, each time with every employer, notify the Board, in writing. Any period during which **MS. WESTFALL** does not work in a position within the State of Ohio for which a license to practice nursing is required **shall not count** toward fulfilling the probationary period imposed by this Order.

5. Be under a continuing duty to provide a copy of this Order to any new employer **prior to accepting employment as a nurse.**
6. Have current employer(s), if working in a position where a license to practice nursing is required, submit written reports regarding job performance **on a quarterly basis beginning within thirty (30) days of the effective date of this Order or beginning within thirty (30) days of working in a position as a nurse.**
7. Have current employer(s) send documentation to the Board, along with the first employer report, of receipt of a copy of this Order, including the date this Order was received.

***Reporting Requirements for Probationary Period***

8. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
9. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
10. Submit any and all information that the Board may request regarding **MS. WESTFALL's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
11. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.
12. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: [monitoring@nursing.ohio.gov](mailto:monitoring@nursing.ohio.gov) or by mail to:

**Compliance Unit  
Ohio Board of Nursing  
17 South High Street, Suite 660  
Columbus, OH 43215-3466**

13. Verify that the reports and documentation required by this Order are received in the Board office.
14. Inform the Board **within five (5) business days**, in writing, of any change in employment status or of any change in residential or home address or telephone number.

## LICENSE RESTRICTIONS

**In addition to Probationary Terms and Restrictions, MS. WESTFALL's license is subject to the following License Restrictions:**

### Temporary Practice Restrictions

**Upon reinstatement, MS. WESTFALL** shall not practice nursing as a registered nurse (1) in a patient's residence; (2) for staffing agencies or pools; (3) for an individual or group of individuals who directly engage **MS. WESTFALL** to provide nursing services for fees, compensation, or other consideration or who engage **MS. WESTFALL** as a volunteer; or (4) as an independent contractor or for *locum tenens* assignments.

**Upon reinstatement, MS. WESTFALL** shall not function in a position or employment where the job duties or requirements involve management of nursing and nursing responsibilities, or supervising and evaluating nursing practice. Such positions include, but are not limited to, the following: Director of Nursing, Assistant Director of Nursing, Nurse Manager, Vice President of Nursing.

### FAILURE TO COMPLY

The stay of **MS. WESTFALL's** suspension shall be lifted and **MS. WESTFALL's** license to practice nursing as a registered nurse will be automatically suspended if it appears to the Board that **MS. WESTFALL** has violated or breached any terms or conditions of this Order. Following the automatic suspension, the Board shall notify **MS. WESTFALL** via certified mail of the specific nature of the charges and automatic suspension of **MS. WESTFALL's** license. **MS. WESTFALL** may request a hearing regarding the charges.

### DURATION

The Board may only alter the probationary period imposed by this Order if: (1) the Board determines that **MS. WESTFALL** has complied with all aspects of this Order; and (2) the Board determines that **MS. WESTFALL** is able to practice nursing according to acceptable and prevailing standards of safe nursing care without Board monitoring, based upon an interview with **MS. WESTFALL** and review of the reports as required herein.

As indicated above under Employment Conditions, any period during which **MS. WESTFALL** does not work in a position within the State of Ohio for which a license to practice nursing is required shall not count toward fulfilling the probationary period imposed by this Order.

Motion adopted by a majority vote of the Board members present with Lisa Klenke and Sandra Ranck abstaining.

This Order shall become effective immediately and is hereby entered upon the Journal of the Board for the 25<sup>th</sup> day of January 2018.

Jones, Linette Marie, R.N. 318465 (CASE #15-5063)

**Action:** It was moved by Erin Keels, seconded by Joanna Ridgeway, that the Board accept all of the Findings of Fact and Conclusions of Law, and modify the Recommendation in the Hearing Examiner's Report and Recommendation, and that **LINETTE MARIE JONES's** license to practice nursing as a registered nurse in the State of Ohio be suspended for an indefinite period of time but not less than one (1) year with the conditions for reinstatement set forth below, and following reinstatement, **MS. JONES's** license to practice nursing as a registered nurse shall be subject to a stayed suspension under the probationary terms and restrictions set forth below for a minimum period of three (3) years including the **Temporary Narcotic and Temporary Practice Restrictions**, set forth below.

The rationale for the modification is the following: The Board in its expertise finds that an increased period of probationary terms and restrictions to a minimum of at least three (3) years is necessary to ensure sobriety and to adequately protect the public.

### **SUSPENSION OF LICENSE**

**MS. JONES's** license to practice as a registered nurse is suspended for an indefinite period of time but not less than one (1) year.

The Board may reinstate **MS. JONES's** license to practice as a registered nurse if **MS. JONES** submits a written request for reinstatement and is determined by the Board or its designee to have complied with the Conditions for Reinstatement.

### **CONDITIONS FOR REINSTATEMENT**

**MS. JONES shall:**

1. Be determined, by the Board or its designee, to be able to practice nursing according to acceptable and prevailing standards of safe nursing care based upon an interview and review of the documentation specified in this Order.
2. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
3. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.

4. **Within ninety (90) days immediately prior to requesting reinstatement**, submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MS. JONES**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MS. JONES's** criminal records check to the Board. The Board will not consider a request for reinstatement until **MS. JONES's** completed criminal records check, including the FBI check, is received by the Board.
5. Pay a fine of five hundred dollars (\$500.00), payable: online by credit or debit card; or payable to the "Treasurer, State of Ohio," by certified check, cashier check, or money order mailed to the attention of the Compliance Unit, Ohio Board of Nursing, 17 South High Street, Suite 660, Columbus, OH 43215-3466.

### ***Educational Requirements***

6. Successfully complete and submit satisfactory documentation of successful completion of the following continuing education, or other comparable course(s) approved in advance by the Board or its designee: fifteen (15) hours Substance Abuse; five (5) hours Professional Accountability and Legal Liability for Nurses; and two (2) hours Ohio Nursing Laws and Rules. Continuing education required by this Order **does not meet the continuing education requirements for license renewal.**

### ***Evaluations***

7. **Within ninety (90) days immediately prior to requesting reinstatement**, at **MS. JONES's** expense, obtain a chemical dependency evaluation by a chemical dependency professional approved by the Board or its designee and, prior to the evaluation, provide the chemical dependency professional with a copy of this Order. **MS. JONES** shall execute releases to permit the chemical dependency professional to obtain any information deemed appropriate and necessary for the evaluation. The chemical dependency professional shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on **MS. JONES's** license, and a statement as to whether **MS. JONES** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
8. Provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the chemical dependency professional described above until released. Further, the Board may utilize the professional's recommendations and conclusions from the

evaluation as a basis for additional terms and restrictions on **MS. JONES's** license.

***Monitoring***

9. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. JONES's** history. **MS. JONES** shall self-administer the prescribed drugs only in the manner prescribed.
10. Abstain completely from the use of alcohol or any products containing alcohol.
11. **For a minimum, continuous period of one (1) year immediately prior to requesting reinstatement**, submit, at **MS. JONES's** expense and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Upon and after **MS. JONES's** initiation of drug screening, refusal to submit such specimen, or failure to submit such specimen on the day she is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MS. JONES** shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who has received a complete copy of this Order prior to prescribing for **MS. JONES**.
  - a. ***Prior*** to initiating drug screening:
    - i. Provide a copy of this Order to all treating practitioners;
    - ii. Provide to the Board a list of all treating practitioners, including addresses and telephone numbers; and
    - iii. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. JONES**, **and** submit the report directly to the Board.
  - b. ***After*** initiating drug screening, be under a ***continuing duty*** to:
    - i. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
    - ii. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another

practitioner;

- iii. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and
- iv. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. JONES** and submit the report directly to the Board.

12. **For a minimum, continuous period of one (1) year immediately prior to requesting reinstatement**, attend a minimum of three (3) meetings per week of a support or peer group meeting approved in advance by the Board, or a Twelve Step program, and provide satisfactory documentation of such attendance to the Board prior to reinstatement.

***Reporting Requirements for Suspension Period***

- 13. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
- 14. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
- 15. Submit any and all information that the Board may request regarding **MS. JONES's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
- 16. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board.
- 17. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: [monitoring@nursing.ohio.gov](mailto:monitoring@nursing.ohio.gov) or by mail to:

**Compliance Unit  
Ohio Board of Nursing  
17 South High Street, Suite 660  
Columbus, OH 43215-3466**

- 18. Verify that the reports and documentation required by this Order are received in the Board office.
- 19. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.

## **PROBATIONARY PERIOD**

Following reinstatement, the suspension shall be stayed and **MS. JONES's** license shall be subject to Probationary Terms and Restrictions for a minimum period of three (3) years.

## **PROBATIONARY TERMS AND RESTRICTIONS**

### **MS. JONES shall:**

1. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
2. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.

### ***Monitoring***

3. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. JONES's** history. **MS. JONES** shall self-administer prescribed drugs only in the manner prescribed.
4. Abstain completely from the use of alcohol or any products containing alcohol.
5. Submit, at her expense, and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Refusal to submit such specimen, or failure to submit such specimen on the day she is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MS. JONES** shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. JONES's** history.

### **MS. JONES shall:**

- a. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
- b. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;

- c. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and
  - d. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. JONES** and submit the report directly to the Board.
6. Attend a minimum of three (3) meetings per week of a support or peer group meeting approved in advance by the Board, or a Twelve Step program, and provide satisfactory documentation of such attendance to the Board every six (6) months.

### ***Employment Conditions***

7. **Upon the request of the Board or its designee, prior to working in a position where a license to practice nursing is required**, complete and submit satisfactory documentation of completion of a nurse refresher course or an extensive orientation approved in advance by the Board or its designee.
8. **Prior to accepting employment as a nurse**, each time with every employer, notify the Board, in writing. Any period during which **MS. JONES** does not work in a position within the State of Ohio for which a license to practice nursing is required **shall not count** toward fulfilling the probationary period imposed by this Order.
9. Be under a continuing duty to provide a copy of this Order to any new employer **prior to accepting employment as a nurse**.
10. Have current employer(s), if working in a position where a license to practice nursing is required, submit written reports regarding job performance **on a quarterly basis beginning within thirty (30) days of the effective date of this Order or beginning within thirty (30) days of working in a position as a nurse**.
11. Have current employer(s) send documentation to the Board, along with the first employer report, of receipt of a copy of this Order, including the date this Order was received.

### ***Reporting Requirements for Probationary Period***

12. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.

13. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
14. Submit any and all information that the Board may request regarding **MS. JONES's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
15. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.
16. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: [monitoring@nursing.ohio.gov](mailto:monitoring@nursing.ohio.gov) or by mail to:

**Compliance Unit  
Ohio Board of Nursing  
17 South High Street, Suite 660  
Columbus, OH 43215-3466**

17. Verify that the reports and documentation required by this Order are received in the Board office.
18. Inform the Board **within five (5) business days**, in writing, of any change in employment status or of any change in residential or home address or telephone number.

### **LICENSE RESTRICTIONS**

**In addition to Probationary Terms and Restrictions, MS. JONES's license is subject to the following License Restrictions:**

#### **Temporary Narcotic Restriction**

**Upon reinstatement, MS. JONES** shall not administer, have access to, or possess (except as prescribed for **MS. JONES's** use by another so authorized by law who has full knowledge of **MS. JONES's** history) any narcotics, other controlled substances, or mood altering drugs. In addition, **MS. JONES** shall not count narcotics or possess or carry any work keys for locked medication carts, cabinets, drawers, or containers. **MS. JONES** shall not call in or order prescriptions or prescription refills.

#### **Temporary Practice Restrictions**

**Upon reinstatement, MS. JONES** shall not practice nursing as a registered nurse (1) in a patient's residence; (2) for staffing agencies or pools; (3) for an

individual or group of individuals who directly engage **MS. JONES** to provide nursing services for fees, compensation, or other consideration or who engage **MS. JONES** as a volunteer; or (4) as an independent contractor or for *locum tenens* assignments.

**Upon reinstatement, MS. JONES** shall not function in a position or employment where the job duties or requirements involve management of nursing and nursing responsibilities, or supervising and evaluating nursing practice. Such positions include, but are not limited to, the following: Director of Nursing, Assistant Director of Nursing, Nurse Manager, Vice President of Nursing.

### **FAILURE TO COMPLY**

The stay of **MS. JONES's** suspension shall be lifted and **MS. JONES's** license to practice nursing as a registered nurse will be automatically suspended if it appears to the Board that **MS. JONES** has violated or breached any terms or conditions of this Order. Following the automatic suspension, the Board shall notify **MS. JONES** via certified mail of the specific nature of the charges and automatic suspension of **MS. JONES's** license. **MS. JONES** may request a hearing regarding the charges.

### **DURATION**

The Board may only alter the probationary period imposed by this Order if: (1) the Board determines that **MS. JONES** has complied with all aspects of this Order; and (2) the Board determines that **MS. JONES** is able to practice nursing according to acceptable and prevailing standards of safe nursing care without Board monitoring, based upon an interview with **MS. JONES** and review of the reports as required herein.

As indicated above under Employment Conditions, any period during which **MS. JONES** does not work in a position within the State of Ohio for which a license to practice nursing is required shall not count toward fulfilling the probationary period imposed by this Order.

Motion adopted by a majority vote of the Board members present with Lisa Klenke and Sandra Ranck abstaining.

This Order shall become effective immediately and is hereby entered upon the Journal of the Board for the 25<sup>th</sup> day of January 2018.

Caupp, Jessica Nicole, R.N. 318861 (CASE #16-1703)

**Action:** It was moved by Joanna Ridgeway, seconded by Erin Keels, that the Board accept all of the Findings of Fact, Conclusions of Law, and the Recommendation in the Hearing Examiner's Report and Recommendation, and that **JESSICA NICOLE CAUPP's** license to practice nursing as a registered nurse in the State of Ohio be suspended for an indefinite period of time with the

conditions for reinstatement set forth below, and following reinstatement, **MS. CAUPP's** license to practice nursing as a registered nurse shall be subject to a stayed suspension under the probationary terms and restrictions set forth below for a minimum period of three (3) years including the **Temporary Narcotic and Temporary Practice Restrictions, unless otherwise approved in advance**, set forth below.

### SUSPENSION OF LICENSE

**MS. CAUPP's** license to practice as a registered nurse is suspended for an indefinite period of time.

The Board may reinstate **MS. CAUPP's** license to practice as a registered nurse if **MS. CAUPP** submits a written request for reinstatement and is determined by the Board or its designee to have complied with the Conditions for Reinstatement.

### CONDITIONS FOR REINSTATEMENT

**MS. CAUPP shall:**

1. Be determined, by the Board or its designee, to be able to practice nursing according to acceptable and prevailing standards of safe nursing care based upon an interview and review of the documentation specified in this Order.
2. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
3. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
4. **Within ninety (90) days immediately prior to requesting reinstatement**, submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MS. CAUPP**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MS. CAUPP's** criminal records check to the Board. The Board will not consider a request for reinstatement until **MS. CAUPP's** completed criminal records check, including the FBI check, is received by the Board.
5. Pay a fine of five hundred dollars (\$500.00), payable: online by credit or debit card; or payable to the "Treasurer, State of Ohio," by certified check, cashier check, or money order mailed to the attention of the Compliance Unit, Ohio Board of Nursing, 17 South High Street, Suite 660, Columbus, OH 43215-3466.

### ***Educational Requirements***

6. Successfully complete and submit satisfactory documentation of successful completion of the following continuing education, or other comparable course(s) approved in advance by the Board or its designee: ten (10) hours Substance Abuse; and two (2) hours Ohio Nursing Laws and Rules. Continuing education required by this Order **does not meet the continuing education requirements for license renewal.**

### ***Evaluations***

7. **Within ninety (90) days immediately prior to requesting reinstatement, at MS. CAUPP's expense, obtain a chemical dependency evaluation by a chemical dependency professional approved by the Board or its designee and, prior to the evaluation, provide the chemical dependency professional with a copy of this Order. MS. CAUPP shall execute releases to permit the chemical dependency professional to obtain any information deemed appropriate and necessary for the evaluation. The chemical dependency professional shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on MS. CAUPP's license, and a statement as to whether MS. CAUPP is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.**
8. Provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the chemical dependency professional described above until released. Further, the Board may utilize the professional's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on **MS. CAUPP's** license.

### ***Monitoring***

9. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. CAUPP's** history. **MS. CAUPP** shall self-administer the prescribed drugs only in the manner prescribed.
10. Abstain completely from the use of alcohol or any products containing alcohol.
11. **For a minimum, continuous period of one (1) year immediately prior to requesting reinstatement, submit, at MS. CAUPP's expense and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as**

the Board may request. Upon and after **MS. CAUPP's** initiation of drug screening, refusal to submit such specimen, or failure to submit such specimen on the day she is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MS. CAUPP** shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who has received a complete copy of this Order prior to prescribing for **MS. CAUPP**.

a. **Prior** to initiating drug screening:

- i. Provide a copy of this Order to all treating practitioners;
- ii. Provide to the Board a list of all treating practitioners, including addresses and telephone numbers; and
- iii. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. CAUPP**, **and** submit the report directly to the Board.

b. **After** initiating drug screening, be under a **continuing duty** to:

- i. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
- ii. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;
- iii. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and
- iv. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. CAUPP** **and** submit the report directly to the Board.

**12. If recommended by the chemical dependency evaluation, for a minimum, continuous period of one (1) year immediately prior to requesting reinstatement, attend a minimum of one (1) meeting per week of a support or peer group meeting approved in advance by the Board, or a Twelve Step program, and provide satisfactory documentation of such attendance to the Board prior to reinstatement.**

***Reporting Requirements for Suspension Period***

13. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
14. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
15. Submit any and all information that the Board may request regarding **MS. CAUPP's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
16. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board.
17. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: [monitoring@nursing.ohio.gov](mailto:monitoring@nursing.ohio.gov) or by mail to:

**Compliance Unit  
Ohio Board of Nursing  
17 South High Street, Suite 660  
Columbus, OH 43215-3466**

18. Verify that the reports and documentation required by this Order are received in the Board office.
19. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.

**PROBATIONARY PERIOD**

Following reinstatement, the suspension shall be stayed and **MS. CAUPP's** license shall be subject to Probationary Terms and Restrictions for a minimum period of three (3) years.

**PROBATIONARY TERMS AND RESTRICTIONS**

**MS. CAUPP shall:**

1. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
2. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.

### **Monitoring**

3. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. CAUPP's** history. **MS. CAUPP** shall self-administer prescribed drugs only in the manner prescribed.
4. Abstain completely from the use of alcohol or any products containing alcohol.
5. Submit, at her expense, and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Refusal to submit such specimen, or failure to submit such specimen on the day she is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MS. CAUPP** shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. CAUPP's** history.

#### **MS. CAUPP** shall:

- a. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
  - b. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;
  - c. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and
  - d. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. CAUPP** and submit the report directly to the Board.
6. **If recommended by the chemical dependency evaluation**, attend a minimum of one (1) meeting per week of a support or peer group meeting approved in advance by the Board, or a Twelve Step program, and provide satisfactory documentation of such attendance to the Board every six (6) months.

### ***Employment Conditions***

7. **Upon the request of the Board or its designee, prior to working in a position where a license to practice nursing is required**, complete and submit satisfactory documentation of completion of a nurse refresher course or an extensive orientation approved in advance by the Board or its designee.
8. **Prior to accepting employment as a nurse**, each time with every employer, notify the Board, in writing. Any period during which **MS. CAUPP** does not work in a position within the State of Ohio for which a license to practice nursing is required **shall not count** toward fulfilling the probationary period imposed by this Order.
9. Be under a continuing duty to provide a copy of this Order to any new employer **prior to accepting employment as a nurse**.
10. Have current employer(s), if working in a position where a license to practice nursing is required, submit written reports regarding job performance **on a quarterly basis beginning within thirty (30) days of the effective date of this Order or beginning within thirty (30) days of working in a position as a nurse**.
11. Have current employer(s) send documentation to the Board, along with the first employer report, of receipt of a copy of this Order, including the date this Order was received.

### ***Reporting Requirements for Probationary Period***

12. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
13. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
14. Submit any and all information that the Board may request regarding **MS. CAUPP's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
15. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.
16. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: [monitoring@nursing.ohio.gov](mailto:monitoring@nursing.ohio.gov) or by mail to:

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17 South High Street, Suite 660  
Columbus, OH 43215-3466**

17. Verify that the reports and documentation required by this Order are received in the Board office.
18. Inform the Board **within five (5) business days**, in writing, of any change in employment status or of any change in residential or home address or telephone number.

**LICENSE RESTRICTIONS**

**In addition to Probationary Terms and Restrictions, MS. CAUPP's license is subject to the following License Restrictions:**

**Temporary Narcotic Restriction**

**Upon reinstatement, unless otherwise approved in advance, in writing, by the Board or its designee, MS. CAUPP** shall not administer, have access to, or possess (except as prescribed for **MS. CAUPP's** use by another so authorized by law who has full knowledge of **MS. CAUPP's** history) any narcotics, other controlled substances, or mood altering drugs. In addition, **MS. CAUPP** shall not count narcotics or possess or carry any work keys for locked medication carts, cabinets, drawers, or containers. **MS. CAUPP** shall not call in or order prescriptions or prescription refills.

**Temporary Practice Restrictions**

**Upon reinstatement, unless otherwise approved in advance, in writing, by the Board or its designee, MS. CAUPP** shall not practice nursing as a registered nurse (1) in a patient's residence; (2) for staffing agencies or pools; (3) for an individual or group of individuals who directly engage **MS. CAUPP** to provide nursing services for fees, compensation, or other consideration or who engage **MS. CAUPP** as a volunteer; or (4) as an independent contractor or for *locum tenens* assignments.

**Upon reinstatement, unless otherwise approved in advance, in writing, by the Board or its designee, MS. CAUPP** shall not function in a position or employment where the job duties or requirements involve management of nursing and nursing responsibilities, or supervising and evaluating nursing practice. Such positions include, but are not limited to, the following: Director of Nursing, Assistant Director of Nursing, Nurse Manager, Vice President of Nursing.

### **FAILURE TO COMPLY**

The stay of **MS. CAUPP's** suspension shall be lifted and **MS. CAUPP's** license to practice nursing as a registered nurse will be automatically suspended if it appears to the Board that **MS. CAUPP** has violated or breached any terms or conditions of this Order. Following the automatic suspension, the Board shall notify **MS. CAUPP** via certified mail of the specific nature of the charges and automatic suspension of **MS. CAUPP's** license. **MS. CAUPP** may request a hearing regarding the charges.

### **DURATION**

The Board may only alter the probationary period imposed by this Order if: (1) the Board determines that **MS. CAUPP** has complied with all aspects of this Order; and (2) the Board determines that **MS. CAUPP** is able to practice nursing according to acceptable and prevailing standards of safe nursing care without Board monitoring, based upon an interview with **MS. CAUPP** and review of the reports as required herein.

As indicated above under Employment Conditions, any period during which **MS. CAUPP** does not work in a position within the State of Ohio for which a license to practice nursing is required shall not count toward fulfilling the probationary period imposed by this Order.

Motion adopted by a majority vote of the Board members present with Lisa Klenke and Sandra Ranck abstaining.

This Order shall become effective immediately and is hereby entered upon the Journal of the Board for the 25<sup>th</sup> day of January 2018.

Patkowski, Irene (aka "Irene Patkowski-Sliwinski"), R.N. 184893 (CASE #16-4174)

**Action:** It was moved by Nancy Fellows, seconded by Barbara Douglas, that the Board accept all of the Findings of Fact, Conclusions of Law, and the Recommendation in the Hearing Examiner's Report and Recommendation, and that **IRENE PATKOWSKI's** license to practice nursing as a registered nurse in the State of Ohio be suspended for an indefinite period of time but not less than two (2) years with the conditions for reinstatement set forth below, and following reinstatement, **MS. PATKOWSKI's** license to practice nursing as a registered nurse shall be subject to a stayed suspension under the probationary terms and restrictions set forth below for a minimum period of three (3) years including the **Permanent Practice Restrictions**, set forth below.

Joanna Ridgeway voted no. Motion adopted by a majority vote of the Board members present with Lisa Klenke, J. Jane McFee, Sandra Ranck and Patricia Sharpnack abstaining.

Nancy Fellows moved to rescind the original motion she made because J. Jane McFee inadvertently abstained on the motion and intended to vote no. Barbara Douglas rescinded the second of the original motion. Original motion was rescinded by a majority vote of the members present.

**Action:** It was moved by Nancy Fellows, seconded by Barbara Douglas, that the Board accept all of the Findings of Fact, Conclusions of Law, and the Recommendation in the Hearing Examiner's Report and Recommendation, and that **IRENE PATKOWSKI's** license to practice nursing as a registered nurse in the State of Ohio be suspended for an indefinite period of time but not less than two (2) years with the conditions for reinstatement set forth below, and following reinstatement, **MS. PATKOWSKI's** license to practice nursing as a registered nurse shall be subject to a stayed suspension under the probationary terms and restrictions set forth below for a minimum period of three (3) years including the **Permanent Practice Restrictions**, set forth below.

### **SUSPENSION OF LICENSE**

**MS. PATKOWSKI's** license to practice as a registered nurse is suspended for an indefinite period of time but not less than two (2) years.

The Board may reinstate **MS. PATKOWSKI's** license to practice as a registered nurse if **MS. PATKOWSKI** submits a written request for reinstatement and is determined by the Board or its designee to have complied with the Conditions for Reinstatement.

### **CONDITIONS FOR REINSTATEMENT**

**MS. PATKOWSKI shall:**

1. Be determined, by the Board or its designee, to be able to practice nursing according to acceptable and prevailing standards of safe nursing care based upon an interview and review of the documentation specified in this Order.
2. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
3. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
4. **Within ninety (90) days immediately prior to requesting reinstatement**, submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MS. PATKOWSKI**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MS. PATKOWSKI's** criminal records check to the Board. The Board will not consider a request for

- reinstatement until **MS. PATKOWSKI's** completed criminal records check, including the FBI check, is received by the Board.
5. Submit documentation of her full compliance with the requirements imposed by the Cuyahoga County Court of Common Pleas in Case Number CR-16-604707-B.

### ***Educational Requirements***

6. Successfully complete and submit satisfactory documentation of successful completion of the following continuing education, or other comparable course(s) approved in advance by the Board or its designee: five (5) hours Veracity; five (5) hours Ethics; five (5) hours Professional Accountability and Legal Liability for Nurses; five (5) hours Critical Thinking; five (5) hours Documentation; and two (2) hours Ohio Nursing Laws and Rules. Continuing education required by this Order **does not meet the continuing education requirements for license renewal.**

### ***Evaluations***

7. **Within ninety (90) days immediately prior to requesting reinstatement,** at **MS. PATKOWSKI's** expense, obtain a mental health evaluation from a Board approved evaluator and provide the Board with complete documentation of such evaluation. Prior to the evaluation, **MS. PATKOWSKI** shall provide the mental health evaluator with a copy of this Order. **MS. PATKOWSKI** shall execute releases to permit the mental health evaluator to obtain any information deemed appropriate and necessary for the evaluation. The mental health evaluator shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on **MS. PATKOWSKI's** license, and a statement as to whether **MS. PATKOWSKI** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
8. Provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the mental health evaluator described above until released. Further, the Board may utilize the mental health evaluator's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on **MS. PATKOWSKI's** license.

### ***Reporting Requirements for Suspension Period***

9. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
10. Sign release of information forms allowing health professionals and other

organizations to submit the requested documentation directly to the Board.

11. Submit any and all information that the Board may request regarding **MS. PATKOWSKI's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
12. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board.
13. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: [monitoring@nursing.ohio.gov](mailto:monitoring@nursing.ohio.gov) or by mail to:

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14. Verify that the reports and documentation required by this Order are received in the Board office.
15. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.

### **PROBATIONARY PERIOD**

Following reinstatement, the suspension shall be stayed and **MS. PATKOWSKI's** license shall be subject to Probationary Terms and Restrictions for a minimum period of three (3) years.

### **PROBATIONARY TERMS AND RESTRICTIONS**

**MS. PATKOWSKI shall:**

1. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
2. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
3. Submit documentation of her full compliance with the requirements imposed by the Cuyahoga County Court of Common Pleas in Case Number CR-16-604707-B.

### ***Employment Conditions***

4. **Upon the request of the Board or its designee, prior to working in a position where a license to practice nursing is required**, complete and submit satisfactory documentation of completion of a nurse refresher course or an extensive orientation approved in advance by the Board or its designee.
5. *Not work in a position that requires a nursing license **until** she submits a written request to work as a nurse and obtains written approval from the Board or its designee. **MS. PATKOWSKI must be in full compliance with this Order prior to requesting to work as a nurse.***
6. **Prior to accepting employment as a nurse**, each time with every employer, notify the Board, in writing. Any period during which **MS. PATKOWSKI** does not work in a position within the State of Ohio for which a license to practice nursing is required **shall not count** toward fulfilling the probationary period imposed by this Order.
7. Be under a continuing duty to provide a copy of this Order to any new employer **prior to accepting employment as a nurse.**
8. Have current employer(s), if working in a position where a license to practice nursing is required, submit written reports regarding job performance **on a quarterly basis beginning within thirty (30) days of the effective date of this Order or beginning within thirty (30) days of working in a position as a nurse.**
9. Have current employer(s) send documentation to the Board, along with the first employer report, of receipt of a copy of this Order, including the date this Order was received.

### ***Reporting Requirements for Probationary Period***

10. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
11. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
12. Submit any and all information that the Board may request regarding **MS. PATKOWSKI's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
13. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.

14. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: [monitoring@nursing.ohio.gov](mailto:monitoring@nursing.ohio.gov) or by mail to:

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15. Verify that the reports and documentation required by this Order are received in the Board office.
16. Inform the Board **within five (5) business days**, in writing, of any change in employment status or of any change in residential or home address or telephone number.

### **LICENSE RESTRICTIONS**

**In addition to Probationary Terms and Restrictions, MS. PATKOWSKI's license is subject to the following License Restrictions:**

#### **Permanent Practice Restrictions**

**Upon reinstatement, MS. PATKOWSKI** shall not practice nursing as a registered nurse (1) in a patient's residence; (2) for staffing agencies or pools; (3) for an individual or group of individuals who directly engage **MS. PATKOWSKI** to provide nursing services for fees, compensation, or other consideration or who engage **MS. PATKOWSKI** as a volunteer; or (4) as an independent contractor or for *locum tenens* assignments.

**Upon reinstatement, MS. PATKOWSKI** shall not function in a position or employment where the job duties or requirements involve management of nursing and nursing responsibilities, or supervising and evaluating nursing practice. Such positions include, but are not limited to, the following: Director of Nursing, Assistant Director of Nursing, Nurse Manager, Vice President of Nursing.

**Upon reinstatement, MS. PATKOWSKI** shall not be involved in financial activities or supervise financial activities in any position that requires a license as a registered nurse.

#### **FAILURE TO COMPLY**

The stay of **MS. PATKOWSKI's** suspension shall be lifted and **MS. PATKOWSKI's** license to practice nursing as a registered nurse will be

automatically suspended if it appears to the Board that **MS. PATKOWSKI** has violated or breached any terms or conditions of this Order. Following the automatic suspension, the Board shall notify **MS. PATKOWSKI** via certified mail of the specific nature of the charges and automatic suspension of **MS. PATKOWSKI's** license. **MS. PATKOWSKI** may request a hearing regarding the charges.

### **DURATION**

The Board may only alter the probationary period imposed by this Order if: (1) the Board determines that **MS. PATKOWSKI** has complied with all aspects of this Order; and (2) the Board determines that **MS. PATKOWSKI** is able to practice nursing according to acceptable and prevailing standards of safe nursing care without Board monitoring, based upon an interview with **MS. PATKOWSKI** and review of the reports as required herein.

As indicated above under Employment Conditions, any period during which **MS. PATKOWSKI** does not work in a position within the State of Ohio for which a license to practice nursing is required shall not count toward fulfilling the probationary period imposed by this Order.

Joanna Ridgeway and J. Jane McFee voted no. A roll call vote was taken of Board members in favor of a yes vote. Motion adopted by a majority vote of the Board members present with Lisa Klenke, Patricia Sharpnack and Sandra Ranck abstaining.

This Order shall become effective immediately and is hereby entered upon the Journal of the Board for the 25<sup>th</sup> day of January 2018.

Zavala, Sherri Ann, P.N. 101005 (CASE #16-0455, #15-8509)

**Action:** It was moved by Barbara Douglas, seconded by Nancy Fellows, that the Board accept all of the Findings of Fact, Conclusions of Law, and the Recommendation in the Hearing Examiner's Report and Recommendation and that **SHERRI ANN ZAVALA's** license to practice nursing as a licensed practical nurse be **PERMANENTLY REVOKED**.

Motion adopted by a majority vote of the Board members present with Lisa Klenke and Sandra Ranck abstaining.

This Order shall become effective immediately and is hereby entered upon the Journal of the Board for the 25<sup>th</sup> day of January 2018.

Evans, Jennifer Lynn, R.N. 301996 (CASE #16-7991, #15-7664)

**Action:** It was moved by Matthew Carle, seconded by Lauralee Krabill, that the Board admit Respondent's Exhibits A through K into evidence, as the Hearing Examiner inadvertently failed to do so. It was further moved that the Board grant Respondent's motion to submit additional evidence, according to Section 119.09, ORC, and admit Respondent's Exhibit L into evidence. It was further moved that the Board accept all of the Findings of Fact and Conclusions of Law, and modify the Recommendation in the Hearing Examiner's Report and Recommendation, and that **JENNIFER LYNN EVANS's** license to practice nursing as a registered nurse in the State of Ohio be suspended for an indefinite period of time but not less than three (3) years with the conditions for reinstatement set forth below, and following reinstatement, **MS. EVANS's** license to practice nursing as a registered nurse shall be subject to a stayed suspension under the probationary terms and restrictions set forth below for a minimum period of three (3) years including the **Permanent Narcotic and Permanent Practice Restrictions**, set forth below.

The rationale for the modification is the following: The Board in its expertise finds that a suspension for a minimum period of at least three (3) years, followed by a stayed suspension with probationary terms and restrictions for a minimum period of at least three (3) years upon reinstatement, with Permanent Narcotic and Practice Restrictions, is adequate to protect the public.

### **SUSPENSION OF LICENSE**

**MS. EVANS's** license to practice as a registered nurse is suspended for an indefinite period of time but not less than three (3) years.

The Board may reinstate **MS. EVANS's** license to practice as a registered nurse if **MS. EVANS** submits a written request for reinstatement and is determined by the Board or its designee to have complied with the Conditions for Reinstatement.

### **CONDITIONS FOR REINSTATEMENT**

**MS. EVANS shall:**

1. Be determined, by the Board or its designee, to be able to practice nursing according to acceptable and prevailing standards of safe nursing care based upon an interview and review of the documentation specified in this Order.
2. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
3. Appear in person for interviews with the Board's designated

representative, as requested by the Board or its designee.

4. **Within ninety (90) days immediately prior to requesting reinstatement**, submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MS. EVANS**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MS. EVANS's** criminal records check to the Board. The Board will not consider a request for reinstatement until **MS. EVANS's** completed criminal records check, including the FBI check, is received by the Board.
5. Submit documentation of her full compliance with the requirements imposed by the Franklin County Court of Common Pleas in Case Number 16 CR 2919.

### ***Evaluations***

6. **Within ninety (90) days immediately prior to requesting reinstatement**, at **MS. EVANS's** expense, obtain a mental health evaluation from a Board approved evaluator and provide the Board with complete documentation of such evaluation. Prior to the evaluation, **MS. EVANS** shall provide the mental health evaluator with a copy of this Order. **MS. EVANS** shall execute releases to permit the mental health evaluator to obtain any information deemed appropriate and necessary for the evaluation. The mental health evaluator shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on **MS. EVANS's** license, and a statement as to whether **MS. EVANS** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
7. Provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the mental health evaluator described above until released. Further, the Board may utilize the mental health evaluator's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on **MS. EVANS's** license.
8. **Within ninety (90) days immediately prior to requesting reinstatement**, at **MS. EVANS's** expense, obtain a chemical dependency evaluation by a chemical dependency professional approved by the Board or its designee and, prior to the evaluation, provide the chemical dependency professional with a copy of this Order. **MS. EVANS** shall execute releases to permit the chemical dependency professional to obtain any information deemed appropriate and necessary for the evaluation. The chemical dependency professional shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed

on **MS. EVANS's** license, and a statement as to whether **MS. EVANS** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.

9. Provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the chemical dependency professional described above until released. Further, the Board may utilize the professional's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on **MS. EVANS's** license.

### ***Monitoring***

10. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. EVANS's** history. **MS. EVANS** shall self-administer the prescribed drugs only in the manner prescribed.
11. Abstain completely from the use of alcohol or any products containing alcohol.
12. **For a minimum, continuous period of one (1) year immediately prior to requesting reinstatement**, submit, at **MS. EVANS's** expense and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Upon and after **MS. EVANS's** initiation of drug screening, refusal to submit such specimen, or failure to submit such specimen on the day she is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MS. EVANS** shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who has received a complete copy of this Order prior to prescribing for **MS. EVANS**.
  - a. **Prior** to initiating drug screening:
    - i. Provide a copy of this Order to all treating practitioners;
    - ii. Provide to the Board a list of all treating practitioners, including addresses and telephone numbers; and
    - iii. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. EVANS**, **and** submit the report directly to the Board.

- b. **After** initiating drug screening, be under a **continuing duty** to:
- i. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
  - ii. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;
  - iii. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and
  - iv. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. EVANS** and submit the report directly to the Board.

13. **For a minimum, continuous period of one (1) year immediately prior to requesting reinstatement**, attend a minimum of one (1) meeting per week of a support or peer group meeting approved in advance by the Board, or a Twelve Step program, and provide satisfactory documentation of such attendance to the Board prior to reinstatement.

#### ***Reporting Requirements for Suspension Period***

14. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
15. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
16. Submit any and all information that the Board may request regarding **MS. EVANS's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
17. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board.
18. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: [monitoring@nursing.ohio.gov](mailto:monitoring@nursing.ohio.gov) or by mail to:

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Columbus, OH 43215-3466**

19. Verify that the reports and documentation required by this Order are received in the Board office.
20. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.

**PROBATIONARY PERIOD**

Following reinstatement, the suspension shall be stayed and **MS. EVANS's** license shall be subject to Probationary Terms and Restrictions for a minimum period of three (3) years.

**PROBATIONARY TERMS AND RESTRICTIONS**

**MS. EVANS shall:**

1. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
2. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
3. Submit documentation of her full compliance with the requirements imposed by the Franklin County Court of Common Pleas in Case Number 16 CR 2919.

***Evaluations***

4. **Within ninety (90) days of the execution of the probationary period, MS. EVANS** shall, at her expense, obtain a comprehensive physical examination by a Board approved physician for the purposes of evaluating **MS. EVANS's** fitness for duty and safety to practice nursing as a registered nurse. This Board approved physician shall provide the Board with complete documentation of **MS. EVANS's** comprehensive physical examination, and with a comprehensive assessment regarding **MS. EVANS's** fitness for duty and safety to practice nursing as a registered nurse. Prior to the examination, **MS. EVANS** shall provide the Board approved physician with a copy of this Order. Further, **MS. EVANS** shall execute releases to permit the Board approved physician performing the comprehensive physical examination and assessment to obtain any information deemed appropriate and necessary for the assessment. The evaluating physician shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on **MS. EVANS's** license to

- practice, and stating whether **MS. EVANS** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
5. The Board may utilize the Board approved physician's recommendations and conclusions from the comprehensive physical examination and assessment as a basis for additional terms and restrictions on **MS. EVANS's** license.
  6. **Upon the request of the Board or its designee and within sixty (60) days of that request, at MS. EVANS's expense, obtain a chemical dependency evaluation by a chemical dependency professional approved by the Board or its designee and, prior to the evaluation, provide the chemical dependency professional with a copy of this Order. MS. EVANS shall execute releases to permit the chemical dependency professional to obtain any information deemed appropriate and necessary for the evaluation. The chemical dependency professional shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on MS. EVANS's license, and a statement as to whether MS. EVANS is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.**
  7. **If a chemical dependency evaluation is requested, provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the chemical dependency professional described above until released. Further, the Board may utilize the professional's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on MS. EVANS's license.**

### ***Monitoring***

8. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. EVANS's** history. **MS. EVANS** shall self-administer prescribed drugs only in the manner prescribed.
9. Abstain completely from the use of alcohol or any products containing alcohol.
10. Submit, at her expense, and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Refusal to submit such specimen, or failure to submit such specimen on the day she is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in

process. The specimens submitted by **MS. EVANS** shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. EVANS's** history.

**MS. EVANS** shall:

- a. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
- b. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;
- c. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and
- d. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. EVANS** *and* submit the report directly to the Board.

### ***Employment Conditions***

11. **Upon the request of the Board or its designee, prior to working in a position where a license to practice nursing is required**, complete and submit satisfactory documentation of completion of a nurse refresher course or an extensive orientation approved in advance by the Board or its designee.
12. **Prior to accepting employment as a nurse**, each time with every employer, notify the Board, in writing. Any period during which **MS. EVANS** does not work in a position within the State of Ohio for which a license to practice nursing is required **shall not count** toward fulfilling the probationary period imposed by this Order.
13. Be under a continuing duty to provide a copy of this Order to any new employer **prior to accepting employment as a nurse**.
14. Have current employer(s), if working in a position where a license to practice nursing is required, submit written reports regarding job performance **on a quarterly basis beginning within thirty (30) days of the effective date of this Order or beginning within thirty (30) days of working in a position as a nurse**.

15. Have current employer(s) send documentation to the Board, along with the first employer report, of receipt of a copy of this Order, including the date this Order was received.

***Reporting Requirements for Probationary Period***

16. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
17. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
18. Submit any and all information that the Board may request regarding **MS. EVANS's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
19. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.
20. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: [monitoring@nursing.ohio.gov](mailto:monitoring@nursing.ohio.gov) or by mail to:

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Columbus, OH 43215-3466**

21. Verify that the reports and documentation required by this Order are received in the Board office.
22. Inform the Board **within five (5) business days**, in writing, of any change in employment status or of any change in residential or home address or telephone number.

**LICENSE RESTRICTIONS**

**In addition to Probationary Terms and Restrictions, MS. EVANS's license is subject to the following License Restrictions:**

**Permanent Narcotic Restriction**

**Upon reinstatement, MS. EVANS** shall not administer, have access to, or possess (except as prescribed for **MS. EVANS's** use by another so authorized by law who has full knowledge of **MS. EVANS's** history) any narcotics, other

controlled substances, or mood altering drugs. In addition, **MS. EVANS** shall not count narcotics or possess or carry any work keys for locked medication carts, cabinets, drawers, or containers. **MS. EVANS** shall not call in or order prescriptions or prescription refills.

### **Permanent Practice Restrictions**

**Upon reinstatement, MS. EVANS** shall not practice nursing as a registered nurse (1) in a patient's residence; (2) for staffing agencies or pools; (3) for an individual or group of individuals who directly engage **MS. EVANS** to provide nursing services for fees, compensation, or other consideration or who engage **MS. EVANS** as a volunteer; or (4) as an independent contractor or for *locum tenens* assignments.

**Upon reinstatement, MS. EVANS** shall not function in a position or employment where the job duties or requirements involve management of nursing and nursing responsibilities, or supervising and evaluating nursing practice. Such positions include, but are not limited to, the following: Director of Nursing, Assistant Director of Nursing, Nurse Manager, Vice President of Nursing.

### **FAILURE TO COMPLY**

The stay of **MS. EVANS's** suspension shall be lifted and **MS. EVANS's** license to practice nursing as a registered nurse will be automatically suspended if it appears to the Board that **MS. EVANS** has violated or breached any terms or conditions of this Order. Following the automatic suspension, the Board shall notify **MS. EVANS** via certified mail of the specific nature of the charges and automatic suspension of **MS. EVANS's** license. **MS. EVANS** may request a hearing regarding the charges.

### **DURATION**

The Board may only alter the probationary period imposed by this Order if: (1) the Board determines that **MS. EVANS** has complied with all aspects of this Order; and (2) the Board determines that **MS. EVANS** is able to practice nursing according to acceptable and prevailing standards of safe nursing care without Board monitoring, based upon an interview with **MS. EVANS** and review of the reports as required herein.

As indicated above under Employment Conditions, any period during which **MS. EVANS** does not work in a position within the State of Ohio for which a license to practice nursing is required shall not count toward fulfilling the probationary period imposed by this Order.

Motion adopted by a majority vote of the Board members present with Erin Keels, Lisa Klenke, Joanna Ridgeway and Sandra Ranck abstaining.

This Order shall become effective immediately and is hereby entered upon the Journal of the Board for the 25<sup>th</sup> day of January 2018.

Wells, Joby Martin, P.N. 154524 (CASE #15-7921)

**Action:** It was moved by Patricia Sharpnack, seconded by J. Jane McFee, that the Board accept all of the Findings of Fact, Conclusions of Law, and the Recommendation in the Hearing Examiner's Report and Recommendation and that **JOBY MARTIN WELLS's** license to practice nursing as a licensed practical nurse be **PERMANENTLY REVOKED**.

Motion adopted by a majority vote of the Board members present with Lisa Klenke and Sandra Ranck abstaining.

This Order shall become effective immediately and is hereby entered upon the Journal of the Board for the 25<sup>th</sup> day of January 2018.

Clement, Benjamin R., R.N. 378029 (CASE #15-5228)

**Action:** It was moved by J. Jane McFee, seconded by Patricia Sharpnack, that the Board accept all of the Findings of Fact and Conclusions of Law, and modify the Recommendation in the Hearing Examiner's Report and Recommendation, and that **BENJAMIN R. CLEMENT's** license to practice nursing as a registered nurse in the State of Ohio be suspended for an indefinite period of time but not less than one (1) year with the conditions for reinstatement set forth below, and following reinstatement, **MR. CLEMENT's** license to practice nursing as a registered nurse shall be subject to a stayed suspension under the probationary terms and restrictions set forth below for a minimum period of three (3) years including the **Temporary Narcotic and Temporary Practice Restrictions, unless otherwise approved in advance**, set forth below.

The rationale for the modification is the following: The Board in its expertise finds that a one (1) year suspension and temporary practice and narcotic restrictions during the probationary period will adequately protect the public. **MR. CLEMENT** had placed his license on inactive status, completed treatment and counseling, and cooperated with the Board investigation.

### **SUSPENSION OF LICENSE**

**MR. CLEMENT's** license to practice as a registered nurse is suspended for an indefinite period of time but not less than one (1) year.

The Board may reinstate **MR. CLEMENT's** license to practice as a registered nurse if **MR. CLEMENT** submits a written request for reinstatement and is determined by the Board or its designee to have complied with the Conditions for Reinstatement.

### CONDITIONS FOR REINSTATEMENT

#### **MR. CLEMENT shall:**

1. Be determined, by the Board or its designee, to be able to practice nursing according to acceptable and prevailing standards of safe nursing care based upon an interview and review of the documentation specified in this Order.
2. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
3. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
4. **Within ninety (90) days immediately prior to requesting reinstatement**, submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MR. CLEMENT**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MR. CLEMENT's** criminal records check to the Board. The Board will not consider a request for reinstatement until **MR. CLEMENT's** completed criminal records check, including the FBI check, is received by the Board.

#### ***Educational Requirements***

5. Successfully complete and submit satisfactory documentation of successful completion of the following continuing education, or other comparable course(s) approved in advance by the Board or its designee: fifteen (15) hours Substance Use Disorders; five (5) hours Documentation; five (5) hours Ethics; five (5) hours Professional Accountability and Legal Liability for Nurses; and two (2) hours Ohio Nursing Law and Rules. Continuing education required by this Order **does not meet the continuing education requirements for license renewal.**

#### ***Evaluations***

6. **Within ninety (90) days immediately prior to requesting reinstatement**, at **MR. CLEMENT's** expense, obtain a mental health evaluation from a Board approved evaluator and provide the Board with complete documentation of such evaluation. Prior to the evaluation, **MR. CLEMENT** shall provide the mental health evaluator with a copy of this Order. **MR. CLEMENT** shall execute releases to permit the mental health evaluator to obtain any information deemed appropriate and necessary for the evaluation. The mental health evaluator shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and

- monitoring, any additional restrictions that should be placed on **MR. CLEMENT's** license, and a statement as to whether **MR. CLEMENT** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
7. Provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the mental health evaluator described above until released. Further, the Board may utilize the mental health evaluator's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on **MR. CLEMENT's** license.
  8. **Within ninety (90) days immediately prior to requesting reinstatement,** at **MR. CLEMENT's** expense, obtain a chemical dependency evaluation by a chemical dependency professional approved by the Board or its designee and, prior to the evaluation, provide the chemical dependency professional with a copy of this Order. **MR. CLEMENT** shall execute releases to permit the chemical dependency professional to obtain any information deemed appropriate and necessary for the evaluation. The chemical dependency professional shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on **MR. CLEMENT's** license, and a statement as to whether **MR. CLEMENT** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
  9. Provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the chemical dependency professional described above until released. Further, the Board may utilize the professional's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on **MR. CLEMENT's** license.

### ***Monitoring***

10. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to him by another so authorized by law who has full knowledge of **MR. CLEMENT's** history. **MR. CLEMENT** shall self-administer the prescribed drugs only in the manner prescribed.
11. Abstain completely from the use of alcohol or any products containing alcohol.
12. **For a minimum, continuous period of one (1) year immediately prior to requesting reinstatement,** submit, at **MR. CLEMENT's** expense and on the day selected, blood, breath, hair or urine specimens for drug and/or

alcohol analysis at a collection site specified by the Board at such times as the Board may request. Upon and after **MR. CLEMENT's** initiation of drug screening, refusal to submit such specimen, or failure to submit such specimen on the day he is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MR. CLEMENT** shall be negative, except for substances prescribed, administered, or dispensed to him by another so authorized by law who has received a complete copy of this Order prior to prescribing for **MR. CLEMENT**.

- a. **Prior** to initiating drug screening:
  - i. Provide a copy of this Order to all treating practitioners;
  - ii. Provide to the Board a list of all treating practitioners, including addresses and telephone numbers; and
  - iii. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MR. CLEMENT**, **and** submit the report directly to the Board.
  
- b. **After** initiating drug screening, be under a **continuing duty** to:
  - i. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
  - ii. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;
  - iii. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and
  - iv. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MR. CLEMENT and** submit the report directly to the Board.

13. **For a minimum, continuous period of one (1) year immediately prior to requesting reinstatement**, attend a minimum of one (1) meeting per week of a support or peer group meeting approved in advance by the Board, or a Twelve Step program, and provide satisfactory documentation of such attendance to the Board prior to reinstatement.

***Reporting Requirements for Suspension Period***

14. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
15. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
16. Submit any and all information that the Board may request regarding **MR. CLEMENT's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
17. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board.
18. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: [monitoring@nursing.ohio.gov](mailto:monitoring@nursing.ohio.gov) or by mail to:

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19. Verify that the reports and documentation required by this Order are received in the Board office.
20. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.

**PROBATIONARY PERIOD**

Following reinstatement, the suspension shall be stayed and **MR. CLEMENT's** license shall be subject to Probationary Terms and Restrictions for a minimum period of three (3) years.

**PROBATIONARY TERMS AND RESTRICTIONS**

**MR. CLEMENT shall:**

1. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
2. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.

### ***Monitoring***

3. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to him by another so authorized by law who has full knowledge of **MR. CLEMENT's** history. **MR. CLEMENT** shall self-administer prescribed drugs only in the manner prescribed.
4. Abstain completely from the use of alcohol or any products containing alcohol.
5. Submit, at his expense, and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Refusal to submit such specimen, or failure to submit such specimen on the day he is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MR. CLEMENT** shall be negative, except for substances prescribed, administered, or dispensed to him by another so authorized by law who has full knowledge of **MR. CLEMENT's** history.

#### **MR. CLEMENT** shall:

- a. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
  - b. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;
  - c. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and
  - d. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MR. CLEMENT** *and* submit the report directly to the Board.
6. Attend a minimum of one (1) meeting per week of a support or peer group meeting approved in advance by the Board, or a Twelve Step program, and provide satisfactory documentation of such attendance to the Board every six (6) months.

### ***Employment Conditions***

7. Upon the request of the Board or its designee, prior to working in a position where a license to practice nursing is required, complete and submit satisfactory documentation of completion of a nurse refresher course or an extensive orientation approved in advance by the Board or its designee.
8. **Prior to accepting employment as a nurse**, each time with every employer, notify the Board, in writing. Any period during which **MR. CLEMENT** does not work in a position within the State of Ohio for which a license to practice nursing is required **shall not count** toward fulfilling the probationary period imposed by this Order.
9. Be under a continuing duty to provide a copy of this Order to any new employer **prior to accepting employment as a nurse**.
10. Have current employer(s), if working in a position where a license to practice nursing is required, submit written reports regarding job performance **on a quarterly basis beginning within thirty (30) days of the effective date of this Order or beginning within thirty (30) days of working in a position as a nurse**.
11. Have current employer(s) send documentation to the Board, along with the first employer report, of receipt of a copy of this Order, including the date this Order was received.

### ***Reporting Requirements for Probationary Period***

12. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
13. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
14. Submit any and all information that the Board may request regarding **MR. CLEMENT's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
15. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.
16. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: [monitoring@nursing.ohio.gov](mailto:monitoring@nursing.ohio.gov) or by mail to:

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17. Verify that the reports and documentation required by this Order are received in the Board office.
18. Inform the Board **within five (5) business days**, in writing, of any change in employment status or of any change in residential or home address or telephone number.

**LICENSE RESTRICTIONS**

**In addition to Probationary Terms and Restrictions, MR. CLEMENT's license is subject to the following License Restrictions:**

**Temporary Narcotic Restriction**

**Upon reinstatement, unless otherwise approved in advance, in writing, by the Board or its designee, MR. CLEMENT shall not administer, have access to, or possess (except as prescribed for MR. CLEMENT's use by another so authorized by law who has full knowledge of MR. CLEMENT's history) any narcotics, other controlled substances, or mood altering drugs. In addition, MR. CLEMENT shall not count narcotics or possess or carry any work keys for locked medication carts, cabinets, drawers, or containers. MR. CLEMENT shall not call in or order prescriptions or prescription refills.**

**Temporary Practice Restrictions**

**Upon reinstatement, unless otherwise approved in advance, in writing, by the Board or its designee, MR. CLEMENT shall not practice nursing as a registered nurse (1) in a patient's residence; (2) for staffing agencies or pools; (3) for an individual or group of individuals who directly engage MR. CLEMENT to provide nursing services for fees, compensation, or other consideration or who engage MR. CLEMENT as a volunteer; or (4) as an independent contractor or for *locum tenens* assignments.**

**Upon reinstatement, unless otherwise approved in advance, in writing, by the Board or its designee, MR. CLEMENT shall not function in a position or employment where the job duties or requirements involve management of nursing and nursing responsibilities, or supervising and evaluating nursing practice. Such positions include, but are not limited to, the following: Director of Nursing, Assistant Director of Nursing, Nurse Manager, Vice President of Nursing.**

### **FAILURE TO COMPLY**

The stay of **MR. CLEMENT's** suspension shall be lifted and **MR. CLEMENT's** license to practice nursing as a registered nurse will be automatically suspended if it appears to the Board that **MR. CLEMENT** has violated or breached any terms or conditions of this Order. Following the automatic suspension, the Board shall notify **MR. CLEMENT** via certified mail of the specific nature of the charges and automatic suspension of **MR. CLEMENT's** license. **MR. CLEMENT** may request a hearing regarding the charges.

### **DURATION**

The Board may only alter the probationary period imposed by this Order if: (1) the Board determines that **MR. CLEMENT** has complied with all aspects of this Order; and (2) the Board determines that **MR. CLEMENT** is able to practice nursing according to acceptable and prevailing standards of safe nursing care without Board monitoring, based upon an interview with **MR. CLEMENT** and review of the reports as required herein.

As indicated above under Employment Conditions, any period during which **MR. CLEMENT** does not work in a position within the State of Ohio for which a license to practice nursing is required shall not count toward fulfilling the probationary period imposed by this Order.

Motion adopted by a majority vote of the Board members present with Lisa Klenke, Joanna Ridgeway and Sandra Ranck abstaining.

This Order shall become effective immediately and is hereby entered upon the Journal of the Board for the 25<sup>th</sup> day of January 2018.

Hawkins, Jeanette, P.N. APPLICANT (CASE #17-1079)

**Action:** It was moved by Lauralee Krabill, seconded by Matthew Carle, that the Board consider Respondent's Objections, that were filed on January 5, 2018, beyond the statutory time period. It was further moved that the Board accept all of the Findings of Fact, Conclusions of Law, and the Recommendation in the Hearing Examiner's Report and Recommendation and that **JEANETTE HAWKINS's** Application for licensure by examination to practice nursing in the State of Ohio as a licensed practical nurse be **DENIED**.

Motion adopted by a majority vote of the Board members present with Lisa Klenke and Sandra Ranck abstaining.

This Order shall become effective immediately and is hereby entered upon the Journal of the Board for the 25<sup>th</sup> day of January 2018.

Billings, Jesse Allen, P.N. 141906 (CASE #15-8481)

**Action:** It was moved by Erin Keels, seconded by Joanna Ridgeway, that the Board redact the social security numbers from State's Exhibit 8, pages 15 and 18, in accordance with the Federal Privacy Act of 1974. It was further moved that the Board accept all of the Findings of Fact and Conclusions of Law, and modify the Recommendation in the Hearing Examiner's Report and Recommendation and that **JESSE ALLEN BILLINGS's** license to practice nursing as a licensed practical nurse in the State of Ohio be suspended and that the suspension is stayed subject to the probationary terms and restrictions set forth below for a minimum period of three (3) years including the **Temporary Narcotic and Temporary Practice Restrictions**, set forth below.

The rationale for the modification is the following: The Board in its expertise finds that additional continuing education and a mental health evaluation is necessary to protect the public. In addition, in the recommendation the hearing examiner inadvertently referred to **MR. BILLINGS** as a registered nurse rather than a licensed practical nurse.

### **PROBATIONARY PERIOD**

**MR. BILLINGS's** license shall be subject to Probationary Terms and Restrictions for a minimum period of three (3) years.

### **PROBATIONARY TERMS AND RESTRICTIONS**

**MR. BILLINGS shall:**

1. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
2. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
3. **Within ninety (90) days of the effective date of this Order**, submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MR. BILLINGS**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MR. BILLINGS's** criminal records check to the Board.

### ***Educational Requirements***

4. **Within six (6) months of the effective date of this Order**, successfully complete and submit satisfactory documentation of successful completion of the following continuing education, or other comparable course(s) approved in advance by the Board or its designee: ten (10) hours Medication Administration; and two (2) hour Ohio Nursing Law and Rules.

Continuing education required by this Order **does not meet the continuing education requirements for license renewal.**

### ***Evaluations***

5. **Within ninety (90) days of the effective date of this Order, at MR. BILLINGS's expense, obtain a mental health evaluation from a Board approved evaluator and provide the Board with complete documentation of such evaluation. Prior to the evaluation, MR. BILLINGS shall provide the mental health evaluator with a copy of this Order. MR. BILLINGS shall execute releases to permit the mental health evaluator to obtain any information deemed appropriate and necessary for the evaluation. The mental health evaluator shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on MR. BILLINGS's license, and a statement as to whether MR. BILLINGS is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.**
6. Provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the mental health evaluator described above until released. Further, the Board may utilize the mental health evaluator's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on **MR. BILLINGS's** license.
7. **Within ninety (90) days of the effective date of this Order, at MR. BILLINGS's expense, obtain a chemical dependency evaluation by a chemical dependency professional approved by the Board or its designee and, prior to the evaluation, provide the chemical dependency professional with a copy of this Order. MR. BILLINGS shall execute releases to permit the chemical dependency professional to obtain any information deemed appropriate and necessary for the evaluation. The chemical dependency professional shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on MR. BILLINGS's license, and a statement as to whether MR. BILLINGS is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.**
8. Provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the chemical dependency professional described above until released. Further, the Board may 'utilize the professional's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on **MR. BILLINGS's** license.

### ***Monitoring***

9. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to him by another so authorized by law who has full knowledge of **MR. BILLINGS's** history. **MR. BILLINGS** shall self-administer prescribed drugs only in the manner prescribed.
  
10. **Within sixty (60) days of the effective date of this Order**, submit, at his expense, and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Refusal to submit such specimen, or failure to submit such specimen on the day he is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MR. BILLINGS** shall be negative, except for substances prescribed, administered, or dispensed to him by another so authorized by law who has full knowledge of **MR. BILLINGS's** history.

#### **MR. BILLINGS** shall:

- a. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
  
- b. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;
  
- c. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and
  
- d. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MR. BILLINGS** *and* submit the report directly to the Board.

### ***Employment Conditions***

11. **Upon the request of the Board or its designee**, complete and submit satisfactory documentation of completion of a nurse refresher course or an extensive orientation approved in advance by the Board or its designee.
  
12. Notify the Board, in writing, of the name and address of any current employer **within thirty (30) days following the effective date of this Order**, or any new employer prior to accepting nursing employment. Any period during which **MR. BILLINGS** does not work in a position within the

State of Ohio for which a license to practice nursing is required **shall not count** toward fulfilling the probationary period imposed by this Order.

13. **Within fifteen (15) days of the effective date of this Order**, provide his current employer(s) with a copy of this Order, if working in a position in which a nursing license is required. **MR. BILLINGS** is under a continuing duty to provide a copy of this Order to any new employer(s) **prior to accepting employment as a nurse**.
14. Have current employer(s), if working in a position where a license to practice nursing is required, submit written reports regarding job performance **on a quarterly basis beginning within thirty (30) days of the effective date of this Order or beginning within thirty (30) days of working in a position as a nurse**.
15. Have current employer(s) send documentation to the Board, along with the first employer report, of receipt of a copy of this Order, including the date this Order was received.

***Reporting Requirements for Probationary Period***

16. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
17. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
18. Submit any and all information that the Board may request regarding **MR. BILLINGS's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
19. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.
20. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: [monitoring@nursing.ohio.gov](mailto:monitoring@nursing.ohio.gov) or by mail to:

**Compliance Unit  
Ohio Board of Nursing  
17 South High Street, Suite 660  
Columbus, OH 43215-3466**

21. Verify that the reports and documentation required by this Order are received in the Board office.

22. Inform the Board **within five (5) business days**, in writing, of any change in employment status or of any change in residential or home address or telephone number.

## **LICENSE RESTRICTIONS**

**In addition to Probationary Terms and Restrictions, MR. BILLINGS's license is subject to the following License Restrictions:**

### **Temporary Narcotic Restriction**

**MR. BILLINGS** shall not administer, have access to, or possess (except as prescribed for **MR. BILLINGS's** use by another so authorized by law who has full knowledge of **MR. BILLINGS's** history) any narcotics, other controlled substances, or mood altering drugs. In addition, **MR. BILLINGS** shall not count narcotics or possess or carry any work keys for locked medication carts, cabinets, drawers, or containers. **MR. BILLINGS** shall not call in or order prescriptions or prescription refills.

### **Temporary Practice Restrictions**

**MR. BILLINGS** shall not practice nursing as a licensed practical nurse (1) in a patient's residence; (2) for staffing agencies or pools; (3) for an individual or group of individuals who directly engage **MR. BILLINGS** to provide nursing services for fees, compensation, or other consideration or who engage **MR. BILLINGS** as a volunteer; or (4) as an independent contractor or for *locum tenens* assignments.

**MR. BILLINGS** shall not function in a position or employment where the job duties or requirements involve management of nursing and nursing responsibilities. Such positions include, but are not limited to, the following: Director of Nursing, Assistant Director of Nursing, Nurse Manager, Vice President of Nursing.

### **FAILURE TO COMPLY**

The stay of **MR. BILLINGS's** suspension shall be lifted and **MR. BILLINGS's** license to practice nursing as a licensed practical nurse will be automatically suspended if it appears to the Board that **MR. BILLINGS** has violated or breached any terms or conditions of this Order. Following the automatic suspension, the Board shall notify **MR. BILLINGS** via certified mail of the specific nature of the charges and automatic suspension of **MR. BILLINGS's** license. **MR. BILLINGS** may request a hearing regarding the charges.

## **DURATION**

The Board may only alter the probationary period imposed by this Order if: (1) the Board determines that **MR. BILLINGS** has complied with all aspects of this Order; and (2) the Board determines that **MR. BILLINGS** is able to practice nursing according to acceptable and prevailing standards of safe nursing care without Board monitoring, based upon an interview with **MR. BILLINGS** and review of the reports as required herein.

As indicated above under Employment Conditions, any period during which **MR. BILLINGS** does not work in a position within the State of Ohio for which a license to practice nursing is required shall not count toward fulfilling the probationary period imposed by this Order.

Motion adopted by a majority vote of the Board members present with Lisa Klenke and Sandra Ranck abstaining.

This Order shall become effective immediately and is hereby entered upon the Journal of the Board for the 25<sup>th</sup> day of January 2018.

Peters, Matthew Burton, R.N. 362938 (CASE #14-6913)

**Action:** It was moved by Joanna Ridgeway, seconded by Erin Keels, that the Board admit State's Exhibits 1 through 9 into evidence; of which, Exhibits 1a, 6, and 8 were admitted under seal to preserve patient confidentiality in accordance with Section 4723.28(l)(1), ORC. It was further moved that the Board accept all of the Findings of Fact and Conclusions of Law, and modify the Recommendation in the Hearing Examiner's Report and Recommendation, and that **MATTHEW BURTON PETERS's** license to practice nursing as a registered nurse in the State of Ohio be suspended for an indefinite period of time but not less than two (2) years with the conditions for reinstatement set forth below, and following reinstatement, **MR. PETERS's** license to practice nursing as a registered nurse shall be subject to a stayed suspension under the probationary terms and restrictions set forth below for a minimum period of three (3) years including the **Temporary Narcotic and Temporary Practice Restrictions, unless otherwise approved in advance**, set forth below.

The rationale for the modification is the following: The Board in its expertise finds that reducing the period of indefinite suspension to not less than two (2) years, with Temporary Narcotic and Temporary Practice restrictions is adequate to protect the public.

## **SUSPENSION OF LICENSE**

**MR. PETERS's** license to practice as a registered nurse is suspended for an indefinite period of time but not less than two (2) years.

The Board may reinstate **MR. PETERS's** license to practice as a registered nurse if **MR. PETERS** submits a written request for reinstatement and is determined by the Board or its designee to have complied with the Conditions for Reinstatement.

### CONDITIONS FOR REINSTATEMENT

#### **MR. PETERS shall:**

1. Be determined, by the Board or its designee, to be able to practice nursing according to acceptable and prevailing standards of safe nursing care based upon an interview and review of the documentation specified in this Order.
2. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
3. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
4. **Within ninety (90) days immediately prior to requesting reinstatement**, submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MR. PETERS**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MR. PETERS's** criminal records check to the Board. The Board will not consider a request for reinstatement until **MR. PETERS's** completed criminal records check, including the FBI check, is received by the Board.
5. Pay a fine of five hundred dollars (\$500.00), payable: online by credit or debit card; or payable to the "Treasurer, State of Ohio," by certified check, cashier check, or money order mailed to the attention of the Compliance Unit, Ohio Board of Nursing, 17 South High Street, Suite 660, Columbus, OH 43215-3466.

#### ***Educational Requirements***

6. Successfully complete and submit satisfactory documentation of successful completion of the following continuing education, or other comparable course(s) approved in advance by the Board or its designee: fifteen (15) hours Chemical Dependency and Substance Abuse; fifteen (15) hours Documentation; five (5) hours Professional Accountability and Legal Liability for Nurses; and two (2) hours Ohio Nursing Law and Rules. Continuing education required by this Order **does not meet the continuing education requirements for license renewal.**

### ***Evaluations***

7. **Within ninety (90) days immediately prior to requesting reinstatement**, at **MR. PETERS's** expense, obtain a mental health evaluation from a Board approved evaluator and provide the Board with complete documentation of such evaluation. Prior to the evaluation, **MR. PETERS** shall provide the mental health evaluator with a copy of this Order. **MR. PETERS** shall execute releases to permit the mental health evaluator to obtain any information deemed appropriate and necessary for the evaluation. The mental health evaluator shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on **MR. PETERS's** license, and a statement as to whether **MR. PETERS** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
8. Provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the mental health evaluator described above until released. Further, the Board may utilize the mental health evaluator's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on **MR. PETERS's** license.
9. **Within ninety (90) days immediately prior to requesting reinstatement**, at **MR. PETERS's** expense, obtain a chemical dependency evaluation by a chemical dependency professional approved by the Board or its designee and, prior to the evaluation, provide the chemical dependency professional with a copy of this Order. **MR. PETERS** shall execute releases to permit the chemical dependency professional to obtain any information deemed appropriate and necessary for the evaluation. The chemical dependency professional shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on **MR. PETERS's** license, and a statement as to whether **MR. PETERS** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
10. Provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the chemical dependency professional described above until released. Further, the Board may utilize the professional's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on **MR. PETERS's** license.

### ***Monitoring***

11. Abstain completely from personal use or possession of drugs, except

those prescribed, administered, or dispensed to him by another so authorized by law who has full knowledge of **MR. PETERS's** history. **MR. PETERS** shall self-administer the prescribed drugs only in the manner prescribed.

12. Abstain completely from the use of alcohol or any products containing alcohol.

13. **For a minimum, continuous period of two (2) years immediately prior to requesting reinstatement**, submit, at **MR. PETERS's** expense and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Upon and after **MR. PETERS's** initiation of drug screening, refusal to submit such specimen, or failure to submit such specimen on the day he is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MR. PETERS** shall be negative, except for substances prescribed, administered, or dispensed to him by another so authorized by law who has received a complete copy of this Order prior to prescribing for **MR. PETERS**.

a. **Prior** to initiating drug screening:

- i. Provide a copy of this Order to all treating practitioners;
- ii. Provide to the Board a list of all treating practitioners, including addresses and telephone numbers; and
- iii. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MR. PETERS**, **and** submit the report directly to the Board.

b. **After** initiating drug screening, be under a **continuing duty** to:

- i. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
- ii. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;
- iii. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and

- iv. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MR. PETERS** and submit the report directly to the Board.

14. **For a minimum, continuous period of two (2) years immediately prior to requesting reinstatement**, attend a minimum of one (1) meeting per week of a support or peer group meeting approved in advance by the Board, or a Twelve Step program, and provide satisfactory documentation of such attendance to the Board prior to reinstatement.

#### ***Reporting Requirements for Suspension Period***

15. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
16. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
17. Submit any and all information that the Board may request regarding **MR. PETERS's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
18. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board.
19. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: [monitoring@nursing.ohio.gov](mailto:monitoring@nursing.ohio.gov) or by mail to:

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Ohio Board of Nursing  
17 South High Street, Suite 660  
Columbus, OH 43215-3466**

20. Verify that the reports and documentation required by this Order are received in the Board office.
21. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.

#### **PROBATIONARY PERIOD**

Following reinstatement, the suspension shall be stayed and **MR. PETERS's** license shall be subject to Probationary Terms and Restrictions for a minimum period of three (3) years.

## **PROBATIONARY TERMS AND RESTRICTIONS**

### **MR. PETERS shall:**

1. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
2. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.

### ***Evaluations***

3. **Upon the request of the Board or its designee and within sixty (60) days of that request, at MR. PETERS's expense, obtain a chemical dependency evaluation by a chemical dependency professional approved by the Board or its designee and, prior to the evaluation, provide the chemical dependency professional with a copy of this Order. MR. PETERS shall execute releases to permit the chemical dependency professional to obtain any information deemed appropriate and necessary for the evaluation. The chemical dependency professional shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on MR. PETERS's license, and a statement as to whether MR. PETERS is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.**
4. **If a chemical dependency evaluation is requested, provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the chemical dependency professional described above until released. Further, the Board may utilize the professional's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on MR. PETERS's license.**

### ***Monitoring***

5. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to him by another so authorized by law who has full knowledge of **MR. PETERS's** history. **MR. PETERS** shall self-administer prescribed drugs only in the manner prescribed.
6. Abstain completely from the use of alcohol or any products containing alcohol.
7. Submit, at his expense, and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site

specified by the Board at such times as the Board may request. Refusal to submit such specimen, or failure to submit such specimen on the day he is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MR. PETERS** shall be negative, except for substances prescribed, administered, or dispensed to him by another so authorized by law who has full knowledge of **MR. PETERS's** history.

**MR. PETERS** shall:

- a. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
  - b. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;
  - c. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and
  - d. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MR. PETERS** *and* submit the report directly to the Board.
8. Attend a minimum of one (1) meeting per week of a support or peer group meeting approved in advance by the Board, or a Twelve Step program, and provide satisfactory documentation of such attendance to the Board every six (6) months.

### ***Employment Conditions***

9. **Upon the request of the Board or its designee, prior to working in a position where a license to practice nursing is required**, complete and submit satisfactory documentation of completion of a nurse refresher course or an extensive orientation approved in advance by the Board or its designee.
10. **Prior to accepting employment as a nurse**, each time with every employer, notify the Board, in writing. Any period during which **MR. PETERS** does not work in a position within the State of Ohio for which a license to practice nursing is required **shall not count** toward fulfilling the probationary period imposed by this Order.

11. Be under a continuing duty to provide a copy of this Order to any new employer **prior to accepting employment as a nurse.**
12. Have current employer(s), if working in a position where a license to practice nursing is required, submit written reports regarding job performance **on a quarterly basis beginning within thirty (30) days of the effective date of this Order or beginning within thirty (30) days of working in a position as a nurse.**
13. Have current employer(s) send documentation to the Board, along with the first employer report, of receipt of a copy of this Order, including the date this Order was received.

***Reporting Requirements for Probationary Period***

14. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
15. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
16. Submit any and all information that the Board may request regarding **MR. PETERS's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
17. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.
18. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: [monitoring@nursing.ohio.gov](mailto:monitoring@nursing.ohio.gov) or by mail to:

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Ohio Board of Nursing  
17 South High Street, Suite 660  
Columbus, OH 43215-3466**

19. Verify that the reports and documentation required by this Order are received in the Board office.
20. Inform the Board **within five (5) business days**, in writing, of any change in employment status or of any change in residential or home address or telephone number.

## LICENSE RESTRICTIONS

**In addition to Probationary Terms and Restrictions, MR. PETERS's license is subject to the following License Restrictions:**

### Temporary Narcotic Restriction

**Upon reinstatement, unless otherwise approved in advance, in writing, by the Board or its designee, MR. PETERS** shall not administer, have access to, or possess (except as prescribed for **MR. PETERS's** use by another so authorized by law who has full knowledge of **MR. PETERS's** history) any narcotics, other controlled substances, or mood altering drugs. In addition, **MR. PETERS** shall not count narcotics or possess or carry any work keys for locked medication carts, cabinets, drawers, or containers. **MR. PETERS** shall not call in or order prescriptions or prescription refills.

### Temporary Practice Restrictions

**Upon reinstatement, unless otherwise approved in advance, in writing, by the Board or its designee, MR. PETERS** shall not practice nursing as a registered nurse (1) in a patient's residence; (2) for staffing agencies or pools; (3) for an individual or group of individuals who directly engage **MR. PETERS** to provide nursing services for fees, compensation, or other consideration or who engage **MR. PETERS** as a volunteer; or (4) as an independent contractor or for *locum tenens* assignments.

**Upon reinstatement, unless otherwise approved in advance, in writing, by the Board or its designee, MR. PETERS** shall not function in a position or employment where the job duties or requirements involve management of nursing and nursing responsibilities, or supervising and evaluating nursing practice. Such positions include, but are not limited to, the following: Director of Nursing, Assistant Director of Nursing, Nurse Manager, Vice President of Nursing.

### FAILURE TO COMPLY

The stay of **MR. PETERS's** suspension shall be lifted and **MR. PETERS's** license to practice nursing as a registered nurse will be automatically suspended if it appears to the Board that **MR. PETERS** has violated or breached any terms or conditions of this Order. Following the automatic suspension, the Board shall notify **MR. PETERS** via certified mail of the specific nature of the charges and automatic suspension of **MR. PETERS's** license. **MR. PETERS** may request a hearing regarding the charges.

## **DURATION**

The Board may only alter the probationary period imposed by this Order if: (1) the Board determines that **MR. PETERS** has complied with all aspects of this Order; and (2) the Board determines that **MR. PETERS** is able to practice nursing according to acceptable and prevailing standards of safe nursing care without Board monitoring, based upon an interview with **MR. PETERS** and review of the reports as required herein.

As indicated above under Employment Conditions, any period during which **MR. PETERS** does not work in a position within the State of Ohio for which a license to practice nursing is required shall not count toward fulfilling the probationary period imposed by this Order.

Motion adopted by a majority vote of the Board members present with Lisa Klenke and Sandra Ranck abstaining.

This Order shall become effective immediately and is hereby entered upon the Journal of the Board for the 25<sup>th</sup> day of January 2018.

Davis, Muhammad Bilaal (aka"Mohammad B. Davis"), R.N. 418167, P.N. 130381 (CASE #16-4016)

**Action:** It was moved by Nancy Fellows, seconded by Barbara Douglas, that the Board accept all of the Findings of Fact and Conclusions of Law, and modify the Recommendation in the Hearing Examiner's Report and Recommendation, and that **MUHAMMAD BILAAL DAVIS's** licenses to practice nursing as a registered nurse and licensed practical nurse in the State of Ohio be suspended for an indefinite period of time but not less than two (2) years with the conditions for reinstatement set forth below, and following reinstatement, **MR. DAVIS's** licenses to practice nursing as a registered nurse and licensed practical nurse shall be subject to a stayed suspension under the probationary terms and restrictions set forth below for a minimum period of three (3) years.

The rationale for the modification is the following: The Board in its expertise finds that since **MR. DAVIS** fired a gun at a car rather than at a person(s), and there was no patient harm, that a minimum two (2) year period of suspension with a psychiatric and fitness for duty evaluation prior to reinstatement, followed by a stayed suspension with probationary terms and restrictions for a minimum period of at least three (3) years, is adequate to protect the public.

## **SUSPENSION OF LICENSE**

**MR. DAVIS's** license to practice as a registered nurse and licensed practical nurse is hereby suspended for an indefinite period of time but not less than two (2) years.

The Board may reinstate **MR. DAVIS's** license to practice as a registered nurse

and licensed practical nurse if **MR. DAVIS** submits a written request for reinstatement and is determined by the Board or its designee to have complied with the Conditions for Reinstatement.

### CONDITIONS FOR REINSTATEMENT

#### **MR. DAVIS shall:**

1. Be determined, by the Board or its designee, to be able to practice nursing according to acceptable and prevailing standards of safe nursing care based upon an interview and review of the documentation specified in this Order.
2. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
3. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
4. **Within ninety (90) days immediately prior to requesting reinstatement**, submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MR. DAVIS**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MR. DAVIS's** criminal records check to the Board. The Board will not consider a request for reinstatement until **MR. DAVIS's** completed criminal records check, including the FBI check, is received by the Board.

#### ***Evaluations***

5. **Within ninety (90) days immediately prior to requesting reinstatement**, at **MR. DAVIS's** expense, obtain a mental health evaluation from a Board approved evaluator and provide the Board with complete documentation of such evaluation. Prior to the evaluation, **MR. DAVIS** shall provide the mental health evaluator with a copy of this Order. **MR. DAVIS** shall execute releases to permit the mental health evaluator to obtain any information deemed appropriate and necessary for the evaluation. The mental health evaluator shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on **MR. DAVIS's** licenses, and a statement as to whether **MR. DAVIS** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
6. Provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the mental health evaluator described above until released. Further, the Board may utilize the mental

health evaluator's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on **MR. DAVIS's** licenses.

7. **Within ninety (90) days immediately prior to requesting reinstatement**, at **MR. DAVIS's** expense, obtain a comprehensive physical examination by a Board approved physician for the purposes of evaluating **MR. DAVIS's** fitness for duty and safety to practice nursing as a registered nurse and licensed practical nurse. This Board approved physician shall provide the Board with complete documentation of **MR. DAVIS's** comprehensive physical examination and with a comprehensive assessment regarding **MR. DAVIS's** fitness for duty and safety to practice nursing as a registered nurse and licensed practical nurse. Prior to the examination, **MR. DAVIS** shall provide the Board approved physician with a copy of this Order. **MR. DAVIS** shall execute releases to permit the Board approved physician performing the comprehensive physical examination, and assessment to obtain any information deemed appropriate and necessary for the assessment. The evaluating physician shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on **MR. DAVIS's** licenses to practice, and stating whether **MR. DAVIS** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
8. The Board may utilize the Board approved physician's recommendations and conclusions from the comprehensive physical examination and assessment as a basis for additional terms and restrictions on **MR. DAVIS's** licenses.

#### ***Reporting Requirements for Suspension Period***

9. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
10. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
11. Submit any and all information that the Board may request regarding **MR. DAVIS's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
12. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board.
13. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: [monitoring@nursing.ohio.gov](mailto:monitoring@nursing.ohio.gov) or by mail to:

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17 South High Street, Suite 660  
Columbus, OH 43215-3466**

14. Verify that the reports and documentation required by this Order are received in the Board office.
15. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.

**PROBATIONARY PERIOD**

Following reinstatement, the suspension shall be stayed and **MR. DAVIS's** licenses shall be subject to Probationary Terms and Restrictions for a minimum period of three (3) years.

**PROBATIONARY TERMS AND RESTRICTIONS**

**MR. DAVIS shall:**

1. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
2. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
3. Submit documentation of his full compliance with the requirements imposed by the Cuyahoga County Court of Common Pleas in Case Number CR-16-605890-A.

***Employment Conditions***

4. **Upon the request of the Board or its designee, prior to working in a position where a license to practice nursing is required**, complete and submit satisfactory documentation of completion of a nurse refresher course or an extensive orientation approved in advance by the Board or its designee.
5. **Prior to accepting employment as a nurse**, each time with every employer, notify the Board, in writing. Any period during which **MR. DAVIS** does not work in a position within the State of Ohio for which a license to practice nursing is required **shall not count** toward fulfilling the probationary period imposed by this Order.

6. Be under a continuing duty to provide a copy of this Order to any new employer **prior to accepting employment as a nurse.**
7. Have current employer(s), if working in a position where a license to practice nursing is required, submit written reports regarding job performance **on a quarterly basis beginning within thirty (30) days of the effective date of this Order or beginning within thirty (30) days of working in a position as a nurse.**
8. Have current employer(s) send documentation to the Board, along with the first employer report, of receipt of a copy of this Order, including the date this Order was received.

***Reporting Requirements for Probationary Period***

9. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
10. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
11. Submit any and all information that the Board may request regarding **MR. DAVIS's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
12. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.
13. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: [monitoring@nursing.ohio.gov](mailto:monitoring@nursing.ohio.gov) or by mail to:

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Ohio Board of Nursing  
17 South High Street, Suite 660  
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14. Verify that the reports and documentation required by this Order are received in the Board office.
15. Inform the Board **within five (5) business days**, in writing, of any change in employment status or of any change in residential or home address or telephone number.

### **FAILURE TO COMPLY**

The stay of **MR. DAVIS's** suspension shall be lifted and **MR. DAVIS's** licenses to practice nursing as a registered nurse and licensed practical nurse will be automatically suspended if it appears to the Board that **MR. DAVIS** has violated or breached any terms or conditions of this Order. Following the automatic suspension, the Board shall notify **MR. DAVIS** via certified mail of the specific nature of the charges and automatic suspension of **MR. DAVIS's** licenses. **MR. DAVIS** may request a hearing regarding the charges.

### **DURATION**

The Board may only alter the probationary period imposed by this Order if: (1) the Board determines that **MR. DAVIS** has complied with all aspects of this Order; and (2) the Board determines that **MR. DAVIS** is able to practice nursing according to acceptable and prevailing standards of safe nursing care without Board monitoring, based upon an interview with **MR. DAVIS** and review of the reports as required herein.

As indicated above under Employment Conditions, any period during which **MR. DAVIS** does not work in a position within the State of Ohio for which a license to practice nursing is required shall not count toward fulfilling the probationary period imposed by this Order.

Motion adopted by a majority vote of the Board members present with Lisa Klenke, Joanna Ridgeway and Sandra Ranck abstaining.

This Order shall become effective immediately and is hereby entered upon the Journal of the Board for the 25<sup>th</sup> day of January 2018.

Deitch, Holly Michele, R.N. 309431, P.N. 104693 (CASE #16-4006, #16-2509)

**Action:** It was moved by Barbara Douglas, seconded by Nancy Fellows, that the Board accept all of the Findings of Fact, Conclusions of Law, and the Recommendation in the Hearing Examiner's Report and Recommendation, and that **HOLLY MICHELE DEITCH's** licenses to practice nursing as a registered nurse and licensed practical nurse in the State of Ohio be suspended for an indefinite period of time but not less than two (2) years with the conditions for reinstatement set forth below, and following reinstatement, **MS. DEITCH's** licenses to practice nursing as a registered nurse and licensed practical nurse shall be subject to a stayed suspension under the probationary terms and restrictions set forth below for a minimum period of three (3) years including the **Temporary Narcotic and Temporary Practice Restrictions**, set forth below.

### **SUSPENSION OF LICENSE**

**MS. DEITCH's** license to practice as a registered nurse and licensed practical

nurse are suspended for an indefinite period of time but not less than two (2) years.

The Board may reinstate **MS. DEITCH's** license to practice as a registered nurse and licensed practical nurse if **MS. DEITCH** submits a written request for reinstatement and is determined by the Board or its designee to have complied with the Conditions for Reinstatement.

### **CONDITIONS FOR REINSTATEMENT**

#### **MS. DEITCH shall:**

1. Be determined, by the Board or its designee, to be able to practice nursing according to acceptable and prevailing standards of safe nursing care based upon an interview and review of the documentation specified in this Order.
2. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
3. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
4. **Within ninety (90) days immediately prior to requesting reinstatement**, submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MS. DEITCH**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MS. DEITCH's** criminal records check to the Board. The Board will not consider a request for reinstatement until **MS. DEITCH's** completed criminal records check, including the FBI check, is received by the Board.
5. Pay a fine of five hundred dollars (\$500.00), payable: online by credit or debit card; or payable to the "Treasurer, State of Ohio," by certified check, cashier check, or money order mailed to the attention of the Compliance Unit, Ohio Board of Nursing, 17 South High Street, Suite 660, Columbus, OH 43215-3466.

#### ***Educational Requirements***

6. Successfully complete and submit satisfactory documentation of successful completion of the following continuing education, or other comparable course(s) approved in advance by the Board or its designee: fifteen (15) hours Chemical Dependency and Substance Abuse; five (5) hours Professional Accountability and Legal Liability for Nurses; and two (2) hours Ohio Nursing Law and Rules. Continuing education required by this Order **does not meet the continuing education requirements for**

**license renewal.**

***Evaluations***

7. **Upon the request of the Board or its designee and within sixty (60) days of that request**, at **MS. DEITCH's** expense, obtain a chemical dependency evaluation by a chemical dependency professional approved by the Board or its designee and, prior to the evaluation, provide the chemical dependency professional with a copy of this Order. **MS. DEITCH** shall execute releases to permit the chemical dependency professional to obtain any information deemed appropriate and necessary for the evaluation. The chemical dependency professional shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on **MS. DEITCH's** licenses, and a statement as to whether **MS. DEITCH** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
8. **If a chemical dependency evaluation is requested**, provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the chemical dependency professional described above until released. Further, the Board may utilize the professional's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on **MS. DEITCH's** licenses.

***Monitoring***

9. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. DEITCH's** history. **MS. DEITCH** shall self-administer the prescribed drugs only in the manner prescribed.
10. Abstain completely from the use of alcohol or any products containing alcohol.
11. **For a minimum, continuous period of one (1) year immediately prior to requesting reinstatement**, submit, at **MS. DEITCH's** expense and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Upon and after **MS. DEITCH's** initiation of drug screening, refusal to submit such specimen, or failure to submit such specimen on the day she is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MS. DEITCH** shall be negative, except for substances prescribed, administered, or dispensed to

her by another so authorized by law who has received a complete copy of this Order prior to prescribing for **MS. DEITCH**.

- a. **Prior** to initiating drug screening:
  - i. Provide a copy of this Order to all treating practitioners;
  - ii. Provide to the Board a list of all treating practitioners, including addresses and telephone numbers; and
  - iii. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. DEITCH**, **and** submit the report directly to the Board.
  
- b. **After** initiating drug screening, be under a **continuing duty** to:
  - i. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
  - ii. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;
  - iii. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and
  - iv. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. DEITCH and** submit the report directly to the Board.

### ***Reporting Requirements for Suspension Period***

12. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
13. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
14. Submit any and all information that the Board may request regarding **MS. DEITCH's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
15. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board.

16. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: [monitoring@nursing.ohio.gov](mailto:monitoring@nursing.ohio.gov) or by mail to:

**Compliance Unit  
Ohio Board of Nursing  
17 South High Street, Suite 660  
Columbus, OH 43215-3466**

17. Verify that the reports and documentation required by this Order are received in the Board office.
18. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.

### **PROBATIONARY PERIOD**

Following reinstatement, the suspension shall be stayed and **MS. DEITCH's** licenses shall be subject to Probationary Terms and Restrictions for a minimum period of three (3) years.

### **PROBATIONARY TERMS AND RESTRICTIONS**

**MS. DEITCH shall:**

1. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
2. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.

#### ***Evaluations***

3. **Upon the request of the Board or its designee and within sixty (60) days of that request**, at **MS. DEITCH's** expense, obtain a chemical dependency evaluation by a chemical dependency professional approved by the Board or its designee and, prior to the evaluation, provide the chemical dependency professional with a copy of this Order. **MS. DEITCH** shall execute releases to permit the chemical dependency professional to obtain any information deemed appropriate and necessary for the evaluation. The chemical dependency professional shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on **MS. DEITCH's** licenses, and a statement as to whether **MS. DEITCH** is capable of practicing nursing according to acceptable and prevailing

standards of safe nursing care.

4. **If a chemical dependency evaluation is requested**, provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the chemical dependency professional described above until released. Further, the Board may utilize the professional's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on **MS. DEITCH's** licenses.

### ***Monitoring***

5. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. DEITCH's** history. **MS. DEITCH** shall self-administer prescribed drugs only in the manner prescribed.
6. Abstain completely from the use of alcohol or any products containing alcohol.
7. Submit, at her expense, and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Refusal to submit such specimen, or failure to submit such specimen on the day she is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MS. DEITCH** shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. DEITCH's** history.

### **MS. DEITCH shall:**

- a. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
- b. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;
- c. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and
- d. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. DEITCH and** submit the report

directly to the Board.

### ***Employment Conditions***

8. **Upon the request of the Board or its designee, prior to working in a position where a license to practice nursing is required**, complete and submit satisfactory documentation of completion of a nurse refresher course or an extensive orientation approved in advance by the Board or its designee.
9. **Prior to accepting employment as a nurse**, each time with every employer, notify the Board, in writing. Any period during which **MS. DEITCH** does not work in a position within the State of Ohio for which a license to practice nursing is required **shall not count** toward fulfilling the probationary period imposed by this Order.
10. Be under a continuing duty to provide a copy of this Order to any new employer **prior to accepting employment as a nurse**.
11. Have current employer(s), if working in a position where a license to practice nursing is required, submit written reports regarding job performance **on a quarterly basis beginning within thirty (30) days of the effective date of this Order or beginning within thirty (30) days of working in a position as a nurse**.
12. Have current employer(s) send documentation to the Board, along with the first employer report, of receipt of a copy of this Order, including the date this Order was received.

### ***Reporting Requirements for Probationary Period***

13. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
14. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
15. Submit any and all information that the Board may request regarding **MS. DEITCH's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
16. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.
17. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this

Order shall be sent by email to: [monitoring@nursing.ohio.gov](mailto:monitoring@nursing.ohio.gov) or by mail to:

**Compliance Unit  
Ohio Board of Nursing  
17 South High Street, Suite 660  
Columbus, OH 43215-3466**

18. Verify that the reports and documentation required by this Order are received in the Board office.
19. Inform the Board **within five (5) business days**, in writing, of any change in employment status or of any change in residential or home address or telephone number.

### **LICENSE RESTRICTIONS**

**In addition to Probationary Terms and Restrictions, MS. DEITCH's licenses are subject to the following License Restrictions:**

#### **Temporary Narcotic Restriction**

**Upon reinstatement, MS. DEITCH** shall not administer, have access to, or possess (except as prescribed for **MS. DEITCH's** use by another so authorized by law who has full knowledge of **MS. DEITCH's** history) any narcotics, other controlled substances, or mood altering drugs. In addition, **MS. DEITCH** shall not count narcotics or possess or carry any work keys for locked medication carts, cabinets, drawers, or containers. **MS. DEITCH** shall not call in or order prescriptions or prescription refills.

#### **Temporary Practice Restrictions**

**Upon reinstatement, MS. DEITCH** shall not practice nursing as a registered nurse or licensed practical nurse (1) in a patient's residence; (2) for staffing agencies or pools; (3) for an individual or group of individuals who directly engage **MS. DEITCH** to provide nursing services for fees, compensation, or other consideration or who engage **MS. DEITCH** as a volunteer; or (4) as an independent contractor or for *locum tenens* assignments.

**Upon reinstatement, MS. DEITCH** shall not function in a position or employment where the job duties or requirements involve management of nursing and nursing responsibilities, or supervising and evaluating nursing practice. Such positions include, but are not limited to, the following: Director of Nursing, Assistant Director of Nursing, Nurse Manager, Vice President of Nursing.

### **FAILURE TO COMPLY**

The stay of **MS. DEITCH's** suspension shall be lifted and **MS. DEITCH's** licenses to practice nursing as a registered nurse and licensed practical nurse will be automatically suspended if it appears to the Board that **MS. DEITCH** has violated or breached any terms or conditions of this Order. Following the automatic suspension, the Board shall notify **MS. DEITCH** via certified mail of the specific nature of the charges and automatic suspension of **MS. DEITCH's** licenses. **MS. DEITCH** may request a hearing regarding the charges.

### **DURATION**

The Board may only alter the probationary period imposed by this Order if: (1) the Board determines that **MS. DEITCH** has complied with all aspects of this Order; and (2) the Board determines that **MS. DEITCH** is able to practice nursing according to acceptable and prevailing standards of safe nursing care without Board monitoring, based upon an interview with **MS. DEITCH** and review of the reports as required herein.

As indicated above under Employment Conditions, any period during which **MS. DEITCH** does not work in a position within the State of Ohio for which a license to practice nursing is required shall not count toward fulfilling the probationary period imposed by this Order.

Motion adopted by a majority vote of the Board members present with Lisa Klenke and Sandra Ranck abstaining.

This Order shall become effective immediately and is hereby entered upon the Journal of the Board for the 25<sup>th</sup> day of January 2018.

Donchess, Sheri Lynn, R.N. 260078 (CASE #12-4009)

**Action:** It was moved by Matthew Carle, seconded by Lauralee Krabill, that the Board grant Respondent's Motion to substitute Exhibit C, and redact the social security number from State's Exhibit 7, page 42 in accordance with the Federal Privacy Act of 1974. It was further moved that the Board accept all of the Findings of Fact, Conclusions of Law, and the Recommendation in the Hearing Examiner's Report and Recommendation and that **SHERI LYNN DONCHESS's** request to reinstate her license to practice nursing in the State of Ohio as a registered nurse be **DENIED**.

Motion adopted by a majority vote of the Board members present with Lisa Klenke and Sandra Ranck abstaining.

This Order shall become effective immediately and is hereby entered upon the Journal of the Board for the 25<sup>th</sup> day of January 2018.

Cadwell, Heather Jane, R.N. 276824 (CASE #15-4125)

**Action:** It was moved by Patricia Sharpnack, seconded by Lauralee Krabill, that the Board modify the Hearing Examiner's Conclusions of Law and find that Ms. Caldwell has an impairment as set forth in Section 4723.28(B)(11), ORC, and Rule 4723-3-02, OAC. It was further moved that the Board accept all of the Findings of Fact and remaining Conclusions of Law, and modify the Recommendation in the Hearing Examiner's Report and Recommendation, and that **HEATHER JANE CADWELL's** license to practice nursing as a registered nurse in the State of Ohio be suspended for an indefinite period of time but not less than two (2) years, retroactive to the date **MS. CADWELL's** license was placed on inactive status (May 10, 2017), with the conditions for reinstatement set forth below, and following reinstatement, **MS. CADWELL's** license to practice nursing as a registered nurse shall be subject to a stayed suspension under the probationary terms and restrictions set forth below for a minimum period of three (3) years including the **Temporary Narcotic and Temporary Practice Restrictions**, set forth below.

The rationale for this modification is as follows: Although the Hearing Examiner found that **MS. CADWELL** is in recovery, her mental health is stable and her depressive disorder has not recurred, the Hearing Examiner also found that **MS. CADWELL** should be subject to Board monitoring and supervision, consistent with a finding that **MS. CADWELL** has an impairment, as that term is defined in Rule 4723-3-02 of the Administrative Code. Furthermore, the Board in its expertise finds that a longer period of suspension and probation is necessary to adequately protect the public and facilitate **MS. CADWELL's** recovery.

### **SUSPENSION OF LICENSE**

**MS. CADWELL's** license to practice as a registered nurse is hereby suspended for an indefinite period of time but not less than two (2) years, retroactive to May 10, 2017.

The Board may reinstate **MS. CADWELL's** license to practice as a registered nurse if **MS. CADWELL** submits a written request for reinstatement and is determined by the Board or its designee to have complied with the Conditions for Reinstatement.

### **CONDITIONS FOR REINSTATEMENT**

**MS. CADWELL shall:**

1. Be determined, by the Board or its designee, to be able to practice nursing according to acceptable and prevailing standards of safe nursing care based upon an interview and review of the documentation specified in this Order.

2. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
3. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
4. **Within ninety (90) days immediately prior to requesting reinstatement**, submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MS. CADWELL**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MS. CADWELL's** criminal records check to the Board. The Board will not consider a request for reinstatement until **MS. CADWELL's** completed criminal records check, including the FBI check, is received by the Board.

### ***Evaluations***

5. **Within ninety (90) days immediately prior to requesting reinstatement**, at **MS. CADWELL's** expense, obtain a comprehensive physical examination by a Board approved physician for the purposes of evaluating **MS. CADWELL's** fitness for duty and safety to practice nursing as a registered nurse. This Board approved physician shall provide the Board with complete documentation of **MS. CADWELL's** comprehensive physical examination and with a comprehensive assessment regarding **MS. CADWELL's** fitness for duty and safety to practice nursing as a registered nurse. Prior to the examination, **MS. CADWELL** shall provide the Board approved physician with a copy of this Order. **MS. CADWELL** shall execute releases to permit the Board approved physician performing the comprehensive physical examination, and assessment to obtain any information deemed appropriate and necessary for the assessment. The evaluating physician shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on **MS. CADWELL's** license to practice, and stating whether **MS. CADWELL** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
6. The Board may utilize the Board approved physician's recommendations and conclusions from the comprehensive physical examination and assessment as a basis for additional terms and restrictions on **MS. CADWELL's** license.
7. **Within ninety (90) days immediately prior to requesting reinstatement**, at **MS. CADWELL's** expense, obtain a chemical dependency evaluation by a chemical dependency professional approved by the Board or its designee and, prior to the evaluation, provide the chemical dependency professional with a copy of this Order. **MS.**

- CADWELL** shall execute releases to permit the chemical dependency professional to obtain any information deemed appropriate and necessary for the evaluation. The chemical dependency professional shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on **MS. CADWELL's** license, and a statement as to whether **MS. CADWELL** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
8. Provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the chemical dependency professional described above until released. Further, the Board may utilize the professional's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on **MS. CADWELL's** license.

### ***Monitoring***

9. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. CADWELL's** history. **MS. CADWELL** shall self-administer the prescribed drugs only in the manner prescribed.
10. Abstain completely from the use of alcohol or any products containing alcohol.
11. **For a minimum, continuous period of one (1) year immediately prior to requesting reinstatement**, submit, at **MS. CADWELL's** expense and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Upon and after **MS. CADWELL's** initiation of drug screening, refusal to submit such specimen, or failure to submit such specimen on the day she is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MS. CADWELL** shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who has received a complete copy of this Order prior to prescribing for **MS. CADWELL**.
- a. ***Prior*** to initiating drug screening:
- i. Provide a copy of this Order to all treating practitioners;
  - ii. Provide to the Board a list of all treating practitioners, including addresses and telephone numbers; and

- iii. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. CADWELL**, *and* submit the report directly to the Board.
- b. **After** initiating drug screening, be under a **continuing duty** to:
- i. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
  - ii. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;
  - iii. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and
  - iv. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. CADWELL** *and* submit the report directly to the Board.

***Reporting Requirements for Suspension Period***

12. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
13. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
14. Submit any and all information that the Board may request regarding **MS. CADWELL's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
15. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board.
16. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: [monitoring@nursing.ohio.gov](mailto:monitoring@nursing.ohio.gov) or by mail to:

**Compliance Unit  
Ohio Board of Nursing  
17 South High Street, Suite 660**

**Columbus, OH 43215-3466**

17. Verify that the reports and documentation required by this Order are received in the Board office.
18. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.

**PROBATIONARY PERIOD**

Following reinstatement, the suspension shall be stayed and **MS. CADWELL's** license shall be subject to Probationary Terms and Restrictions for a minimum period of three (3) years.

**PROBATIONARY TERMS AND RESTRICTIONS**

**MS. CADWELL shall:**

1. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
2. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.

***Monitoring***

3. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. CADWELL's** history. **MS. CADWELL** shall self-administer prescribed drugs only in the manner prescribed.
4. Abstain completely from the use of alcohol or any products containing alcohol.
5. Submit, at her expense, and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Refusal to submit such specimen, or failure to submit such specimen on the day she is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MS. CADWELL** shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. CADWELL's** history.

**MS. CADWELL** shall:

- a. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
- b. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;
- c. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and
- d. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. CADWELL** and submit the report directly to the Board.

***Employment Conditions***

6. **Upon the request of the Board or its designee, prior to working in a position where a license to practice nursing is required**, complete and submit satisfactory documentation of completion of a nurse refresher course or an extensive orientation approved in advance by the Board or its designee.
7. **Prior to accepting employment as a nurse**, each time with every employer, notify the Board, in writing. Any period during which **MS. CADWELL** does not work in a position within the State of Ohio for which a license to practice nursing is required **shall not count** toward fulfilling the probationary period imposed by this Order.
8. Be under a continuing duty to provide a copy of this Order to any new employer **prior to accepting employment as a nurse**.
9. Have current employer(s), if working in a position where a license to practice nursing is required, submit written reports regarding job performance **on a quarterly basis beginning within thirty (30) days of the effective date of this Order or beginning within thirty (30) days of working in a position as a nurse**.
10. Have current employer(s) send documentation to the Board, along with the first employer report, of receipt of a copy of this Order, including the date this Order was received.

### ***Reporting Requirements for Probationary Period***

11. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
12. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
13. Submit any and all information that the Board may request regarding **MS. CADWELL's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
14. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.
15. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: [monitoring@nursing.ohio.gov](mailto:monitoring@nursing.ohio.gov) or by mail to:

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Ohio Board of Nursing  
17 South High Street, Suite 660  
Columbus, OH 43215-3466**

16. Verify that the reports and documentation required by this Order are received in the Board office.
17. Inform the Board **within five (5) business days**, in writing, of any change in employment status or of any change in residential or home address or telephone number.

### **LICENSE RESTRICTIONS**

**In addition to Probationary Terms and Restrictions, MS. CADWELL's license is subject to the following License Restrictions:**

#### **Temporary Narcotic Restriction**

**Upon reinstatement, MS. CADWELL shall not administer, have access to, or possess (except as prescribed for MS. CADWELL's use by another so authorized by law who has full knowledge of MS. CADWELL's history) any narcotics, other controlled substances, or mood altering drugs. In addition, MS. CADWELL shall not count narcotics or possess or carry any work keys for locked medication carts, cabinets, drawers, or containers. MS. CADWELL shall**

not call in or order prescriptions or prescription refills.

### **Temporary Practice Restrictions**

**Upon reinstatement, MS. CADWELL** shall not practice nursing as a registered nurse (1) in a patient's residence; (2) for staffing agencies or pools; (3) for an individual or group of individuals who directly engage **MS. CADWELL** to provide nursing services for fees, compensation, or other consideration or who engage **MS. CADWELL** as a volunteer; or (4) as an independent contractor or for *locum tenens* assignments.

**Upon reinstatement, MS. CADWELL** shall not function in a position or employment where the job duties or requirements involve management of nursing and nursing responsibilities, or supervising and evaluating nursing practice. Such positions include, but are not limited to, the following: Director of Nursing, Assistant Director of Nursing, Nurse Manager, Vice President of Nursing.

### **FAILURE TO COMPLY**

The stay of **MS. CADWELL's** suspension shall be lifted and **MS. CADWELL's** license to practice nursing as a registered nurse will be automatically suspended if it appears to the Board that **MS. CADWELL** has violated or breached any terms or conditions of this Order. Following the automatic suspension, the Board shall notify **MS. CADWELL** via certified mail of the specific nature of the charges and automatic suspension of **MS. CADWELL's** license. **MS. CADWELL** may request a hearing regarding the charges.

### **DURATION**

The Board may only alter the probationary period imposed by this Order if: (1) the Board determines that **MS. CADWELL** has complied with all aspects of this Order; and (2) the Board determines that **MS. CADWELL** is able to practice nursing according to acceptable and prevailing standards of safe nursing care without Board monitoring, based upon an interview with **MS. CADWELL** and review of the reports as required herein.

As indicated above under Employment Conditions, any period during which **MS. CADWELL** does not work in a position within the State of Ohio for which a license to practice nursing is required shall not count toward fulfilling the probationary period imposed by this Order.

Motion adopted by a majority vote of the Board members present with Lisa Klenke and Sandra Ranck abstaining.

This Order shall become effective immediately and is hereby entered upon the Journal of the Board for the 25<sup>th</sup> day of January 2018.

Ashcraft, Rhonda Marie (fka "Rhonda Marie Hunt"), R.N. 308615 (CASE #17-0594)

**Action:** It was moved by J. Jane McFee, seconded by Patricia Sharpnack, that the Board redact a social security number from State's Exhibit 8, page 6, in accordance with the Federal Privacy Act of 1974. It was further moved that the Board accept all of the Findings of Fact and Conclusions of Law, and modify the Recommendation in the Hearing Examiner's Report and Recommendation, and that **RHONDA MARIE ASHCRAFT's** license to practice nursing as a registered nurse in the State of Ohio be suspended for an indefinite period of time but not less than two (2) years, retroactive to March 9, 2017, with the conditions for reinstatement set forth below, and following reinstatement, **MS. ASHCRAFT's** license to practice nursing as a registered nurse shall be subject to a stayed suspension under the probationary terms and restrictions set forth below for a minimum period of three (3) years including the **Temporary Narcotic and Temporary Practice Restrictions**, set forth below.

The rationale for the modification is the following: The Board in its expertise finds that **MS. ASHCRAFT's** license has been suspended since March 9, 2017, and that a retroactive suspension is adequate to protect the public.

### SUSPENSION OF LICENSE

**MS. ASHCRAFT's** license to practice as a registered nurse is suspended for an indefinite period of time but not less than two (2) years, retroactive to March 9, 2017.

The Board may reinstate **MS. ASHCRAFT's** license to practice as a registered nurse if **MS. ASHCRAFT** submits a written request for reinstatement and is determined by the Board or its designee to have complied with the Conditions for Reinstatement.

### CONDITIONS FOR REINSTATEMENT

**MS. ASHCRAFT shall:**

1. Be determined, by the Board or its designee, to be able to practice nursing according to acceptable and prevailing standards of safe nursing care based upon an interview and review of the documentation specified in this Order.
2. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
3. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.

4. **Within ninety (90) days immediately prior to requesting reinstatement**, submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MS. ASHCRAFT**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MS. ASHCRAFT's** criminal records check to the Board. The Board will not consider a request for reinstatement until **MS. ASHCRAFT's** completed criminal records check, including the FBI check, is received by the Board.
5. Pay a fine of five hundred dollars (\$500.00), payable: online by credit or debit card; or payable to the "Treasurer, State of Ohio," by certified check, cashier check, or money order mailed to the attention of the Compliance Unit, Ohio Board of Nursing, 17 South High Street, Suite 660, Columbus, OH 43215-3466.

### ***Educational Requirements***

6. Successfully complete and submit satisfactory documentation of successful completion of the following continuing education, or other comparable course(s) approved in advance by the Board or its designee: ten (10) hours Substance Use Disorders; five (5) hours Professional Accountability and Legal Liability for Nurses; and two (2) hours Ohio Nursing Law and Rules. Continuing education required by this Order **does not meet the continuing education requirements for license renewal**.

### ***Evaluations***

7. **Within six (6) months immediately prior to requesting reinstatement**, at **MS. ASHCRAFT's** expense, obtain a chemical dependency evaluation by a chemical dependency professional approved by the Board or its designee and, prior to the evaluation, provide the chemical dependency professional with a copy of this Order. **MS. ASHCRAFT** shall execute releases to permit the chemical dependency professional to obtain any information deemed appropriate and necessary for the evaluation. The chemical dependency professional shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on **MS. ASHCRAFT's** license, and a statement as to whether **MS. ASHCRAFT** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
8. Provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the chemical dependency professional described above until released. Further, the Board may utilize the professional's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on **MS.**

**ASHCRAFT's** license.

***Monitoring***

9. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. ASHCRAFT's** history. **MS. ASHCRAFT** shall self-administer the prescribed drugs only in the manner prescribed.
10. Abstain completely from the use of alcohol or any products containing alcohol.
11. **For a minimum, continuous period of one (1) year immediately prior to requesting reinstatement**, submit, at **MS. ASHCRAFT's** expense and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Upon and after **MS. ASHCRAFT's** initiation of drug screening, refusal to submit such specimen, or failure to submit such specimen on the day she is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MS. ASHCRAFT** shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who has received a complete copy of this Order prior to prescribing for **MS. ASHCRAFT**.
  - a. **Prior** to initiating drug screening:
    - i. Provide a copy of this Order to all treating practitioners;
    - ii. Provide to the Board a list of all treating practitioners, including addresses and telephone numbers; and
    - iii. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. ASHCRAFT**, **and** submit the report directly to the Board.
  - b. **After** initiating drug screening, be under a **continuing duty** to:
    - i. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
    - ii. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;

- iii. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and
- iv. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. ASHCRAFT** and submit the report directly to the Board.

12. **For a minimum, continuous period of one (1) year immediately prior to requesting reinstatement**, attend a minimum of one (1) meeting per week of a support or peer group meeting approved in advance by the Board, or a Twelve Step program, and provide satisfactory documentation of such attendance to the Board prior to reinstatement.

***Reporting Requirements for Suspension Period***

- 13. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
- 14. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
- 15. Submit any and all information that the Board may request regarding **MS. ASHCRAFT's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
- 16. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board.
- 17. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: [monitoring@nursing.ohio.gov](mailto:monitoring@nursing.ohio.gov) or by mail to:

**Compliance Unit  
Ohio Board of Nursing  
17 South High Street, Suite 660  
Columbus, OH 43215-3466**

- 18. Verify that the reports and documentation required by this Order are received in the Board office.
- 19. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.

## **PROBATIONARY PERIOD**

Following reinstatement, the suspension shall be stayed and **MS. ASHCRAFT's** license shall be subject to Probationary Terms and Restrictions for a minimum period of three (3) years.

## **PROBATIONARY TERMS AND RESTRICTIONS**

### **MS. ASHCRAFT shall:**

1. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
2. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.

### ***Evaluations***

3. **Upon the request of the Board or its designee and within sixty (60) days of that request**, at **MS. ASHCRAFT's** expense, obtain a chemical dependency evaluation by a chemical dependency professional approved by the Board or its designee and, prior to the evaluation, provide the chemical dependency professional with a copy of this Order. **MS. ASHCRAFT** shall execute releases to permit the chemical dependency professional to obtain any information deemed appropriate and necessary for the evaluation. The chemical dependency professional shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on **MS. ASHCRAFT's** license, and a statement as to whether **MS. ASHCRAFT** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
4. **If a chemical dependency evaluation is requested**, provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the chemical dependency professional described above until released. Further, the Board may utilize the professional's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on **MS. ASHCRAFT's** license.

### ***Monitoring***

5. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. ASHCRAFT's** history. **MS. ASHCRAFT** shall self-administer prescribed drugs only in the manner prescribed.

6. Abstain completely from the use of alcohol or any products containing alcohol.
7. Submit, at her expense, and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Refusal to submit such specimen, or failure to submit such specimen on the day she is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MS. ASHCRAFT** shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. ASHCRAFT's** history.

**MS. ASHCRAFT** shall:

- a. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
  - b. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;
  - c. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and
  - d. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. ASHCRAFT** *and* submit the report directly to the Board.
8. Attend a minimum of one (1) meeting per week of a support or peer group meeting approved in advance by the Board, or a Twelve Step program, and provide satisfactory documentation of such attendance to the Board every six (6) months.

***Employment Conditions***

9. **Upon the request of the Board or its designee, prior to working in a position where a license to practice nursing is required**, complete and submit satisfactory documentation of completion of a nurse refresher course or an extensive orientation approved in advance by the Board or its designee.
10. **Prior to accepting employment as a nurse**, each time with every employer, notify the Board, in writing. Any period during which **MS.**

- ASHCRAFT** does not work in a position within the State of Ohio for which a license to practice nursing is required **shall not count** toward fulfilling the probationary period imposed by this Order.
11. Be under a continuing duty to provide a copy of this Order to any new employer **prior to accepting employment as a nurse.**
  12. Have current employer(s), if working in a position where a license to practice nursing is required, submit written reports regarding job performance **on a quarterly basis beginning within thirty (30) days of the effective date of this Order or beginning within thirty (30) days of working in a position as a nurse.**
  13. Have current employer(s) send documentation to the Board, along with the first employer report, of receipt of a copy of this Order, including the date this Order was received.

***Reporting Requirements for Probationary Period***

14. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
15. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
16. Submit any and all information that the Board may request regarding **MS. ASHCRAFT's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
17. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.
18. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: [monitoring@nursing.ohio.gov](mailto:monitoring@nursing.ohio.gov) or by mail to:

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Ohio Board of Nursing  
17 South High Street, Suite 660  
Columbus, OH 43215-3466**

19. Verify that the reports and documentation required by this Order are received in the Board office.

20. Inform the Board **within five (5) business days**, in writing, of any change in employment status or of any change in residential or home address or telephone number.

## **LICENSE RESTRICTIONS**

**In addition to Probationary Terms and Restrictions, MS. ASHCRAFT's license is subject to the following License Restrictions:**

### **Temporary Narcotic Restriction**

**Upon reinstatement, MS. ASHCRAFT** shall not administer, have access to, or possess (except as prescribed for **MS. ASHCRAFT's** use by another so authorized by law who has full knowledge of **MS. ASHCRAFT's** history) any narcotics, other controlled substances, or mood altering drugs. In addition, **MS. ASHCRAFT** shall not count narcotics or possess or carry any work keys for locked medication carts, cabinets, drawers, or containers. **MS. ASHCRAFT** shall not call in or order prescriptions or prescription refills.

### **Temporary Practice Restrictions**

**Upon reinstatement, MS. ASHCRAFT** shall not practice nursing as a registered nurse (1) in a patient's residence; (2) for staffing agencies or pools; (3) for an individual or group of individuals who directly engage **MS. ASHCRAFT** to provide nursing services for fees, compensation, or other consideration or who engage **MS. ASHCRAFT** as a volunteer; or (4) as an independent contractor or for *locum tenens* assignments.

**Upon reinstatement, MS. ASHCRAFT** shall not function in a position or employment where the job duties or requirements involve management of nursing and nursing responsibilities, or supervising and evaluating nursing practice. Such positions include, but are not limited to, the following: Director of Nursing, Assistant Director of Nursing, Nurse Manager, Vice President of Nursing.

## **FAILURE TO COMPLY**

The stay of **MS. ASHCRAFT's** suspension shall be lifted and **MS. ASHCRAFT's** license to practice nursing as a registered nurse will be automatically suspended if it appears to the Board that **MS. ASHCRAFT** has violated or breached any terms or conditions of this Order. Following the automatic suspension, the Board shall notify **MS. ASHCRAFT** via certified mail of the specific nature of the charges and automatic suspension of **MS. ASHCRAFT's** license. **MS. ASHCRAFT** may request a hearing regarding the charges.

## **DURATION**

The Board may only alter the probationary period imposed by this Order if: (1) the Board determines that **MS. ASHCRAFT** has complied with all aspects of this Order; and (2) the Board determines that **MS. ASHCRAFT** is able to practice nursing according to acceptable and prevailing standards of safe nursing care without Board monitoring, based upon an interview with **MS. ASHCRAFT** and review of the reports as required herein.

As indicated above under Employment Conditions, any period during which **MS. ASHCRAFT** does not work in a position within the State of Ohio for which a license to practice nursing is required shall not count toward fulfilling the probationary period imposed by this Order.

Motion adopted by a majority vote of the Board members present with Lisa Klenke and Sandra Ranck abstaining.

This Order shall become effective immediately and is hereby entered upon the Journal of the Board for the 25<sup>th</sup> day of January 2018.

Clark, Michael Richard, R.N. 289148 (CASE #15-5580)

**Action:** It was moved by Lauralee Krabill, seconded by Erin Keels, that the Board accept all of the Findings of Fact, Conclusions of Law, and the Recommendation in the Hearing Examiner's Report and Recommendation and that the Board's January 26, 2017 Default Order be upheld, and that **MR. CLARK's** license to practice nursing as a registered nurse in the State of Ohio be suspended for an indefinite period of time effective January 26, 2017, with the conditions for reinstatement as set forth in the January 26, 2017 Default Order.

Motion adopted by a majority vote of the Board members present with Lisa Klenke and Sandra Ranck abstaining.

This Order shall become effective immediately and is hereby entered upon the Journal of the Board for the 25<sup>th</sup> day of January 2018.

## **BOARD HEARING COMMITTEE PANEL**

Holman Hughes, Melessia A., R.N. 324521 (CASE #16-5055, #16-4604, #16-4938)

**Action:** It was moved by Erin Keels, seconded by Joanna Ridgeway, that the Board accept all of the Findings of Fact, Conclusions, and the Recommendation in the Board Hearing Committee's Report and Recommendation, and that **MELESSIA A. HOLMAN HUGHES's** license to practice nursing as a registered nurse in the State of Ohio be suspended for an indefinite period of time but not less than two (2) years, retroactive to November 17, 2016, with the conditions for reinstatement set forth below, and following reinstatement, **MS. HOLMAN HUGHES's** license to practice nursing as a registered nurse shall be subject to a stayed suspension under the probationary terms and restrictions set forth below

for a minimum period of three (3) years including the **Temporary Practice Restrictions, unless otherwise approved in advance**, set forth below.

### **SUSPENSION OF LICENSE**

**MS. HOLMAN HUGHES's** license to practice as a registered nurse is suspended for an indefinite period of time but not less than two (2) years, retroactive to November 17, 2016.

The Board may reinstate **MS. HOLMAN HUGHES's** license to practice as a registered nurse if **MS. HOLMAN HUGHES** submits a written request for reinstatement and is determined by the Board or its designee to have complied with the Conditions for Reinstatement.

### **CONDITIONS FOR REINSTATEMENT**

**MS. HOLMAN HUGHES shall:**

1. Be determined, by the Board or its designee, to be able to practice nursing according to acceptable and prevailing standards of safe nursing care based upon an interview and review of the documentation specified in this Order.
2. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
3. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
4. **Within ninety (90) days immediately prior to requesting reinstatement**, submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MS. HOLMAN HUGHES**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MS. HOLMAN HUGHES's** criminal records check to the Board. The Board will not consider a request for reinstatement until **MS. HOLMAN HUGHES's** completed criminal records check, including the FBI check, is received by the Board.

### ***Evaluations***

5. **Upon the request of the Board or its designee and within sixty (60) days of that request**, at **MS. HOLMAN HUGHES's** expense, obtain a mental health evaluation from a Board approved evaluator and provide the Board with complete documentation of such evaluation. Prior to the evaluation, **MS. HOLMAN HUGHES** shall provide the mental health evaluator with a copy of this Order. **MS. HOLMAN HUGHES** shall

- execute releases to permit the mental health evaluator to obtain any information deemed appropriate and necessary for the evaluation. The mental health evaluator shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on **MS. HOLMAN HUGHES's** license, and a statement as to whether **MS. HOLMAN HUGHES** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
6. **If a mental health evaluation is requested**, provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the mental health evaluator described above until released. Further, the Board may utilize the mental health evaluator's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on **MS. HOLMAN HUGHES's** license.
  7. **Within ninety (90) days immediately prior to requesting reinstatement**, at **MS. HOLMAN HUGHES's** expense, obtain a chemical dependency evaluation by a chemical dependency professional approved by the Board or its designee and, prior to the evaluation, provide the chemical dependency professional with a copy of this Order. **MS. HOLMAN HUGHES** shall execute releases to permit the chemical dependency professional to obtain any information deemed appropriate and necessary for the evaluation. The chemical dependency professional shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on **MS. HOLMAN HUGHES's** license, and a statement as to whether **MS. HOLMAN HUGHES** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
  8. Provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the chemical dependency professional described above until released. Further, the Board may utilize the professional's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on **MS. HOLMAN HUGHES's** license.

### ***Monitoring***

9. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. HOLMAN HUGHES's** history. **MS. HOLMAN HUGHES** shall self-administer the prescribed drugs only in the manner prescribed.
10. Abstain completely from the use of alcohol or any products containing

alcohol.

11. **For a minimum, continuous period of one (1) year immediately prior to requesting reinstatement**, submit, at **MS. HOLMAN HUGHES's** expense and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Upon and after **MS. HOLMAN HUGHES's** initiation of drug screening, refusal to submit such specimen, or failure to submit such specimen on the day she is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MS. HOLMAN HUGHES** shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who has received a complete copy of this Order prior to prescribing for **MS. HOLMAN HUGHES**.

a. **Prior** to initiating drug screening:

- i. Provide a copy of this Order to all treating practitioners;
- ii. Provide to the Board a list of all treating practitioners, including addresses and telephone numbers; and
- iii. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. HOLMAN HUGHES**, *and* submit the report directly to the Board.

b. **After** initiating drug screening, be under a **continuing duty** to:

- i. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
- ii. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;
- iii. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and
- iv. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. HOLMAN HUGHES** *and* submit the report directly to the Board.

12. **For a minimum, continuous period of one (1) year immediately prior to requesting reinstatement**, attend a minimum of one (1) meeting per week of a support or peer group meeting approved in advance by the Board, or a Twelve Step program, and provide satisfactory documentation of such attendance to the Board prior to reinstatement.

***Reporting Requirements for Suspension Period***

13. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
14. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
15. Submit any and all information that the Board may request regarding **MS. HOLMAN HUGHES's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
16. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board.
17. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: [monitoring@nursing.ohio.gov](mailto:monitoring@nursing.ohio.gov) or by mail to:

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18. Verify that the reports and documentation required by this Order are received in the Board office.
19. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.

**PROBATIONARY PERIOD**

Following reinstatement, the suspension shall be stayed and **MS. HOLMAN HUGHES's** license shall be subject to Probationary Terms and Restrictions for a minimum period of three (3) years.

**PROBATIONARY TERMS AND RESTRICTIONS**

**MS. HOLMAN HUGHES shall:**

1. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
2. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.

### ***Monitoring***

3. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. HOLMAN HUGHES's** history. **MS. HOLMAN HUGHES** shall self-administer prescribed drugs only in the manner prescribed.
4. Abstain completely from the use of alcohol or any products containing alcohol.
5. Submit, at her expense, and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Refusal to submit such specimen, or failure to submit such specimen on the day she is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MS. HOLMAN HUGHES** shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. HOLMAN HUGHES's** history.

#### **MS. HOLMAN HUGHES** shall:

- a. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
  - b. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;
  - c. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and
  - d. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. HOLMAN HUGHES** *and* submit the report directly to the Board.
6. Attend a minimum of one (1) meeting per week of a support or peer group

meeting approved in advance by the Board, or a Twelve Step program, and provide satisfactory documentation of such attendance to the Board every six (6) months.

### ***Employment Conditions***

7. **Upon the request of the Board or its designee, prior to working in a position where a license to practice nursing is required**, complete and submit satisfactory documentation of completion of a nurse refresher course or an extensive orientation approved in advance by the Board or its designee.
8. **Prior to accepting employment as a nurse**, each time with every employer, notify the Board, in writing. Any period during which **MS. HOLMAN HUGHES** does not work in a position within the State of Ohio for which a license to practice nursing is required **shall not count** toward fulfilling the probationary period imposed by this Order.
9. Be under a continuing duty to provide a copy of this Order to any new employer **prior to accepting employment as a nurse**.
10. Have current employer(s), if working in a position where a license to practice nursing is required, submit written reports regarding job performance **on a quarterly basis beginning within thirty (30) days of the effective date of this Order or beginning within thirty (30) days of working in a position as a nurse**.
11. Have current employer(s) send documentation to the Board, along with the first employer report, of receipt of a copy of this Order, including the date this Order was received.

### ***Reporting Requirements for Probationary Period***

12. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
13. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
14. Submit any and all information that the Board may request regarding **MS. HOLMAN HUGHES's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
15. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.

16. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: [monitoring@nursing.ohio.gov](mailto:monitoring@nursing.ohio.gov) or by mail to:

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Ohio Board of Nursing  
17 South High Street, Suite 660  
Columbus, OH 43215-3466**

17. Verify that the reports and documentation required by this Order are received in the Board office.
18. Inform the Board **within five (5) business days**, in writing, of any change in employment status or of any change in residential or home address or telephone number.

### **LICENSE RESTRICTIONS**

**In addition to Probationary Terms and Restrictions, MS. HOLMAN HUGHES's license is subject to the following License Restrictions:**

#### **Temporary Practice Restrictions**

**Upon reinstatement, unless otherwise approved in advance, in writing, by the Board or its designee, MS. HOLMAN HUGHES** shall not practice nursing as a registered nurse (1) in a patient's residence; (2) for staffing agencies or pools; (3) for an individual or group of individuals who directly engage **MS. HOLMAN HUGHES** to provide nursing services for fees, compensation, or other consideration or who engage **MS. HOLMAN HUGHES** as a volunteer; or (4) as an independent contractor or for *locum tenens* assignments.

**Upon reinstatement, unless otherwise approved in advance, in writing, by the Board or its designee, MS. HOLMAN HUGHES** shall not function in a position or employment where the job duties or requirements involve management of nursing and nursing responsibilities, or supervising and evaluating nursing practice. Such positions include, but are not limited to, the following: Director of Nursing, Assistant Director of Nursing, Nurse Manager, Vice President of Nursing.

#### **FAILURE TO COMPLY**

The stay of **MS. HOLMAN HUGHES's** suspension shall be lifted and **MS. HOLMAN HUGHES's** license to practice nursing as a registered nurse will be automatically suspended if it appears to the Board that **MS. HOLMAN HUGHES** has violated or breached any terms or conditions of this Order. Following the

automatic suspension, the Board shall notify **MS. HOLMAN HUGHES** via certified mail of the specific nature of the charges and automatic suspension of **MS. HOLMAN HUGHES's** license. **MS. HOLMAN HUGHES** may request a hearing regarding the charges.

### **DURATION**

The Board may only alter the probationary period imposed by this Order if: (1) the Board determines that **MS. HOLMAN HUGHES** has complied with all aspects of this Order; and (2) the Board determines that **MS. HOLMAN HUGHES** is able to practice nursing according to acceptable and prevailing standards of safe nursing care without Board monitoring, based upon an interview with **MS. HOLMAN HUGHES** and review of the reports as required herein.

As indicated above under Employment Conditions, any period during which **MS. HOLMAN HUGHES** does not work in a position within the State of Ohio for which a license to practice nursing is required shall not count toward fulfilling the probationary period imposed by this Order.

Motion adopted by a majority vote of the Board members present with Nancy Fellows, Lisa Klenke and Sandra Ranck abstaining.

This Order shall become effective immediately and is hereby entered upon the Journal of the Board for the 25<sup>th</sup> day of January 2018.

Hoffman, Dawn Marie, P.N. 110978 (CASE #15-7295)

**Action:** It was moved by Joanna Ridgeway, seconded by Erin Keels, that the Board accept all of the Findings of Fact, Conclusions, and the Recommendation in the Board Hearing Committee's Report and Recommendation, and that **DAWN MARIE HOFFMAN's** license to practice nursing as a licensed practical nurse in the State of Ohio be suspended for an indefinite period of time but not less than six (6) months with the conditions for reinstatement set forth below, and following reinstatement, **MS. HOFFMAN's** license to practice nursing as a licensed practical nurse shall be subject to a stayed suspension under the probationary terms and restrictions set forth below for a minimum period of two (2) years including the **Temporary Practice Restrictions, unless otherwise approved in advance**, set forth below.

### **SUSPENSION OF LICENSE**

**MS. HOFFMAN's** license to practice as a licensed practical nurse is suspended for an indefinite period of time but not less than six (6) months.

The Board may reinstate **MS. HOFFMAN's** license to practice as a licensed practical nurse if **MS. HOFFMAN** submits a written request for reinstatement and is determined by the Board or its designee to have complied with the Conditions

for Reinstatement.

### **CONDITIONS FOR REINSTATEMENT**

#### **MS. HOFFMAN shall:**

1. Be determined, by the Board or its designee, to be able to practice nursing according to acceptable and prevailing standards of safe nursing care based upon an interview and review of the documentation specified in this Order.
2. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
3. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
4. **Within ninety (90) days immediately prior to requesting reinstatement**, submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MS. HOFFMAN**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MS. HOFFMAN's** criminal records check to the Board. The Board will not consider a request for reinstatement until **MS. HOFFMAN's** completed criminal records check, including the FBI check, is received by the Board.

#### ***Evaluations***

5. **Within ninety (90) days immediately prior to requesting reinstatement**, at **MS. HOFFMAN's** expense, obtain a comprehensive physical examination by a Board approved physician for the purposes of evaluating **MS. HOFFMAN's** fitness for duty and safety to practice nursing as a licensed practical nurse. This Board approved physician shall provide the Board with complete documentation of **MS. HOFFMAN's** comprehensive physical examination and with a comprehensive assessment regarding **MS. HOFFMAN's** fitness for duty and safety to practice nursing as a licensed practical nurse. Prior to the examination, **MS. HOFFMAN** shall provide the Board approved physician with a copy of this Order. **MS. HOFFMAN** shall execute releases to permit the Board approved physician performing the comprehensive physical examination, and assessment to obtain any information deemed appropriate and necessary for the assessment. The evaluating physician shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on **MS. HOFFMAN's** license to practice, and stating whether **MS. HOFFMAN** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.

6. The Board may utilize the Board approved physician's recommendations and conclusions from the comprehensive physical examination and assessment as a basis for additional terms and restrictions on **MS. HOFFMAN's** license.
7. **Within ninety (90) days immediately prior to requesting reinstatement,** at **MS. HOFFMAN's** expense, obtain a chemical dependency evaluation by a chemical dependency professional approved by the Board or its designee and, prior to the evaluation, provide the chemical dependency professional with a copy of this Order. **MS. HOFFMAN** shall execute releases to permit the chemical dependency professional to obtain any information deemed appropriate and necessary for the evaluation. The chemical dependency professional shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on **MS. HOFFMAN's** license, and a statement as to whether **MS. HOFFMAN** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
8. Provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the chemical dependency professional described above until released. Further, the Board may utilize the professional's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on **MS. HOFFMAN's** license.

### ***Monitoring***

9. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. HOFFMAN's** history. **MS. HOFFMAN** shall self-administer the prescribed drugs only in the manner prescribed.
10. **For a minimum, continuous period of six (6) months immediately prior to requesting reinstatement,** submit, at **MS. HOFFMAN's** expense and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Upon and after **MS. HOFFMAN's** initiation of drug screening, refusal to submit such specimen, or failure to submit such specimen on the day she is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MS. HOFFMAN** shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who

has received a complete copy of this Order prior to prescribing for **MS. HOFFMAN**.

- a. **Prior** to initiating drug screening:
  - i. Provide a copy of this Order to all treating practitioners;
  - ii. Provide to the Board a list of all treating practitioners, including addresses and telephone numbers; and
  - iii. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. HOFFMAN**, *and* submit the report directly to the Board.
  
- b. **After** initiating drug screening, be under a **continuing duty** to:
  - i. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
  - ii. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;
  - iii. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and
  - iv. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. HOFFMAN** *and* submit the report directly to the Board.

### ***Reporting Requirements for Suspension Period***

11. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
12. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
13. Submit any and all information that the Board may request regarding **MS. HOFFMAN's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
14. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board.

15. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: [monitoring@nursing.ohio.gov](mailto:monitoring@nursing.ohio.gov) or by mail to:

**Compliance Unit  
Ohio Board of Nursing  
17 South High Street, Suite 660  
Columbus, OH 43215-3466**

16. Verify that the reports and documentation required by this Order are received in the Board office.
17. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.

### **PROBATIONARY PERIOD**

Following reinstatement, the suspension shall be stayed and **MS. HOFFMAN's** license shall be subject to Probationary Terms and Restrictions for a minimum period of two (2) years.

### **PROBATIONARY TERMS AND RESTRICTIONS**

**MS. HOFFMAN shall:**

1. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
2. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.

#### ***Monitoring***

3. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. HOFFMAN's** history. **MS. HOFFMAN** shall self-administer prescribed drugs only in the manner prescribed.
4. Submit, at her expense, and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Refusal to submit such specimen, or failure to submit such specimen on the day she is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of

Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MS. HOFFMAN** shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. HOFFMAN's** history.

**MS. HOFFMAN** shall:

- a. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
- b. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;
- c. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and
- d. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. HOFFMAN** *and* submit the report directly to the Board.

### ***Employment Conditions***

5. **Upon the request of the Board or its designee, prior to working in a position where a license to practice nursing is required**, complete and submit satisfactory documentation of completion of a nurse refresher course or an extensive orientation approved in advance by the Board or its designee.
6. *Not work in a position that requires a nursing license **until** she submits a written request to work as a nurse and obtains written approval from the Board or its designee. **MS. HOFFMAN must be in full compliance with this Order prior to requesting to work as a nurse.***
7. **Prior to accepting employment as a nurse**, each time with every employer, notify the Board, in writing. Any period during which **MS. HOFFMAN** does not work in a position within the State of Ohio for which a license to practice nursing is required **shall not count** toward fulfilling the probationary period imposed by this Order.
8. Be under a continuing duty to provide a copy of this Order to any new employer **prior to accepting employment as a nurse.**
9. Have current employer(s), if working in a position where a license to practice nursing is required, submit written reports regarding job

performance **on a quarterly basis beginning within thirty (30) days of the effective date of this Order or beginning within thirty (30) days of working in a position as a nurse.**

10. Have current employer(s) send documentation to the Board, along with the first employer report, of receipt of a copy of this Order, including the date this Order was received.

### ***Reporting Requirements for Probationary Period***

11. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
12. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
13. Submit any and all information that the Board may request regarding **MS. HOFFMAN's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
14. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.
15. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: [monitoring@nursing.ohio.gov](mailto:monitoring@nursing.ohio.gov) or by mail to:

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Ohio Board of Nursing  
17 South High Street, Suite 660  
Columbus, OH 43215-3466**

16. Verify that the reports and documentation required by this Order are received in the Board office.
17. Inform the Board **within five (5) business days**, in writing, of any change in employment status or of any change in residential or home address or telephone number.

### **LICENSE RESTRICTIONS**

**In addition to Probationary Terms and Restrictions, MS. HOFFMAN's license is subject to the following License Restrictions:**

### **Temporary Practice Restrictions**

**Upon reinstatement, unless otherwise approved in advance, in writing, by the Board or its designee, MS. HOFFMAN** shall not practice nursing as a licensed practical nurse (1) in a patient's residence; (2) for staffing agencies or pools; (3) for an individual or group of individuals who directly engage **MS. HOFFMAN** to provide nursing services for fees, compensation, or other consideration or who engage **MS. HOFFMAN** as a volunteer; or (4) as an independent contractor or for *locum tenens* assignments.

**Upon reinstatement, unless otherwise approved in advance, in writing, by the Board or its designee, MS. HOFFMAN** shall not function in a position or employment where the job duties or requirements involve management of nursing and nursing responsibilities. Such positions include, but are not limited to, the following: Director of Nursing, Assistant Director of Nursing, Nurse Manager, Vice President of Nursing.

### **FAILURE TO COMPLY**

The stay of **MS. HOFFMAN's** suspension shall be lifted and **MS. HOFFMAN's** license to practice nursing as a licensed practical nurse will be automatically suspended if it appears to the Board that **MS. HOFFMAN** has violated or breached any terms or conditions of this Order. Following the automatic suspension, the Board shall notify **MS. HOFFMAN** via certified mail of the specific nature of the charges and automatic suspension of **MS. HOFFMAN's** license. **MS. HOFFMAN** may request a hearing regarding the charges.

### **DURATION**

The Board may only alter the probationary period imposed by this Order if: (1) the Board determines that **MS. HOFFMAN** has complied with all aspects of this Order; and (2) the Board determines that **MS. HOFFMAN** is able to practice nursing according to acceptable and prevailing standards of safe nursing care without Board monitoring, based upon an interview with **MS. HOFFMAN** and review of the reports as required herein.

As indicated above under Employment Conditions, any period during which **MS. HOFFMAN** does not work in a position within the State of Ohio for which a license to practice nursing is required shall not count toward fulfilling the probationary period imposed by this Order.

Motion adopted by a majority vote of the Board members present with Nancy Fellows, Lisa Klenke and Sandra Ranck abstaining.

This Order shall become effective immediately and is hereby entered upon the Journal of the Board for the 25<sup>th</sup> day of January 2018.

Silvernell, Stephanie, P.N. 072351 (CASE #16-5560)

**Action:** It was moved by Barbara Douglas, seconded by Matthew Carle, that the Board accept all of the Findings of Fact, Conclusions, and the Recommendation in the Board Hearing Committee's Report and Recommendation, and that **STEPHANIE SILVERNELL's** license to practice nursing as a licensed practical nurse in the State of Ohio be suspended for an indefinite period of time but not less than two (2) years with the conditions for reinstatement set forth below, and following reinstatement, **MS. SILVERNELL's** license to practice nursing as a licensed practical nurse shall be subject to a stayed suspension under the probationary terms and restrictions set forth below for a minimum period of three (3) years including the **Temporary Narcotic Restrictions, unless otherwise approved in advance, Permanent Narcotic Restrictions, and Permanent Practice Restrictions, unless otherwise approved in advance,** set forth below.

### **SUSPENSION OF LICENSE**

**MS. SILVERNELL's** license to practice as a licensed practical nurse is suspended for an indefinite period of time but not less than two (2) years.

The Board may reinstate **MS. SILVERNELL's** license to practice as a licensed practical nurse if **MS. SILVERNELL** submits a written request for reinstatement and is determined by the Board or its designee to have complied with the Conditions for Reinstatement.

### **CONDITIONS FOR REINSTATEMENT**

**MS. SILVERNELL shall:**

1. Be determined, by the Board or its designee, to be able to practice nursing according to acceptable and prevailing standards of safe nursing care based upon an interview and review of the documentation specified in this Order.
2. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
3. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
4. **Within ninety (90) days immediately prior to requesting reinstatement,** submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MS. SILVERNELL**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MS. SILVERNELL's** criminal records check to the Board. The Board will not consider a request for

reinstatement until **MS. SILVERNELL's** completed criminal records check, including the FBI check, is received by the Board.

### ***Evaluations***

5. **Within ninety (90) days immediately prior to requesting reinstatement, at MS. SILVERNELL's expense, obtain a mental health evaluation from a Board approved evaluator and provide the Board with complete documentation of such evaluation. Prior to the evaluation, MS. SILVERNELL shall provide the mental health evaluator with a copy of this Order. MS. SILVERNELL shall execute releases to permit the mental health evaluator to obtain any information deemed appropriate and necessary for the evaluation. The mental health evaluator shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on MS. SILVERNELL's license, and a statement as to whether MS. SILVERNELL is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.**
6. Provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the mental health evaluator described above until released. Further, the Board may utilize the mental health evaluator's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on **MS. SILVERNELL's** license.
7. **Within ninety (90) days immediately prior to requesting reinstatement, at MS. SILVERNELL's expense, obtain a chemical dependency evaluation by a chemical dependency professional approved by the Board or its designee and, prior to the evaluation, provide the chemical dependency professional with a copy of this Order. MS. SILVERNELL shall execute releases to permit the chemical dependency professional to obtain any information deemed appropriate and necessary for the evaluation. The chemical dependency professional shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on MS. SILVERNELL's license, and a statement as to whether MS. SILVERNELL is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.**
8. Provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the chemical dependency professional described above until released. Further, the Board may utilize the professional's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on **MS. SILVERNELL's** license.

### **Monitoring**

9. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. SILVERNELL's** history. **MS. SILVERNELL** shall self-administer the prescribed drugs only in the manner prescribed.
  
10. **For a minimum, continuous period of one (1) year immediately prior to requesting reinstatement,** submit, at **MS. SILVERNELL's** expense and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Upon and after **MS. SILVERNELL's** initiation of drug screening, refusal to submit such specimen, or failure to submit such specimen on the day she is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MS. SILVERNELL** shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who has received a complete copy of this Order prior to prescribing for **MS. SILVERNELL.**
  - a. **Prior** to initiating drug screening:
    - i. Provide a copy of this Order to all treating practitioners;
    - ii. Provide to the Board a list of all treating practitioners, including addresses and telephone numbers; and
    - iii. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. SILVERNELL, and** submit the report directly to the Board.
  
  - b. **After** initiating drug screening, be under a **continuing duty** to:
    - i. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
    - ii. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;
    - iii. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and

- iv. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. SILVERNELL** and submit the report directly to the Board.

### ***Reporting Requirements for Suspension Period***

11. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
12. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
13. Submit any and all information that the Board may request regarding **MS. SILVERNELL's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
14. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board.
15. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: [monitoring@nursing.ohio.gov](mailto:monitoring@nursing.ohio.gov) or by mail to:

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16. Verify that the reports and documentation required by this Order are received in the Board office.
17. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.

### **PROBATIONARY PERIOD**

Following reinstatement, the suspension shall be stayed and **MS. SILVERNELL's** license shall be subject to Probationary Terms and Restrictions for a minimum period of three (3) years.

### **PROBATIONARY TERMS AND RESTRICTIONS**

**MS. SILVERNELL shall:**

1. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
2. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.

### ***Monitoring***

3. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. SILVERNELL's** history. **MS. SILVERNELL** shall self-administer prescribed drugs only in the manner prescribed.
4. Submit, at her expense, and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Refusal to submit such specimen, or failure to submit such specimen on the day she is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MS. SILVERNELL** shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. SILVERNELL's** history.

#### **MS. SILVERNELL shall:**

- a. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
- b. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;
- c. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and
- d. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. SILVERNELL** *and* submit the report directly to the Board.

### ***Employment Conditions***

5. **Upon the request of the Board or its designee, prior to working in a position where a license to practice nursing is required, complete and**

- submit satisfactory documentation of completion of a nurse refresher course or an extensive orientation approved in advance by the Board or its designee.
6. **Prior to accepting employment as a nurse**, each time with every employer, notify the Board, in writing. Any period during which **MS. SILVERNELL** does not work in a position within the State of Ohio for which a license to practice nursing is required **shall not count** toward fulfilling the probationary period imposed by this Order.
  7. Be under a continuing duty to provide a copy of this Order to any new employer **prior to accepting employment as a nurse**.
  8. Have current employer(s), if working in a position where a license to practice nursing is required, submit written reports regarding job performance **on a quarterly basis beginning within thirty (30) days of the effective date of this Order or beginning within thirty (30) days of working in a position as a nurse**.
  9. Have current employer(s) send documentation to the Board, along with the first employer report, of receipt of a copy of this Order, including the date this Order was received.

***Reporting Requirements for Probationary Period***

10. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
11. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
12. Submit any and all information that the Board may request regarding **MS. SILVERNELL's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
13. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.
14. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: [monitoring@nursing.ohio.gov](mailto:monitoring@nursing.ohio.gov) or by mail to:

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17 South High Street, Suite 660**

**Columbus, OH 43215-3466**

15. Verify that the reports and documentation required by this Order are received in the Board office.
16. Inform the Board **within five (5) business days**, in writing, of any change in employment status or of any change in residential or home address or telephone number.

**LICENSE RESTRICTIONS**

**In addition to Probationary Terms and Restrictions, MS. SILVERNELL's license is subject to the following License Restrictions:**

**Temporary Narcotic Restriction**

**Upon reinstatement, unless otherwise approved in advance, in writing, by the Board or its designee, MS. SILVERNELL** shall not administer, have access to, or possess (except as prescribed for **MS. SILVERNELL's** use by another so authorized by law who has full knowledge of **MS. SILVERNELL's** history) any narcotics, other controlled substances, or mood altering drugs. In addition, **MS. SILVERNELL** shall not count narcotics or possess or carry any work keys for locked medication carts, cabinets, drawers, or containers.

**Permanent Narcotic Restriction**

**MS. SILVERNELL** shall not call in or order prescriptions or prescription refills.

**Permanent Practice Restrictions**

**Upon reinstatement, unless otherwise approved in advance, in writing, by the Board or its designee, MS. SILVERNELL** shall not practice nursing as a licensed practical nurse (1) in a patient's residence; (2) for staffing agencies or pools; (3) for an individual or group of individuals who directly engage **MS. SILVERNELL** to provide nursing services for fees, compensation, or other consideration or who engage **MS. SILVERNELL** as a volunteer; or (4) as an independent contractor or for *locum tenens* assignments.

**Upon reinstatement, unless otherwise approved in advance, in writing, by the Board or its designee, MS. SILVERNELL** shall not function in a position or employment where the job duties or requirements involve management of nursing and nursing responsibilities. Such positions include, but are not limited to, the following: Director of Nursing, Assistant Director of Nursing, Nurse Manager, Vice President of Nursing.

### **FAILURE TO COMPLY**

The stay of **MS. SILVERNELL's** suspension shall be lifted and **MS. SILVERNELL's** license to practice nursing as a licensed practical nurse will be automatically suspended if it appears to the Board that **MS. SILVERNELL** has violated or breached any terms or conditions of this Order. Following the automatic suspension, the Board shall notify **MS. SILVERNELL** via certified mail of the specific nature of the charges and automatic suspension of **MS. SILVERNELL's** license. **MS. SILVERNELL** may request a hearing regarding the charges.

### **DURATION**

The Board may only alter the probationary period imposed by this Order if: (1) the Board determines that **MS. SILVERNELL** has complied with all aspects of this Order; and (2) the Board determines that **MS. SILVERNELL** is able to practice nursing according to acceptable and prevailing standards of safe nursing care without Board monitoring, based upon an interview with **MS. SILVERNELL** and review of the reports as required herein.

As indicated above under Employment Conditions, any period during which **MS. SILVERNELL** does not work in a position within the State of Ohio for which a license to practice nursing is required shall not count toward fulfilling the probationary period imposed by this Order.

Motion adopted by a majority vote of the Board members present with Nancy Fellows, Lisa Klenke and Sandra Ranck abstaining.

This Order shall become effective immediately and is hereby entered upon the Journal of the Board for the 25<sup>th</sup> day of January 2018.

### **NO REQUEST FOR HEARING**

Johnson, Lisa Gaye, P.N. 120066 (CASE #17-3968)

**Action:** It was moved by Patricia Sharpnack, seconded by J. Jane McFee, that upon consideration of the charges stated against **LISA GAYE JOHNSON** in the July 27, 2017 Notice of Automatic Suspension and Opportunity for Hearing and evidence supporting the charges, the Board find that **MS. JOHNSON** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice of Automatic Suspension and Opportunity for Hearing, and that **MS. JOHNSON's** license to practice nursing as a licensed practical nurse be suspended for an indefinite period of time with the conditions for reinstatement set forth below, and following reinstatement, **MS. JOHNSON's** license to practice nursing as a licensed practical nurse shall be subject to a stayed suspension under the probationary terms and restrictions set forth below for a minimum period of three (3) years.

### **SUSPENSION OF LICENSE**

**MS. JOHNSON's** license to practice as a licensed practical nurse is suspended for an indefinite period of time.

The Board may reinstate **MS. JOHNSON's** license to practice as a licensed practical nurse if **MS. JOHNSON** submits a written request for reinstatement and is determined by the Board or its designee to have complied with the Conditions for Reinstatement.

### **CONDITIONS FOR REINSTATEMENT**

**MS. JOHNSON shall:**

1. Be determined, by the Board or its designee, to be able to practice nursing according to acceptable and prevailing standards of safe nursing care based upon an interview and review of the documentation specified in this Order.
2. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
3. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
4. **Within ninety (90) days immediately prior to requesting reinstatement**, submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MS. JOHNSON**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MS. JOHNSON's** criminal records check to the Board. The Board will not consider a request for reinstatement until **MS. JOHNSON's** completed criminal records check, including the FBI check, is received by the Board.
5. Pay a fine of one thousand dollars (\$1,000.00), payable: online by credit or debit card; or payable to the "Treasurer, State of Ohio," by certified check, cashier check, or money order mailed to the attention of the Compliance Unit, Ohio Board of Nursing, 17 South High Street, Suite 660, Columbus, OH 43215-3466.

### ***Educational Requirements***

6. Successfully complete and submit satisfactory documentation of successful completion of the following continuing education, or other comparable course(s) approved in advance by the Board or its designee: five (5) hours Disciplinary Actions, and two (2) hours Ohio Nursing Law and Rules. Continuing education required by this Order **does not meet**

**the continuing education requirements for license renewal.**

***Evaluations***

7. **Within ninety (90) days immediately prior to requesting reinstatement, at MS. JOHNSON's expense, obtain a chemical dependency evaluation by a chemical dependency professional approved by the Board or its designee and, prior to the evaluation, provide the chemical dependency professional with a copy of this Order and the Notice of Automatic Suspension and Opportunity for Hearing. MS. JOHNSON shall execute releases to permit the chemical dependency professional to obtain any information deemed appropriate and necessary for the evaluation. The chemical dependency professional shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on MS. JOHNSON's license, and a statement as to whether MS. JOHNSON is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.**
8. Provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the chemical dependency professional described above until released. Further, the Board may utilize the professional's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on **MS. JOHNSON's** license.

***Reporting Requirements for Suspension Period***

9. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
10. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
11. Submit any and all information that the Board may request regarding **MS. JOHNSON's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
12. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board.
13. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: [monitoring@nursing.ohio.gov](mailto:monitoring@nursing.ohio.gov) or by mail to:

**Ohio Board of Nursing  
17 South High Street, Suite 660  
Columbus, OH 43215-3466**

14. Verify that the reports and documentation required by this Order are received in the Board office.
15. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.

**PROBATIONARY PERIOD**

Following reinstatement, the suspension shall be stayed and **MS. JOHNSON's** license shall be subject to Probationary Terms and Restrictions for a minimum period of three (3) years.

**PROBATIONARY TERMS AND RESTRICTIONS**

**MS. JOHNSON shall:**

1. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
2. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
3. **Within ninety (90) days immediately prior to requesting release from probation**, submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MS. JOHNSON**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MS. JOHNSON's** criminal records check to the Board. The Board will not consider a request for release from probation until **MS. JOHNSON's** completed criminal records check, including the FBI check, is received by the Board.

***Monitoring***

4. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. JOHNSON's** history. **MS. JOHNSON** shall self-administer prescribed drugs only in the manner prescribed.
5. **If recommended by the chemical dependency evaluation**, abstain completely from the use of alcohol or any products containing alcohol.
6. **If recommended by the chemical dependency evaluation**, submit, at

her expense, and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Refusal to submit such specimen, or failure to submit such specimen on the day she is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MS. JOHNSON** shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. JOHNSON's** history.

**MS. JOHNSON** shall:

- a. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
  - b. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;
  - c. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and
  - d. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. JOHNSON** *and* submit the report directly to the Board.
7. **If recommended by the chemical dependency evaluation**, attend a minimum of one (1) meeting per week of a support or peer group meeting approved in advance by the Board, or a Twelve Step program, and provide satisfactory documentation of such attendance to the Board every six (6) months.

### ***Employment Conditions***

8. **Upon the request of the Board or its designee, prior to working in a position where a license to practice nursing is required**, complete and submit satisfactory documentation of completion of a nurse refresher course or an extensive orientation approved in advance by the Board or its designee.
9. **Prior to accepting employment as a nurse**, each time with every employer, notify the Board, in writing. Any period during which **MS. JOHNSON** does not work in a position within the State of Ohio for which a license to practice nursing is required **shall not count** toward fulfilling the probationary period imposed by this Order.

10. Be under a continuing duty to provide a copy of this Order to any new employer **prior to accepting employment as a nurse.**
11. Have current employer(s), if working in a position where a license to practice nursing is required, submit written reports regarding job performance **on a quarterly basis beginning within thirty (30) days of the effective date of this Order or beginning within thirty (30) days of working in a position as a nurse.**
12. Have current employer(s) send documentation to the Board, along with the first employer report, of receipt of a copy of this Order, including the date this Order was received.

***Reporting Requirements for Probationary Period***

13. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
14. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
15. Submit any and all information that the Board may request regarding **MS. JOHNSON's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
16. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.
17. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: [monitoring@nursing.ohio.gov](mailto:monitoring@nursing.ohio.gov) or by mail to:

**Compliance Unit  
Ohio Board of Nursing  
17 South High Street, Suite 660  
Columbus, OH 43215-3466**

18. Verify that the reports and documentation required by this Order are received in the Board office.
19. Inform the Board **within five (5) business days**, in writing, of any change in employment status or of any change in residential or home address or telephone number.

### **FAILURE TO COMPLY**

The stay of **MS. JOHNSON's** suspension shall be lifted and **MS. JOHNSON's** license to practice nursing as a licensed practical nurse will be automatically suspended if it appears to the Board that **MS. JOHNSON** has violated or breached any terms or conditions of this Order. Following the automatic suspension, the Board shall notify **MS. JOHNSON** via certified mail of the specific nature of the charges and automatic suspension of **MS. JOHNSON's** license. **MS. JOHNSON** may request a hearing regarding the charges.

### **DURATION**

The Board may only alter the probationary period imposed by this Order if: (1) the Board determines that **MS. JOHNSON** has complied with all aspects of this Order; and (2) the Board determines that **MS. JOHNSON** is able to practice nursing according to acceptable and prevailing standards of safe nursing care without Board monitoring, based upon an interview with **MS. JOHNSON** and review of the reports as required herein.

As indicated above under Employment Conditions, any period during which **MS. JOHNSON** does not work in a position within the State of Ohio for which a license to practice nursing is required shall not count toward fulfilling the probationary period imposed by this Order.

Motion adopted by a majority vote of the Board members present with Lisa Klenke and Sandra Ranck abstaining.

This Order shall become effective immediately and is hereby entered upon the Journal of the Board for the 25<sup>th</sup> day of January 2018.

Jones, Tracie Lea, R.N. 293674, P.N. 087979 (CASE #17-2530)

**Action:** It was moved by J. Jane McFee, seconded by Patricia Sharpnack, that upon consideration of the charges stated against **TRACIE LEA JONES** in the July 27, 2017 Notice of Automatic Suspension and Opportunity for Hearing and evidence supporting the charges, the Board find that **MS. JONES** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice of Automatic Suspension and Opportunity for Hearing, and that **MS. JONES's** licenses to practice nursing as a registered nurse and licensed practical nurse be suspended for an indefinite period of time with the conditions for reinstatement set forth below, and following reinstatement, **MS. JONES's** licenses to practice nursing as a registered nurse and licensed practical nurse shall be subject to a stayed suspension under the probationary terms and restrictions set forth below for a minimum period of two (2) years including the **Temporary Narcotic and Permanent Practice Restrictions, unless otherwise approved in advance**, set forth below.

### **SUSPENSION OF LICENSE**

**MS. JONES's** licenses to practice as a registered nurse and licensed practical nurse are suspended for an indefinite period of time.

The Board may reinstate **MS. JONES's** licenses to practice as a registered nurse and licensed practical nurse if **MS. JONES** submits a written request for reinstatement and is determined by the Board or its designee to have complied with the Conditions for Reinstatement.

### **CONDITIONS FOR REINSTATEMENT**

**MS. JONES shall:**

1. Be determined, by the Board or its designee, to be able to practice nursing according to acceptable and prevailing standards of safe nursing care based upon an interview and review of the documentation specified in this Order.
2. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
3. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
4. **Within ninety (90) days immediately prior to requesting reinstatement**, submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MS. JONES**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MS. JONES's** criminal records check to the Board. The Board will not consider a request for reinstatement until **MS. JONES's** completed criminal records check, including the FBI check, is received by the Board.
5. Pay a fine of five hundred dollars (\$500.00), payable: online by credit or debit card; or payable to the "Treasurer, State of Ohio," by certified check, cashier check, or money order mailed to the attention of the Compliance Unit, Ohio Board of Nursing, 17 South High Street, Suite 660, Columbus, OH 43215-3466.

### ***Educational Requirements***

6. Successfully complete and submit satisfactory documentation of successful completion of the following continuing education, or other comparable course(s) approved in advance by the Board or its designee: five (5) hours Substance Use Disorder, five (5) hours Professional

Accountability and Legal Liability, and two (2) hours Ohio Nursing Law and Rules. Continuing education required by this Order **does not meet the continuing education requirements for license renewal.**

### ***Evaluations***

7. **Within ninety (90) days immediately prior to requesting reinstatement, at MS. JONES's expense, obtain a psychiatric evaluation from a Board approved psychiatrist and provide the Board with complete documentation of such evaluation. Prior to the evaluation, MS. JONES shall provide the psychiatrist with a copy of this Order and the Notice of Automatic Suspension and Opportunity for Hearing. MS. JONES shall execute releases to permit the psychiatrist to obtain any information deemed appropriate and necessary for the evaluation. The psychiatrist shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on MS. JONES's licenses, and a statement as to whether MS. JONES is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.**
8. Provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the psychiatrist described above until released. Further, the Board may utilize the psychiatrist's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on **MS. JONES's** licenses.
9. **Within ninety (90) days immediately prior to requesting reinstatement, at MS. JONES's expense, obtain a chemical dependency evaluation by a chemical dependency professional approved by the Board or its designee and, prior to the evaluation, provide the chemical dependency professional with a copy of this Order and the Notice of Automatic Suspension and Opportunity for Hearing. MS. JONES shall execute releases to permit the chemical dependency professional to obtain any information deemed appropriate and necessary for the evaluation. The chemical dependency professional shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on MS. JONES's licenses, and a statement as to whether MS. JONES is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.**
10. Provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the chemical dependency professional described above until released. Further, the Board may utilize the professional's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on **MS. JONES's** licenses.

### **Monitoring**

11. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. JONES's** history. **MS. JONES** shall self-administer the prescribed drugs only in the manner prescribed.
12. **If recommended by the chemical dependency evaluation**, abstain completely from the use of alcohol or any products containing alcohol.
13. **Prior to requesting reinstatement**, begin submitting, at **MS. JONES's** expense and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Upon and after **MS. JONES's** initiation of drug screening, refusal to submit such specimen, or failure to submit such specimen on the day she is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MS. JONES** shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who has received a complete copy of this Order prior to prescribing for **MS. JONES**.
  - a. **Prior** to initiating drug screening:
    - i. Provide a copy of this Order to all treating practitioners;
    - ii. Provide to the Board a list of all treating practitioners, including addresses and telephone numbers; and
    - iii. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. JONES**, **and** submit the report directly to the Board.
  - b. **After** initiating drug screening, be under a **continuing duty** to:
    - i. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
    - ii. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;
    - iii. Notify the Board of any and all medication(s) or

prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and

- iv. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. JONES** and submit the report directly to the Board.

### ***Reporting Requirements for Suspension Period***

14. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
15. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
16. Submit any and all information that the Board may request regarding **MS. JONES's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
17. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board.
18. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: [monitoring@nursing.ohio.gov](mailto:monitoring@nursing.ohio.gov) or by mail to:

**Compliance Unit  
Ohio Board of Nursing  
17 South High Street, Suite 660  
Columbus, OH 43215-3466**

19. Verify that the reports and documentation required by this Order are received in the Board office.
20. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.

### **PROBATIONARY PERIOD**

Following reinstatement, the suspension shall be stayed and **MS. JONES's** licenses shall be subject to Probationary Terms and Restrictions for a minimum period of two (2) years.

## **PROBATIONARY TERMS AND RESTRICTIONS**

### **MS. JONES shall:**

1. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
2. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.

### ***Evaluations***

3. **Upon the request of the Board or its designee and within sixty (60) days of that request**, at **MS. JONES's** expense, obtain a chemical dependency evaluation by a chemical dependency professional approved by the Board or its designee and, prior to the evaluation, provide the chemical dependency professional with a copy of this Order and the Notice of Automatic Suspension and Opportunity for Hearing. **MS. JONES** shall execute releases to permit the chemical dependency professional to obtain any information deemed appropriate and necessary for the evaluation. The chemical dependency professional shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on **MS. JONES's** licenses, and a statement as to whether **MS. JONES** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
4. **If a chemical dependency evaluation is requested**, provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the chemical dependency professional described above until released. Further, the Board may utilize the professional's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on **MS. JONES's** licenses.

### ***Monitoring***

5. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. JONES's** history. **MS. JONES** shall self-administer prescribed drugs only in the manner prescribed.
6. **If recommended by the chemical dependency evaluation**, abstain completely from the use of alcohol or any products containing alcohol.
7. Submit, at her expense, and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site

specified by the Board at such times as the Board may request. Refusal to submit such specimen, or failure to submit such specimen on the day she is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MS. JONES** shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. JONES's** history.

**MS. JONES** shall:

- a. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
- b. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;
- c. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and
- d. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. JONES** and submit the report directly to the Board.

### ***Employment Conditions***

8. **Upon the request of the Board or its designee, prior to working in a position where a license to practice nursing is required**, complete and submit satisfactory documentation of completion of a nurse refresher course or an extensive orientation approved in advance by the Board or its designee.
9. **Prior to accepting employment as a nurse**, each time with every employer, notify the Board, in writing. Any period during which **MS. JONES** does not work in a position within the State of Ohio for which a license to practice nursing is required **shall not count** toward fulfilling the probationary period imposed by this Order.
10. Be under a continuing duty to provide a copy of this Order to any new employer **prior to accepting employment as a nurse**.
11. Have current employer(s), if working in a position where a license to practice nursing is required, submit written reports regarding job performance **on a quarterly basis beginning within thirty (30) days of**

**the effective date of this Order or beginning within thirty (30) days of working in a position as a nurse.**

12. Have current employer(s) send documentation to the Board, along with the first employer report, of receipt of a copy of this Order, including the date this Order was received.

***Reporting Requirements for Probationary Period***

13. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
14. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
15. Submit any and all information that the Board may request regarding **MS. JONES's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
16. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.
17. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: [monitoring@nursing.ohio.gov](mailto:monitoring@nursing.ohio.gov) or by mail to:

**Compliance Unit  
Ohio Board of Nursing  
17 South High Street, Suite 660  
Columbus, OH 43215-3466**

18. Verify that the reports and documentation required by this Order are received in the Board office.
19. Inform the Board **within five (5) business days**, in writing, of any change in employment status or of any change in residential or home address or telephone number.

**LICENSE RESTRICTIONS**

**In addition to Probationary Terms and Restrictions, MS. JONES's licenses are subject to the following License Restrictions:**

### **Temporary Narcotic Restriction**

**Upon reinstatement, unless otherwise approved in advance, in writing, by the Board or its designee, MS. JONES** shall not administer, have access to, or possess (except as prescribed for **MS. JONES's** use by another so authorized by law who has full knowledge of **MS. JONES's** history) any narcotics, other controlled substances, or mood altering drugs. In addition, **MS. JONES** shall not count narcotics or possess or carry any work keys for locked medication carts, cabinets, drawers, or containers. **MS. JONES** shall not call in or order prescriptions or prescription refills.

### **Permanent Practice Restrictions**

**Upon reinstatement, unless otherwise approved in advance, in writing, by the Board or its designee, MS. JONES** shall not practice nursing as a registered nurse or licensed practical nurse (1) in a patient's residence; (2) for staffing agencies or pools; (3) for an individual or group of individuals who directly engage **MS. JONES** to provide nursing services for fees, compensation, or other consideration or who engage **MS. JONES** as a volunteer; or (4) as an independent contractor or for *locum tenens* assignments.

**Upon reinstatement, unless otherwise approved in advance, in writing, by the Board or its designee, MS. JONES** shall not function in a position or employment where the job duties or requirements involve management of nursing and nursing responsibilities, or supervising and evaluating nursing practice. Such positions include, but are not limited to, the following: Director of Nursing, Assistant Director of Nursing, Nurse Manager, Vice President of Nursing.

### **FAILURE TO COMPLY**

The stay of **MS. JONES's** suspension shall be lifted and **MS. JONES's** licenses to practice nursing as a registered nurse and licensed practical nurse will be automatically suspended if it appears to the Board that **MS. JONES** has violated or breached any terms or conditions of this Order. Following the automatic suspension, the Board shall notify **MS. JONES** via certified mail of the specific nature of the charges and automatic suspension of **MS. JONES's** licenses. **MS. JONES** may request a hearing regarding the charges.

### **DURATION**

The Board may only alter the probationary period imposed by this Order if: (1) the Board determines that **MS. JONES** has complied with all aspects of this Order; and (2) the Board determines that **MS. JONES** is able to practice nursing according to acceptable and prevailing standards of safe nursing care without Board monitoring, based upon an interview with **MS. JONES** and review of the

reports as required herein.

As indicated above under Employment Conditions, any period during which **MS. JONES** does not work in a position within the State of Ohio for which a license to practice nursing is required shall not count toward fulfilling the probationary period imposed by this Order.

Motion adopted by a majority vote of the Board members present with Lisa Klenke and Sandra Ranck abstaining.

This Order shall become effective immediately and is hereby entered upon the Journal of the Board for the 25<sup>th</sup> day of January 2018.

Eckerman, Amy L., P.N. 131293 (CASE #16-4017)

**Action:** It was moved by Lauralee Krabill, seconded by Matthew Carle, that upon consideration of the charges stated against **AMY L. ECKERMAN** in the July 27, 2017 Notice of Immediate Suspension and Opportunity for Hearing and evidence supporting the charges, the Board find that **MS. ECKERMAN** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice of Immediate Suspension and Opportunity for Hearing, and that **MS. ECKERMAN's** license to practice nursing as a licensed practical nurse be suspended for an indefinite period of time but not less than two (2) years with the conditions for reinstatement set forth below, and following reinstatement, **MS. ECKERMAN's** license to practice nursing as a licensed practical nurse shall be subject to a stayed suspension under the probationary terms and restrictions set forth below for a minimum period of three (3) years including the **Permanent Narcotic and Temporary Practice Restrictions**, set forth below.

#### SUSPENSION OF LICENSE

**MS. ECKERMAN's** license to practice as a licensed practical nurse is suspended for an indefinite period of time but not less than two (2) years.

The Board may reinstate **MS. ECKERMAN's** license to practice as a licensed practical nurse if **MS. ECKERMAN** submits a written request for reinstatement and is determined by the Board or its designee to have complied with the Conditions for Reinstatement.

#### CONDITIONS FOR REINSTATEMENT

**MS. ECKERMAN shall:**

1. Be determined, by the Board or its designee, to be able to practice nursing according to acceptable and prevailing standards of safe nursing care based upon an interview and review of the documentation specified in this Order.

2. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
3. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
4. **Within ninety (90) days immediately prior to requesting reinstatement**, submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MS. ECKERMAN**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MS. ECKERMAN's** criminal records check to the Board. The Board will not consider a request for reinstatement until **MS. ECKERMAN's** completed criminal records check, including the FBI check, is received by the Board.
5. Submit documentation of her full compliance with the requirements imposed by the Sandusky County Court of Common Pleas in Case Number 16-CR-1106.

### ***Evaluations***

6. **Within ninety (90) days immediately prior to requesting reinstatement**, at **MS. ECKERMAN's** expense, obtain a chemical dependency evaluation by a chemical dependency professional approved by the Board or its designee and, prior to the evaluation, provide the chemical dependency professional with a copy of this Order and the Notice of Immediate Suspension and Opportunity for Hearing. **MS. ECKERMAN** shall execute releases to permit the chemical dependency professional to obtain any information deemed appropriate and necessary for the evaluation. The chemical dependency professional shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on **MS. ECKERMAN's** license, and a statement as to whether **MS. ECKERMAN** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
7. Provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the chemical dependency professional described above until released. Further, the Board may utilize the professional's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on **MS. ECKERMAN's** license.

### ***Monitoring***

8. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so

- authorized by law who has full knowledge of **MS. ECKERMAN's** history. **MS. ECKERMAN** shall self-administer the prescribed drugs only in the manner prescribed.
9. Abstain completely from the use of alcohol or any products containing alcohol.
  10. **For a minimum, continuous period of six (6) months immediately prior to requesting reinstatement,** submit, at **MS. ECKERMAN's** expense and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Upon and after **MS. ECKERMAN's** initiation of drug screening, refusal to submit such specimen, or failure to submit such specimen on the day she is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MS. ECKERMAN** shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who has received a complete copy of this Order prior to prescribing for **MS. ECKERMAN**.
    - a. **Prior** to initiating drug screening:
      - i. Provide a copy of this Order to all treating practitioners;
      - ii. Provide to the Board a list of all treating practitioners, including addresses and telephone numbers; and
      - iii. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. ECKERMAN**, **and** submit the report directly to the Board.
    - b. **After** initiating drug screening, be under a **continuing duty** to:
      - i. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
      - ii. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;
      - iii. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and

- iv. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. ECKERMAN** and submit the report directly to the Board.

11. **For a minimum, continuous period of six (6) months immediately prior to requesting reinstatement**, attend a minimum of one (1) meeting per week of a support or peer group meeting approved in advance by the Board, or a Twelve Step program, and provide satisfactory documentation of such attendance to the Board prior to reinstatement.

### ***Reporting Requirements for Suspension Period***

12. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
13. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
14. Submit any and all information that the Board may request regarding **MS. ECKERMAN's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
15. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board.
16. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: [monitoring@nursing.ohio.gov](mailto:monitoring@nursing.ohio.gov) or by mail to:

**Compliance Unit  
Ohio Board of Nursing  
17 South High Street, Suite 660  
Columbus, OH 43215-3466**

17. Verify that the reports and documentation required by this Order are received in the Board office.
18. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.

### **PROBATIONARY PERIOD**

Following reinstatement, the suspension shall be stayed and **MS. ECKERMAN's** license shall be subject to Probationary Terms and Restrictions for a minimum period of three (3) years.

## **PROBATIONARY TERMS AND RESTRICTIONS**

### **MS. ECKERMAN shall:**

1. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
2. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
3. Submit documentation of her full compliance with the requirements imposed by the Sandusky County Court of Common Pleas in Case Number 16-CR-1106.

### ***Evaluations***

4. **Upon the request of the Board or its designee and within sixty (60) days of that request, at MS. ECKERMAN's expense, obtain a chemical dependency evaluation by a chemical dependency professional approved by the Board or its designee and, prior to the evaluation, provide the chemical dependency professional with a copy of this Order and the Notice of Immediate Suspension and Opportunity for Hearing. MS. ECKERMAN shall execute releases to permit the chemical dependency professional to obtain any information deemed appropriate and necessary for the evaluation. The chemical dependency professional shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on MS. ECKERMAN's license, and a statement as to whether MS. ECKERMAN is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.**
5. **If a chemical dependency evaluation is requested, provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the chemical dependency professional described above until released. Further, the Board may utilize the professional's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on MS. ECKERMAN's license.**

### ***Monitoring***

6. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. ECKERMAN's** history. **MS. ECKERMAN** shall self-administer prescribed drugs only in the manner prescribed.

7. Abstain completely from the use of alcohol or any products containing alcohol.
8. Submit, at her expense, and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Refusal to submit such specimen, or failure to submit such specimen on the day she is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MS. ECKERMAN** shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. ECKERMAN's** history.

**MS. ECKERMAN** shall:

- a. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
  - b. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;
  - c. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and
  - d. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. ECKERMAN** and submit the report directly to the Board.
9. Attend a minimum of one (1) meeting per week of a support or peer group meeting approved in advance by the Board, or a Twelve Step program, and provide satisfactory documentation of such attendance to the Board every six (6) months.

***Employment Conditions***

10. **Upon the request of the Board or its designee, prior to working in a position where a license to practice nursing is required**, complete and submit satisfactory documentation of completion of a nurse refresher course or an extensive orientation approved in advance by the Board or its designee.
11. **Prior to accepting employment as a nurse**, each time with every employer, notify the Board, in writing. Any period during which **MS.**

- ECKERMAN** does not work in a position within the State of Ohio for which a license to practice nursing is required **shall not count** toward fulfilling the probationary period imposed by this Order.
12. Be under a continuing duty to provide a copy of this Order to any new employer **prior to accepting employment as a nurse.**
  13. Have current employer(s), if working in a position where a license to practice nursing is required, submit written reports regarding job performance **on a quarterly basis beginning within thirty (30) days of the effective date of this Order or beginning within thirty (30) days of working in a position as a nurse.**
  14. Have current employer(s) send documentation to the Board, along with the first employer report, of receipt of a copy of this Order, including the date this Order was received.

***Reporting Requirements for Probationary Period***

15. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
16. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
17. Submit any and all information that the Board may request regarding **MS. ECKERMAN's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
18. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.
19. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: [monitoring@nursing.ohio.gov](mailto:monitoring@nursing.ohio.gov) or by mail to:

**Compliance Unit  
Ohio Board of Nursing  
17 South High Street, Suite 660  
Columbus, OH 43215-3466**

20. Verify that the reports and documentation required by this Order are received in the Board office.

21. Inform the Board **within five (5) business days**, in writing, of any change in employment status or of any change in residential or home address or telephone number.

## **LICENSE RESTRICTIONS**

**In addition to Probationary Terms and Restrictions, MS. ECKERMAN's license is subject to the following License Restrictions:**

### **Permanent Narcotic Restriction**

**Upon reinstatement, MS. ECKERMAN** shall not administer, have access to, or possess (except as prescribed for **MS. ECKERMAN's** use by another so authorized by law who has full knowledge of **MS. ECKERMAN's** history) any narcotics, other controlled substances, or mood altering drugs. In addition, **MS. ECKERMAN** shall not count narcotics or possess or carry any work keys for locked medication carts, cabinets, drawers, or containers. **MS. ECKERMAN** shall not call in or order prescriptions or prescription refills.

### **Temporary Practice Restrictions**

**Upon reinstatement, MS. ECKERMAN** shall not practice nursing as a licensed practical nurse (1) in a patient's residence; (2) for staffing agencies or pools; (3) for an individual or group of individuals who directly engage **MS. ECKERMAN** to provide nursing services for fees, compensation, or other consideration or who engage **MS. ECKERMAN** as a volunteer; or (4) as an independent contractor or for *locum tenens* assignments.

**Upon reinstatement, MS. ECKERMAN** shall not function in a position or employment where the job duties or requirements involve management of nursing and nursing responsibilities. Such positions include, but are not limited to, the following: Director of Nursing, Assistant Director of Nursing, Nurse Manager, Vice President of Nursing.

### **FAILURE TO COMPLY**

The stay of **MS. ECKERMAN's** suspension shall be lifted and **MS. ECKERMAN's** license to practice nursing as a licensed practical nurse will be automatically suspended if it appears to the Board that **MS. ECKERMAN** has violated or breached any terms or conditions of this Order. Following the automatic suspension, the Board shall notify **MS. ECKERMAN** via certified mail of the specific nature of the charges and automatic suspension of **MS. ECKERMAN's** license. **MS. ECKERMAN** may request a hearing regarding the charges.

## **DURATION**

The Board may only alter the probationary period imposed by this Order if: (1) the Board determines that **MS. ECKERMAN** has complied with all aspects of this Order; and (2) the Board determines that **MS. ECKERMAN** is able to practice nursing according to acceptable and prevailing standards of safe nursing care without Board monitoring, based upon an interview with **MS. ECKERMAN** and review of the reports as required herein.

As indicated above under Employment Conditions, any period during which **MS. ECKERMAN** does not work in a position within the State of Ohio for which a license to practice nursing is required shall not count toward fulfilling the probationary period imposed by this Order.

Motion adopted by a majority vote of the Board members present with Lisa Klenke and Sandra Ranck abstaining.

This Order shall become effective immediately and is hereby entered upon the Journal of the Board for the 25<sup>th</sup> day of January 2018.

Washington, Dorothy Jo, R.N. 300569 (CASE #17-2687, #17-2686)

**Action:** It was moved by Erin Keels, seconded by Joanna Ridgeway, that upon consideration of the charges stated against **DOROTHY JO WASHINGTON** in the July 27, 2017 Notice of Automatic Suspension and Opportunity for Hearing and evidence supporting the charges, the Board find that **MS. WASHINGTON** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice of Automatic Suspension and Opportunity for Hearing, and that **MS. WASHINGTON's** license to practice nursing as a registered nurse be suspended for an indefinite period of time with the conditions for reinstatement set forth below, and following reinstatement, **MS. WASHINGTON's** license to practice nursing as a registered nurse shall be subject to a stayed suspension under the probationary terms and restrictions set forth below for a minimum period of three (3) years including the **Temporary Practice Restrictions, unless otherwise approved in advance**, set forth below.

## **SUSPENSION OF LICENSE**

**MS. WASHINGTON's** license to practice as a registered nurse is suspended for an indefinite period of time.

The Board may reinstate **MS. WASHINGTON's** license to practice as a registered nurse if **MS. WASHINGTON** submits a written request for reinstatement and is determined by the Board or its designee to have complied with the Conditions for Reinstatement.

### CONDITIONS FOR REINSTATEMENT

#### **MS. WASHINGTON shall:**

1. Be determined, by the Board or its designee, to be able to practice nursing according to acceptable and prevailing standards of safe nursing care based upon an interview and review of the documentation specified in this Order.
2. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
3. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
4. **Within ninety (90) days immediately prior to requesting reinstatement**, submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MS. WASHINGTON**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MS. WASHINGTON's** criminal records check to the Board. The Board will not consider a request for reinstatement until **MS. WASHINGTON's** completed criminal records check, including the FBI check, is received by the Board.
5. Pay a fine of five hundred dollars (\$500.00), payable: online by credit or debit card; or payable to the "Treasurer, State of Ohio," by certified check, cashier check, or money order mailed to the attention of the Compliance Unit, Ohio Board of Nursing, 17 South High Street, Suite 660, Columbus, OH 43215-3466.

#### ***Educational Requirements***

6. Successfully complete and submit satisfactory documentation of successful completion of the following continuing education, or other comparable course(s) approved in advance by the Board or its designee: five (5) hours Ethics, four (4) hours Professional Accountability and Legal Liability, and two (2) hours Ohio Nursing Law and Rules. Continuing education required by this Order **does not meet the continuing education requirements for license renewal**.
7. Establish contact with a nursing educator, approved in advance by the Board or its designee, who has no less than a master's degree and who is affiliated with a nursing educational program.
  - a. Have the educator provide the Board with a written report of an assessment of **MS. WASHINGTON**, which identifies **MS.**

**WASHINGTON's** knowledge/practice deficiencies and remedial educational needs.

- b. Prior to the assessment, provide the nursing educator with a copy of this Order and the Notice of Automatic Suspension and Opportunity for Hearing and submit to any nursing skills or knowledge assessments required by the educator. **MS. WASHINGTON** shall also execute releases prior to the assessment to permit the educator to obtain any information deemed appropriate and necessary for the assessment including information from **MS. WASHINGTON's** employer(s), former employers, and Board staff.
- c. Following the assessment, have the educator provide the Board with a copy of a learning plan developed by the educator for **MS. WASHINGTON** and obtain approval of the learning plan by the Board or its designee. The learning plan shall identify specific remediation that **MS. WASHINGTON** shall complete to address any knowledge/practice deficiencies and remedial educational needs identified by the educator and shall identify the time frame during which **MS. WASHINGTON** shall complete such learning plan.
- d. Successfully complete and submit satisfactory documentation of successful completion of the learning plan within the time frame specified in the learning plan.
- e. Be responsible for all costs associated with meeting the requirements of the learning plan.
- f. **After MS. WASHINGTON has successfully completed the learning plan**, have the educator provide the Board with:
  - i. An assessment and any recommendations for additional remedial education and/or restrictions that should be placed on **MS. WASHINGTON's** license; and
  - ii. A written opinion stating whether **MS. WASHINGTON** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
- g. The Board may utilize the educator's recommendations and conclusions from the assessment as a basis for additional terms and restrictions on **MS. WASHINGTON's** license.
- h. If **MS. WASHINGTON** has met all other conditions for reinstatement, in the event that the educator's recommendations include a clinical component, this requirement will be completed

following reinstatement of **MS. WASHINGTON's** nursing license and prior to **MS. WASHINGTON** practicing as a nurse.

***Reporting Requirements for Suspension Period***

8. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
9. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
10. Submit any and all information that the Board may request regarding **MS. WASHINGTON's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
11. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board.
12. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: [monitoring@nursing.ohio.gov](mailto:monitoring@nursing.ohio.gov) or by mail to:

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Ohio Board of Nursing  
17 South High Street, Suite 660  
Columbus, OH 43215-3466**

13. Verify that the reports and documentation required by this Order are received in the Board office.
14. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.

**PROBATIONARY PERIOD**

Following reinstatement, the suspension shall be stayed and **MS. WASHINGTON's** license shall be subject to Probationary Terms and Restrictions for a minimum period of three (3) years.

**PROBATIONARY TERMS AND RESTRICTIONS**

**MS. WASHINGTON shall:**

1. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.

2. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.

### ***Employment Conditions***

3. **Upon the request of the Board or its designee, prior to working in a position where a license to practice nursing is required**, complete and submit satisfactory documentation of completion of a nurse refresher course or an extensive orientation approved in advance by the Board or its designee.
4. **Prior to accepting employment as a nurse**, each time with every employer, notify the Board, in writing. Any period during which **MS. WASHINGTON** does not work in a position within the State of Ohio for which a license to practice nursing is required **shall not count** toward fulfilling the probationary period imposed by this Order.
5. Be under a continuing duty to provide a copy of this Order to any new employer **prior to accepting employment as a nurse**.
6. Have current employer(s), if working in a position where a license to practice nursing is required, submit written reports regarding job performance **on a quarterly basis beginning within thirty (30) days of the effective date of this Order or beginning within thirty (30) days of working in a position as a nurse**.
7. Have current employer(s) send documentation to the Board, along with the first employer report, of receipt of a copy of this Order, including the date this Order was received.

### ***Reporting Requirements for Probationary Period***

8. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
9. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
10. Submit any and all information that the Board may request regarding **MS. WASHINGTON's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
11. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.

12. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: [monitoring@nursing.ohio.gov](mailto:monitoring@nursing.ohio.gov) or by mail to:

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Ohio Board of Nursing  
17 South High Street, Suite 660  
Columbus, OH 43215-3466**

13. Verify that the reports and documentation required by this Order are received in the Board office.
14. Inform the Board **within five (5) business days**, in writing, of any change in employment status or of any change in residential or home address or telephone number.

### **LICENSE RESTRICTIONS**

**In addition to Probationary Terms and Restrictions, MS. WASHINGTON's license is subject to the following License Restrictions:**

#### **Temporary Practice Restrictions**

**Upon reinstatement, unless otherwise approved in advance, in writing, by the Board or its designee, MS. WASHINGTON** shall not practice nursing as a registered nurse (1) in a patient's residence; (2) for staffing agencies or pools; (3) for an individual or group of individuals who directly engage **MS. WASHINGTON** to provide nursing services for fees, compensation, or other consideration or who engage **MS. WASHINGTON** as a volunteer; or (4) as an independent contractor or for *locum tenens* assignments.

**Upon reinstatement, unless otherwise approved in advance, in writing, by the Board or its designee, MS. WASHINGTON** shall not function in a position or employment where the job duties or requirements involve management of nursing and nursing responsibilities, or supervising and evaluating nursing practice. Such positions include, but are not limited to, the following: Director of Nursing, Assistant Director of Nursing, Nurse Manager, Vice President of Nursing.

#### **FAILURE TO COMPLY**

The stay of **MS. WASHINGTON's** suspension shall be lifted and **MS. WASHINGTON's** license to practice nursing as a registered nurse will be automatically suspended if it appears to the Board that **MS. WASHINGTON** has violated or breached any terms or conditions of this Order. Following the automatic suspension, the Board shall notify **MS. WASHINGTON** via certified

mail of the specific nature of the charges and automatic suspension of **MS. WASHINGTON's** license. **MS. WASHINGTON** may request a hearing regarding the charges.

### **DURATION**

The Board may only alter the probationary period imposed by this Order if: (1) the Board determines that **MS. WASHINGTON** has complied with all aspects of this Order; and (2) the Board determines that **MS. WASHINGTON** is able to practice nursing according to acceptable and prevailing standards of safe nursing care without Board monitoring, based upon an interview with **MS. WASHINGTON** and review of the reports as required herein.

As indicated above under Employment Conditions, any period during which **MS. WASHINGTON** does not work in a position within the State of Ohio for which a license to practice nursing is required shall not count toward fulfilling the probationary period imposed by this Order.

Motion adopted by a majority vote of the Board members present with Lisa Klenke and Sandra Ranck abstaining.

This Order shall become effective immediately and is hereby entered upon the Journal of the Board for the 25<sup>th</sup> day of January 2018.

Finn-Smith, Elizabeth Ann, R.N. 220444 (CASE #17-1384)

**Action:** It was moved by Joanna Ridgeway, seconded by Erin Keels, that upon consideration of the charges stated against **ELIZABETH ANN FINN-SMITH** in the May 18, 2017 Notice of Automatic Suspension and Opportunity for Hearing and evidence supporting the charges, the Board find that **MS. FINN-SMITH** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice of Automatic Suspension and Opportunity for Hearing, and that **MS. FINN-SMITH's** license to practice nursing as a registered nurse be suspended for an indefinite period of time with the conditions for reinstatement set forth below, and following reinstatement, **MS. FINN-SMITH's** license to practice nursing as a registered nurse shall be subject to a stayed suspension under the probationary terms and restrictions set forth below for a minimum period of one (1) year.

### **SUSPENSION OF LICENSE**

**MS. FINN-SMITH's** license to practice as a registered nurse is suspended for an indefinite period of time.

The Board may reinstate **MS. FINN-SMITH's** license to practice as a registered nurse if **MS. FINN-SMITH** submits a written request for reinstatement and is determined by the Board or its designee to have complied with the Conditions for Reinstatement.

### CONDITIONS FOR REINSTATEMENT

#### **MS. FINN-SMITH shall:**

1. Be determined, by the Board or its designee, to be able to practice nursing according to acceptable and prevailing standards of safe nursing care based upon an interview and review of the documentation specified in this Order.
2. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
3. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
4. **Within ninety (90) days immediately prior to requesting reinstatement**, submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MS. FINN-SMITH**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MS. FINN-SMITH's** criminal records check to the Board. The Board will not consider a request for reinstatement until **MS. FINN-SMITH's** completed criminal records check, including the FBI check, is received by the Board.
5. Pay a fine of five hundred dollars (\$500.00), payable: online by credit or debit card; or payable to the "Treasurer, State of Ohio," by certified check, cashier check, or money order mailed to the attention of the Compliance Unit, Ohio Board of Nursing, 17 South High Street, Suite 660, Columbus, OH 43215-3466.

#### ***Educational Requirements***

6. Successfully complete and submit satisfactory documentation of successful completion of the following continuing education, or other comparable course(s) approved in advance by the Board or its designee: five (5) hours Ethics, five (5) hours Professionalism, and two (2) hours Ohio Nursing Law and Rules. Continuing education required by this Order **does not meet the continuing education requirements for license renewal.**

#### ***Evaluations***

7. **Within ninety (90) days immediately prior to requesting reinstatement**, at **MS. FINN-SMITH's** expense, obtain a mental health evaluation from a Board approved evaluator and provide the Board with complete documentation of such evaluation. Prior to the evaluation, **MS.**

**FINN-SMITH** shall provide the mental health evaluator with a copy of this Order and the Notice of Automatic Suspension and Opportunity for Hearing. **MS. FINN-SMITH** shall execute releases to permit the mental health evaluator to obtain any information deemed appropriate and necessary for the evaluation. The mental health evaluator shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on **MS. FINN-SMITH's** license, and a statement as to whether **MS. FINN-SMITH** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.

8. Provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the mental health evaluator described above until released. Further, the Board may utilize the mental health evaluator's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on **MS. FINN-SMITH's** license.

***Reporting Requirements for Suspension Period***

9. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
10. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
11. Submit any and all information that the Board may request regarding **MS. FINN-SMITH's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
12. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board.
13. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: [monitoring@nursing.ohio.gov](mailto:monitoring@nursing.ohio.gov) or by mail to:

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Ohio Board of Nursing  
17 South High Street, Suite 660  
Columbus, OH 43215-3466**

14. Verify that the reports and documentation required by this Order are received in the Board office.
15. Inform the Board **within five (5) business days**, in writing, of any change

in residential or home address or telephone number.

## **PROBATIONARY PERIOD**

Following reinstatement, the suspension shall be stayed and **MS. FINN-SMITH's** license shall be subject to Probationary Terms and Restrictions for a minimum period of one (1) year.

## **PROBATIONARY TERMS AND RESTRICTIONS**

**MS. FINN-SMITH shall:**

1. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
2. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.

### ***Employment Conditions***

3. **Upon the request of the Board or its designee, prior to working in a position where a license to practice nursing is required**, complete and submit satisfactory documentation of completion of a nurse refresher course or an extensive orientation approved in advance by the Board or its designee.
4. **Prior to accepting employment as a nurse**, each time with every employer, notify the Board, in writing. Any period during which **MS. FINN-SMITH** does not work in a position within the State of Ohio for which a license to practice nursing is required **shall not count** toward fulfilling the probationary period imposed by this Order.
5. Be under a continuing duty to provide a copy of this Order to any new employer **prior to accepting employment as a nurse**.
6. Have current employer(s), if working in a position where a license to practice nursing is required, submit written reports regarding job performance **on a quarterly basis beginning within thirty (30) days of the effective date of this Order or beginning within thirty (30) days of working in a position as a nurse**.
7. Have current employer(s) send documentation to the Board, along with the first employer report, of receipt of a copy of this Order, including the date this Order was received.

***Reporting Requirements for Probationary Period***

8. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
9. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
10. Submit any and all information that the Board may request regarding **MS. FINN-SMITH's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
11. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.
12. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: [monitoring@nursing.ohio.gov](mailto:monitoring@nursing.ohio.gov) or by mail to:

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17 South High Street, Suite 660  
Columbus, OH 43215-3466**

13. Verify that the reports and documentation required by this Order are received in the Board office.
14. Inform the Board **within five (5) business days**, in writing, of any change in employment status or of any change in residential or home address or telephone number.

**FAILURE TO COMPLY**

The stay of **MS. FINN-SMITH's** suspension shall be lifted and **MS. FINN-SMITH's** license to practice nursing as a registered nurse will be automatically suspended if it appears to the Board that **MS. FINN-SMITH** has violated or breached any terms or conditions of this Order. Following the automatic suspension, the Board shall notify **MS. FINN-SMITH** via certified mail of the specific nature of the charges and automatic suspension of **MS. FINN-SMITH's** license. **MS. FINN-SMITH** may request a hearing regarding the charges.

**DURATION**

The Board may only alter the probationary period imposed by this Order if: (1) the Board determines that **MS. FINN-SMITH** has complied with all aspects of this

Order; and (2) the Board determines that **MS. FINN-SMITH** is able to practice nursing according to acceptable and prevailing standards of safe nursing care without Board monitoring, based upon an interview with **MS. FINN-SMITH** and review of the reports as required herein.

As indicated above under Employment Conditions, any period during which **MS. FINN-SMITH** does not work in a position within the State of Ohio for which a license to practice nursing is required shall not count toward fulfilling the probationary period imposed by this Order.

Motion adopted by a majority vote of the Board members present with Lisa Klenke and Sandra Ranck abstaining.

This Order shall become effective immediately and is hereby entered upon the Journal of the Board for the 25<sup>th</sup> day of January 2018.

Chanowski, Kevin M., P.N. 129150 (CASE #17-0887)

**Action:** It was moved by Nancy Fellows, seconded by Erin Keels, that upon consideration of the charges stated against **KEVIN M. CHANOWSKI** in the July 27, 2017 Notice of Immediate Suspension and Opportunity for Hearing and evidence supporting the charges, the Board find that **MR. CHANOWSKI** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice of Immediate Suspension and Opportunity for Hearing, and that **MR. CHANOWSKI's** license to practice nursing as a licensed practical nurse be suspended and that the suspension is stayed subject to the probationary terms and restrictions set forth below for a minimum period of two (2) years including the **Temporary Narcotic Restrictions**, set forth below.

### **PROBATIONARY PERIOD**

**MR. CHANOWSKI's** license shall be subject to Probationary Terms and Restrictions for a minimum period of two (2) years.

### **PROBATIONARY TERMS AND RESTRICTIONS**

**MR. CHANOWSKI shall:**

1. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
2. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
3. **Within ninety (90) days of the effective date of this Order**, submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MR. CHANOWSKI**, including a check

- of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MR. CHANOWSKI's** criminal records check to the Board.
4. Submit documentation of his full compliance with the requirements imposed by the Summit County Court of Common Pleas in Case Number CR-2017-03-0873.

### ***Evaluations***

5. **Within ninety (90) days of the execution of the probationary period, MR. CHANOWSKI** shall, at his expense, obtain a comprehensive physical examination by a Board approved physician for the purposes of evaluating **MR. CHANOWSKI's** fitness for duty and safety to practice nursing as a licensed practical nurse. This Board approved physician shall provide the Board with complete documentation of **MR. CHANOWSKI's** comprehensive physical examination, and with a comprehensive assessment regarding **MR. CHANOWSKI's** fitness for duty and safety to practice nursing as a licensed practical nurse. Prior to the examination, **MR. CHANOWSKI** shall provide the Board approved physician with a copy of this Order and the Notice of Immediate Suspension and Opportunity for Hearing. Further, **MR. CHANOWSKI** shall execute releases to permit the Board approved physician performing the comprehensive physical examination and assessment to obtain any information deemed appropriate and necessary for the assessment. The evaluating physician shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on **MR. CHANOWSKI's** license to practice, and stating whether **MR. CHANOWSKI** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
6. The Board may utilize the Board approved physician's recommendations and conclusions from the comprehensive physical examination and assessment as a basis for additional terms and restrictions on **MR. CHANOWSKI's** license.
7. **Within ninety (90) days of the execution of the probationary period, at MR. CHANOWSKI's** expense, obtain a chemical dependency evaluation by a chemical dependency professional approved by the Board or its designee and, prior to the evaluation, provide the chemical dependency professional with a copy of this Order and the Notice of Immediate Suspension and Opportunity for Hearing. **MR. CHANOWSKI** shall execute releases to permit the chemical dependency professional to obtain any information deemed appropriate and necessary for the evaluation. The chemical dependency professional shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, recommendations regarding abstinence from

- alcohol and attendance at Twelve Step or support group meetings, any additional restrictions that should be placed on **MR. CHANOWSKI's** license, and a statement as to whether **MR. CHANOWSKI** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
8. Provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the chemical dependency professional described above until released. Further, the Board may utilize the professional's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on **MR. CHANOWSKI's** license.

### ***Monitoring***

9. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to him by another so authorized by law who has full knowledge of **MR. CHANOWSKI's** history. **MR. CHANOWSKI** shall self-administer prescribed drugs only in the manner prescribed.
10. Abstain completely from the use of alcohol or any products containing alcohol.
11. **Within sixty (60) days of the effective date of this Order**, submit, at his expense, and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Refusal to submit such specimen, or failure to submit such specimen on the day he is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MR. CHANOWSKI** shall be negative, except for substances prescribed, administered, or dispensed to him by another so authorized by law who has full knowledge of **MR. CHANOWSKI's** history.

#### **MR. CHANOWSKI** shall:

- a. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
- b. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;
- c. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and

- d. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MR. CHANOWSKI** and submit the report directly to the Board.

### ***Employment Conditions***

12. **Upon the request of the Board or its designee, prior to working in a position where a license to practice nursing is required**, complete and submit satisfactory documentation of completion of a nurse refresher course or an extensive orientation approved in advance by the Board or its designee.
13. **Prior to accepting employment as a nurse**, each time with every employer, notify the Board, in writing. Any period during which **MR. CHANOWSKI** does not work in a position within the State of Ohio for which a license to practice nursing is required **shall not count** toward fulfilling the probationary period imposed by this Order.
14. Be under a continuing duty to provide a copy of this Order to any new employer **prior to accepting employment as a nurse**.
15. Have current employer(s), if working in a position where a license to practice nursing is required, submit written reports regarding job performance **on a quarterly basis beginning within thirty (30) days of the effective date of this Order or beginning within thirty (30) days of working in a position as a nurse**.
16. Have current employer(s) send documentation to the Board, along with the first employer report, of receipt of a copy of this Order, including the date this Order was received.

### ***Reporting Requirements for Probationary Period***

17. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
18. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
19. Submit any and all information that the Board may request regarding **MR. CHANOWSKI's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.

20. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.
21. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: [monitoring@nursing.ohio.gov](mailto:monitoring@nursing.ohio.gov) or by mail to:

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Ohio Board of Nursing  
17 South High Street, Suite 660  
Columbus, OH 43215-3466**

22. Verify that the reports and documentation required by this Order are received in the Board office.
23. Inform the Board **within five (5) business days**, in writing, of any change in employment status or of any change in residential or home address or telephone number.

### **LICENSE RESTRICTIONS**

**In addition to Probationary Terms and Restrictions, MR. CHANOWSKI's license is subject to the following License Restrictions:**

#### **Temporary Narcotic Restriction**

**MR. CHANOWSKI** shall not administer, have access to, or possess (except as prescribed for **MR. CHANOWSKI's** use by another so authorized by law who has full knowledge of **MR. CHANOWSKI's** history) any narcotics, other controlled substances, or mood altering drugs for a minimum period of twelve (12) months in which **MR. CHANOWSKI** is working in a position that requires a nursing license. At any time after the minimum period of twelve (12) months previously described, **MR. CHANOWSKI** may submit a written request to the Board to have this restriction re-evaluated. In addition, **MR. CHANOWSKI** shall not count narcotics or possess or carry any work keys for locked medication carts, cabinets, drawers, or containers. **MR. CHANOWSKI** shall not call in or order prescriptions or prescription refills.

#### **FAILURE TO COMPLY**

The stay of **MR. CHANOWSKI's** suspension shall be lifted and **MR. CHANOWSKI's** license to practice nursing as a licensed practical nurse will be automatically suspended if it appears to the Board that **MR. CHANOWSKI** has violated or breached any terms or conditions of this Order. Following the automatic suspension, the Board shall notify **MR. CHANOWSKI** via certified mail

of the specific nature of the charges and automatic suspension of **MR. CHANOWSKI's** license. **MR. CHANOWSKI** may request a hearing regarding the charges.

### **DURATION**

The Board may only alter the probationary period imposed by this Order if: (1) the Board determines that **MR. CHANOWSKI** has complied with all aspects of this Order; and (2) the Board determines that **MR. CHANOWSKI** is able to practice nursing according to acceptable and prevailing standards of safe nursing care without Board monitoring, based upon an interview with **MR. CHANOWSKI** and review of the reports as required herein.

As indicated above under Employment Conditions, any period during which **MR. CHANOWSKI** does not work in a position within the State of Ohio for which a license to practice nursing is required shall not count toward fulfilling the probationary period imposed by this Order.

Motion adopted by a majority vote of the Board members present with Barbara Douglas, Lisa Klenke and Sandra Ranck abstaining.

This Order shall become effective immediately and is hereby entered upon the Journal of the Board for the 25<sup>th</sup> day of January 2018.

Hosey, Leon Cortez, R.N. 306665 (CASE #16-7866)

**Action:** It was moved by Matthew Carle, seconded by Nancy Fellows, that upon consideration of the charges stated against **LEON CORTEZ HOSEY** in the July 27, 2017 Notice of Opportunity for Hearing and evidence supporting the charges, the Board find that **MR. HOSEY** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice of Opportunity for Hearing, and that **MR. HOSEY's** license to practice nursing as a registered nurse be suspended for an indefinite period of time with the conditions for reinstatement set forth below.

### **SUSPENSION OF LICENSE**

**MR. HOSEY's** license to practice as a registered nurse is suspended for an indefinite period of time.

The Board may reinstate **MR. HOSEY's** license to practice as a registered nurse if **MR. HOSEY** submits a written request for reinstatement and is determined by the Board or its designee to have complied with the Conditions for Reinstatement.

### **CONDITIONS FOR REINSTATEMENT**

**MR. HOSEY shall:**

1. Be determined, by the Board or its designee, to be able to practice nursing according to acceptable and prevailing standards of safe nursing care based upon an interview and review of the documentation specified in this Order.
2. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
3. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
4. **Within ninety (90) days immediately prior to requesting reinstatement**, submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MR. HOSEY**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MR. HOSEY's** criminal records check to the Board. The Board will not consider a request for reinstatement until **MR. HOSEY's** completed criminal records check, including the FBI check, is received by the Board.
5. Submit documentation of his full compliance with the terms and conditions imposed by the Proposed Consent Agreement with the West Virginia State Board of Examiners for Registered Professional Nurses, dated August 4, 2016, and that his West Virginia license is current, valid and unrestricted.
6. **Upon the request of the Board or its designee, prior to working in a position where a license to practice nursing is required**, complete and submit satisfactory documentation of completion of a nurse refresher course or an extensive orientation approved in advance by the Board or its designee.

***Reporting Requirements for Suspension Period***

7. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
8. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
9. Submit any and all information that the Board may request regarding **MR. HOSEY's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
10. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board.

11. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: [monitoring@nursing.ohio.gov](mailto:monitoring@nursing.ohio.gov) or by mail to:

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Ohio Board of Nursing  
17 South High Street, Suite 660  
Columbus, OH 43215-3466**

12. Verify that the reports and documentation required by this Order are received in the Board office.
13. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.

Motion adopted by a majority vote of the Board members present with Barbara Douglas, Lisa Klenke and Sandra Ranck abstaining.

This Order shall become effective immediately and is hereby entered upon the Journal of the Board for the 25<sup>th</sup> day of January 2018.

Knight, Penny Jo, P.N. 103588 (CASE #17-2081)

**Action:** It was moved by Patricia Sharpnack, seconded by J. Jane McFee, that upon consideration of the charges stated against **PENNY JO KNIGHT** in the July 27, 2017 Notice of Opportunity for Hearing and evidence supporting the charges, the Board find that **MS. KNIGHT** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice of Opportunity for Hearing, and that **MS. KNIGHT's** license to practice nursing as a licensed practical nurse be suspended for an indefinite period of time with the conditions for reinstatement set forth below.

#### **SUSPENSION OF LICENSE**

**MS. KNIGHT's** license to practice as a licensed practical nurse is suspended for an indefinite period of time.

The Board may reinstate **MS. KNIGHT's** license to practice as a licensed practical nurse if **MS. KNIGHT** submits a written request for reinstatement and is determined by the Board or its designee to have complied with the Conditions for Reinstatement.

#### **CONDITIONS FOR REINSTATEMENT**

**MS. KNIGHT shall:**

1. Be determined, by the Board or its designee, to be able to practice nursing according to acceptable and prevailing standards of safe nursing care based upon an interview and review of the documentation specified in this Order.
2. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
3. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
4. **Within ninety (90) days immediately prior to requesting reinstatement**, submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MS. KNIGHT**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MS. KNIGHT's** criminal records check to the Board. The Board will not consider a request for reinstatement until **MS. KNIGHT's** completed criminal records check, including the FBI check, is received by the Board.
5. Submit documentation of her full compliance with the terms and conditions imposed by the Consent Agreement with the West Virginia State Board of Examiners for Licensed Practical Nurses, dated January 25, 2017, and that her West Virginia license is current, valid and unrestricted.
6. **Upon the request of the Board or its designee, prior to working in a position where a license to practice nursing is required**, complete and submit satisfactory documentation of completion of a nurse refresher course or an extensive orientation approved in advance by the Board or its designee.

***Reporting Requirements for Suspension Period***

7. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
8. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
9. Submit any and all information that the Board may request regarding **MS. KNIGHT's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
10. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board.

11. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: [monitoring@nursing.ohio.gov](mailto:monitoring@nursing.ohio.gov) or by mail to:

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Ohio Board of Nursing  
17 South High Street, Suite 660  
Columbus, OH 43215-3466**

12. Verify that the reports and documentation required by this Order are received in the Board office.
13. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.

Motion adopted by a majority vote of the Board members present with Barbara Douglas, Lisa Klenke and Sandra Ranck abstaining.

This Order shall become effective immediately and is hereby entered upon the Journal of the Board for the 25<sup>th</sup> day of January 2018.

Vickers, Deborah Ann (aka "Deborah Ann Sanders"), P.N. 086841 (CASE #16-7747)

**Action:** It was moved by J. Jane McFee, seconded by Patricia Sharpnack, that upon consideration of the charges stated against **DEBORAH ANN VICKERS** in the July 27, 2017 Notice of Opportunity for Hearing and evidence supporting the charges, the Board find that **MS. VICKERS** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice of Opportunity for Hearing, and that **MS. VICKERS's** license to practice nursing as a licensed practical nurse be suspended for an indefinite period of time with the conditions for reinstatement set forth below.

#### **SUSPENSION OF LICENSE**

**MS. VICKERS's** license to practice as a licensed practical nurse is hereby suspended for an indefinite period of time.

The Board may reinstate **MS. VICKERS's** license to practice as a licensed practical nurse if **MS. VICKERS** submits a written request for reinstatement and is determined by the Board or its designee to have complied with the Conditions for Reinstatement.

#### **CONDITIONS FOR REINSTATEMENT**

**MS. VICKERS shall:**

1. Be determined, by the Board or its designee, to be able to practice nursing according to acceptable and prevailing standards of safe nursing care based upon an interview and review of the documentation specified in this Order.
2. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
3. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
4. **Within ninety (90) days immediately prior to requesting reinstatement**, submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MS. VICKERS**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MS. VICKERS's** criminal records check to the Board. The Board will not consider a request for reinstatement until **MS. VICKERS's** completed criminal records check, including the FBI check, is received by the Board.
5. Submit documentation of her full compliance with the terms and conditions imposed by the Order issued by the Louisiana State Board of Practical Nurse Examiners, dated November 4, 2016, and that her Louisiana license is current, valid and unrestricted.
6. **Upon the request of the Board or its designee, prior to working in a position where a license to practice nursing is required**, complete and submit satisfactory documentation of completion of a nurse refresher course or an extensive orientation approved in advance by the Board or its designee.

***Reporting Requirements for Suspension Period***

7. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
8. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
9. Submit any and all information that the Board may request regarding **MS. VICKERS's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
10. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board.

11. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: [monitoring@nursing.ohio.gov](mailto:monitoring@nursing.ohio.gov) or by mail to:

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17 South High Street, Suite 660  
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12. Verify that the reports and documentation required by this Order are received in the Board office.
13. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.

Motion adopted by a majority vote of the Board members present with Barbara Douglas, Lisa Klenke and Sandra Ranck abstaining.

This Order shall become effective immediately and is hereby entered upon the Journal of the Board for the 25<sup>th</sup> day of January 2018.

Bailey, Christina (aka "Christina Peck"), R.N. 372334, P.N. 139374 (CASE #15-7787)

**Action:** It was moved by Lauralee Krabill, seconded by Matthew Carle, that upon consideration of the charges stated against **CHRISTINA BAILEY** in the July 27, 2017 Notice of Opportunity for Hearing and evidence supporting the charges, the Board find that **MS. BAILEY** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice of Opportunity for Hearing, and that **MS. BAILEY's** licenses to practice nursing as a registered nurse and licensed practical nurse be suspended for an indefinite period of time but not less than one (1) year with the conditions for reinstatement set forth below, and following reinstatement, **MS. BAILEY's** licenses to practice nursing as a registered nurse and licensed practical nurse shall be subject to a stayed suspension under the probationary terms and restrictions set forth below for a minimum period of two (2) years including the **Permanent Practice Restrictions**, set forth below.

#### **SUSPENSION OF LICENSE**

**MS. BAILEY's** licenses to practice as a registered nurse and licensed practical nurse are suspended for an indefinite period of time but not less than one (1) year.

The Board may reinstate **MS. BAILEY's** licenses to practice as a registered nurse and licensed practical nurse if **MS. BAILEY** submits a written request for reinstatement and is determined by the Board or its designee to have complied

with the Conditions for Reinstatement.

### **CONDITIONS FOR REINSTATEMENT**

#### **MS. BAILEY shall:**

1. Be determined, by the Board or its designee, to be able to practice nursing according to acceptable and prevailing standards of safe nursing care based upon an interview and review of the documentation specified in this Order.
2. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
3. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
4. **Within ninety (90) days immediately prior to requesting reinstatement**, submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MS. BAILEY**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MS. BAILEY's** criminal records check to the Board. The Board will not consider a request for reinstatement until **MS. BAILEY's** completed criminal records check, including the FBI check, is received by the Board.

#### ***Educational Requirements***

5. Successfully complete and submit satisfactory documentation of successful completion of the following continuing education, or other comparable course(s) approved in advance by the Board or its designee: five (5) hours Professional Boundaries, five (5) hours HIPAA, and two (2) hours Ohio Nursing Law and Rules. Continuing education required by this Order **does not meet the continuing education requirements for license renewal.**

#### ***Evaluations***

6. **Within ninety (90) days immediately prior to requesting reinstatement**, at **MS. BAILEY's** expense, obtain a mental health evaluation from a Board approved evaluator and provide the Board with complete documentation of such evaluation. Prior to the evaluation, **MS. BAILEY** shall provide the mental health evaluator with a copy of this Order and the Notice of Opportunity for Hearing. **MS. BAILEY** shall execute releases to permit the mental health evaluator to obtain any information deemed appropriate and necessary for the evaluation. The mental health evaluator shall submit a written opinion to the Board that includes

- diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on **MS. BAILEY's** licenses, and a statement as to whether **MS. BAILEY** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
7. Provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the mental health evaluator described above until released. Further, the Board may utilize the mental health evaluator's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on **MS. BAILEY's** licenses.
  8. **Within ninety (90) days immediately prior to requesting reinstatement, at MS. BAILEY's expense, obtain a chemical dependency evaluation by a chemical dependency professional approved by the Board or its designee and, prior to the evaluation, provide the chemical dependency professional with a copy of this Order and the Notice of Opportunity for Hearing. MS. BAILEY shall execute releases to permit the chemical dependency professional to obtain any information deemed appropriate and necessary for the evaluation. The chemical dependency professional shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on MS. BAILEY's licenses, and a statement as to whether MS. BAILEY is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.**
  9. Provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the chemical dependency professional described above until released. Further, the Board may utilize the professional's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on **MS. BAILEY's** licenses.

### ***Monitoring***

10. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. BAILEY's** history. **MS. BAILEY** shall self-administer the prescribed drugs only in the manner prescribed.
11. **For a minimum, continuous period of one (1) year immediately prior to requesting reinstatement, submit, at MS. BAILEY's expense and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Upon and after MS. BAILEY's initiation of drug screening, refusal to submit such specimen, or failure to submit such specimen on the day she is selected, or in such a manner as the Board**

may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MS. BAILEY** shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who has received a complete copy of this Order prior to prescribing for **MS. BAILEY**.

- a. **Prior** to initiating drug screening:
  - i. Provide a copy of this Order to all treating practitioners;
  - ii. Provide to the Board a list of all treating practitioners, including addresses and telephone numbers; and
  - iii. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. BAILEY**, **and** submit the report directly to the Board.
  
- b. **After** initiating drug screening, be under a **continuing duty** to:
  - i. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
  - ii. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;
  - iii. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and
  - iv. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. BAILEY** **and** submit the report directly to the Board.

#### ***Reporting Requirements for Suspension Period***

12. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
13. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
14. Submit any and all information that the Board may request regarding **MS. BAILEY's** ability to practice nursing according to acceptable and

prevailing standards of safe nursing practice.

15. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board.
16. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: [monitoring@nursing.ohio.gov](mailto:monitoring@nursing.ohio.gov) or by mail to:

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17 South High Street, Suite 660  
Columbus, OH 43215-3466**

17. Verify that the reports and documentation required by this Order are received in the Board office.
18. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.

### **PROBATIONARY PERIOD**

Following reinstatement, the suspension shall be stayed and **MS. BAILEY's** licenses shall be subject to Probationary Terms and Restrictions for a minimum period of two (2) years.

### **PROBATIONARY TERMS AND RESTRICTIONS**

**MS. BAILEY shall:**

1. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
2. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.

***Monitoring***

3. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. BAILEY's** history. **MS. BAILEY** shall self-administer prescribed drugs only in the manner prescribed.
4. Submit, at her expense, and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site

specified by the Board at such times as the Board may request. Refusal to submit such specimen, or failure to submit such specimen on the day she is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MS. BAILEY** shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. BAILEY's** history.

**MS. BAILEY** shall:

- a. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
- b. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;
- c. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and
- d. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. BAILEY** and submit the report directly to the Board.

### ***Employment Conditions***

5. **Upon the request of the Board or its designee, prior to working in a position where a license to practice nursing is required**, complete and submit satisfactory documentation of completion of a nurse refresher course or an extensive orientation approved in advance by the Board or its designee.
6. **Prior to accepting employment as a nurse**, each time with every employer, notify the Board, in writing. Any period during which **MS. BAILEY** does not work in a position within the State of Ohio for which a license to practice nursing is required **shall not count** toward fulfilling the probationary period imposed by this Order.
7. Be under a continuing duty to provide a copy of this Order to any new employer **prior to accepting employment as a nurse**.
8. Have current employer(s), if working in a position where a license to practice nursing is required, submit written reports regarding job performance **on a quarterly basis beginning within thirty (30) days of**

**the effective date of this Order or beginning within thirty (30) days of working in a position as a nurse.**

9. Have current employer(s) send documentation to the Board, along with the first employer report, of receipt of a copy of this Order, including the date this Order was received.

***Reporting Requirements for Probationary Period***

10. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
11. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
12. Submit any and all information that the Board may request regarding **MS. BAILEY's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
13. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.
14. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: [monitoring@nursing.ohio.gov](mailto:monitoring@nursing.ohio.gov) or by mail to:

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17 South High Street, Suite 660  
Columbus, OH 43215-3466**

15. Verify that the reports and documentation required by this Order are received in the Board office.
16. Inform the Board **within five (5) business days**, in writing, of any change in employment status or of any change in residential or home address or telephone number.

**LICENSE RESTRICTIONS**

**In addition to Probationary Terms and Restrictions, MS. BAILEY's licenses are subject to the following License Restrictions:**

### **Permanent Practice Restrictions**

**Upon reinstatement, MS. BAILEY** shall not practice nursing as a registered nurse or licensed practical nurse (1) in a patient's residence; (2) for staffing agencies or pools; (3) for an individual or group of individuals who directly engage **MS. BAILEY** to provide nursing services for fees, compensation, or other consideration or who engage **MS. BAILEY** as a volunteer; or (4) as an independent contractor or for *locum tenens* assignments.

**Upon reinstatement, MS. BAILEY** shall not function in a position or employment where the job duties or requirements involve management of nursing and nursing responsibilities, or supervising and evaluating nursing practice. Such positions include, but are not limited to, the following: Director of Nursing, Assistant Director of Nursing, Nurse Manager, Vice President of Nursing.

### **FAILURE TO COMPLY**

The stay of **MS. BAILEY's** suspension shall be lifted and **MS. BAILEY's** licenses to practice nursing as a registered nurse and licensed practical nurse will be automatically suspended if it appears to the Board that **MS. BAILEY** has violated or breached any terms or conditions of this Order. Following the automatic suspension, the Board shall notify **MS. BAILEY** via certified mail of the specific nature of the charges and automatic suspension of **MS. BAILEY's** licenses. **MS. BAILEY** may request a hearing regarding the charges.

### **DURATION**

The Board may only alter the probationary period imposed by this Order if: (1) the Board determines that **MS. BAILEY** has complied with all aspects of this Order; and (2) the Board determines that **MS. BAILEY** is able to practice nursing according to acceptable and prevailing standards of safe nursing care without Board monitoring, based upon an interview with **MS. BAILEY** and review of the reports as required herein.

As indicated above under Employment Conditions, any period during which **MS. BAILEY** does not work in a position within the State of Ohio for which a license to practice nursing is required shall not count toward fulfilling the probationary period imposed by this Order.

Motion adopted by a majority vote of the Board members present with Barbara Douglas, Lisa Klenke and Sandra Ranck abstaining.

This Order shall become effective immediately and is hereby entered upon the Journal of the Board for the 25<sup>th</sup> day of January 2018.

Brouse, Ashley Ellen, R.N. 351860 (CASE #16-7842)

**Action:** It was moved by Erin Keels, seconded by Joanna Ridgeway, that upon consideration of the charges stated against **ASHLEY ELLEN BROUSE** in the July 27, 2017 Notice of Opportunity for Hearing and evidence supporting the charges, the Board find that **MS. BROUSE** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice of Opportunity for Hearing, and that **MS. BROUSE's** license to practice nursing as a registered nurse be suspended for an indefinite period of time with the conditions for reinstatement set forth below.

### SUSPENSION OF LICENSE

**MS. BROUSE's** license to practice as a registered nurse is suspended for an indefinite period of time.

The Board may reinstate **MS. BROUSE's** license to practice as a registered nurse if **MS. BROUSE** submits a written request for reinstatement and is determined by the Board or its designee to have complied with the Conditions for Reinstatement.

### CONDITIONS FOR REINSTATEMENT

**MS. BROUSE shall:**

1. Be determined, by the Board or its designee, to be able to practice nursing according to acceptable and prevailing standards of safe nursing care based upon an interview and review of the documentation specified in this Order.
2. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
3. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
4. **Within ninety (90) days immediately prior to requesting reinstatement**, submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MS. BROUSE**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MS. BROUSE's** criminal records check to the Board. The Board will not consider a request for reinstatement until **MS. BROUSE's** completed criminal records check, including the FBI check, is received by the Board.
5. Submit documentation of her full compliance with the terms and conditions imposed by the Agreed Order issued by the State of Kentucky Board of

Nursing, dated July 8, 2016, and that her Kentucky license is current, valid and unrestricted.

6. **Upon the request of the Board or its designee, prior to working in a position where a license to practice nursing is required**, complete and submit satisfactory documentation of completion of a nurse refresher course or an extensive orientation approved in advance by the Board or its designee.

***Reporting Requirements for Suspension Period***

7. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
8. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
9. Submit any and all information that the Board may request regarding **MS. BROUSE's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
10. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board.
11. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: [monitoring@nursing.ohio.gov](mailto:monitoring@nursing.ohio.gov) or by mail to:

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17 South High Street, Suite 660  
Columbus, OH 43215-3466**

12. Verify that the reports and documentation required by this Order are received in the Board office.
13. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.

Motion adopted by a majority vote of the Board members present with Barbara Douglas, Lisa Klenke and Sandra Ranck abstaining.

This Order shall become effective immediately and is hereby entered upon the Journal of the Board for the 25<sup>th</sup> day of January 2018.

Smith, Cathryn Sue, P.N. 120978 (CASE #17-1166, #16-6843)

**Action:** It was moved by Joanna Ridgeway, seconded by Erin Keels, that upon consideration of the charges stated against **CATHRYN SUE SMITH** in the September 14, 2017 Notice of Opportunity for Hearing and evidence supporting the charges, the Board find that **MS. SMITH** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice of Opportunity for Hearing, and that **MS. SMITH's** license to practice nursing as a licensed practical nurse be suspended for an indefinite period of time but not less than three (3) years with the conditions for reinstatement set forth below, and following reinstatement, **MS. SMITH's** license to practice nursing as a licensed practical nurse shall be subject to a stayed suspension under the probationary terms and restrictions set forth below for a minimum period of two (2) years including the **Temporary Narcotic and Permanent Practice Restrictions**, set forth below.

### SUSPENSION OF LICENSE

**MS. SMITH's** license to practice as a licensed practical nurse is suspended for an indefinite period of time but not less than three (3) years.

The Board may reinstate **MS. SMITH's** license to practice as a licensed practical nurse if **MS. SMITH** submits a written request for reinstatement and is determined by the Board or its designee to have complied with the Conditions for Reinstatement.

### CONDITIONS FOR REINSTATEMENT

**MS. SMITH shall:**

1. Be determined, by the Board or its designee, to be able to practice nursing according to acceptable and prevailing standards of safe nursing care based upon an interview and review of the documentation specified in this Order.
2. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
3. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
4. **Within ninety (90) days immediately prior to requesting reinstatement**, submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MS. SMITH**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MS. SMITH's** criminal records check to the Board. The Board will not consider a request for reinstatement until **MS. SMITH's** completed criminal records check,

including the FBI check, is received by the Board.

5. Submit documentation of her full compliance with the requirements imposed by the Sylvania Municipal Court in Case Number CRA 1602339.

### ***Educational Requirements***

6. Successfully complete and submit satisfactory documentation of successful completion of the following continuing education, or other comparable course(s) approved in advance by the Board or its designee: five (5) hours Chemical Dependency and Substance Abuse, and two (2) hours Ohio Nursing Law and Rules. Continuing education required by this Order **does not meet the continuing education requirements for license renewal.**

### ***Evaluations***

7. **Within ninety (90) days immediately prior to requesting reinstatement,** at **MS. SMITH's** expense, obtain a mental health evaluation from a Board approved evaluator and provide the Board with complete documentation of such evaluation. Prior to the evaluation, **MS. SMITH** shall provide the mental health evaluator with a copy of this Order and the Notice of Opportunity for Hearing. **MS. SMITH** shall execute releases to permit the mental health evaluator to obtain any information deemed appropriate and necessary for the evaluation. The mental health evaluator shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on **MS. SMITH's** license, and a statement as to whether **MS. SMITH** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
8. Provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the mental health evaluator described above until released. Further, the Board may utilize the mental health evaluator's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on **MS. SMITH's** license.
9. **Within ninety (90) days immediately prior to requesting reinstatement,** at **MS. SMITH's** expense, obtain a comprehensive physical examination by a Board approved physician for the purposes of evaluating **MS. SMITH's** fitness for duty and safety to practice nursing as a licensed practical nurse. This Board approved physician shall provide the Board with complete documentation of **MS. SMITH's** comprehensive physical examination and with a comprehensive assessment regarding **MS. SMITH's** fitness for duty and safety to practice nursing as a licensed practical nurse. Prior to the examination, **MS. SMITH** shall provide the Board approved physician with a copy of this Order and the Notice of

- Opportunity for Hearing. **MS. SMITH** shall execute releases to permit the Board approved physician performing the comprehensive physical examination, and assessment to obtain any information deemed appropriate and necessary for the assessment. The evaluating physician shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on **MS. SMITH's** license to practice, and stating whether **MS. SMITH** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
10. The Board may utilize the Board approved physician's recommendations and conclusions from the comprehensive physical examination and assessment as a basis for additional terms and restrictions on **MS. SMITH's** license.

### ***Monitoring***

11. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. SMITH's** history. **MS. SMITH** shall self-administer the prescribed drugs only in the manner prescribed.
12. **For a minimum, continuous period of one (1) year immediately prior to requesting reinstatement**, submit, at **MS. SMITH's** expense and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Upon and after **MS. SMITH's** initiation of drug screening, refusal to submit such specimen, or failure to submit such specimen on the day she is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MS. SMITH** shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who has received a complete copy of this Order prior to prescribing for **MS. SMITH**.
- a. ***Prior*** to initiating drug screening:
- i. Provide a copy of this Order to all treating practitioners;
  - ii. Provide to the Board a list of all treating practitioners, including addresses and telephone numbers; and
  - iii. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. SMITH**, ***and*** submit the

report directly to the Board.

- b. **After** initiating drug screening, be under a **continuing duty** to:
- i. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
  - ii. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;
  - iii. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and
  - iv. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. SMITH and** submit the report directly to the Board.

***Reporting Requirements for Suspension Period***

13. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
14. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
15. Submit any and all information that the Board may request regarding **MS. SMITH's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
16. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board.
17. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: [monitoring@nursing.ohio.gov](mailto:monitoring@nursing.ohio.gov) or by mail to:

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17 South High Street, Suite 660  
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18. Verify that the reports and documentation required by this Order are received in the Board office.

19. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.

### **PROBATIONARY PERIOD**

Following reinstatement, the suspension shall be stayed and **MS. SMITH's** license shall be subject to Probationary Terms and Restrictions for a minimum period of two (2) years.

### **PROBATIONARY TERMS AND RESTRICTIONS**

#### **MS. SMITH shall:**

1. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
2. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
3. Submit documentation of her full compliance with the requirements imposed by the Sylvania Municipal Court in Case Number CRA 1602339.

#### ***Monitoring***

4. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. SMITH's** history. **MS. SMITH** shall self-administer prescribed drugs only in the manner prescribed.
5. Continuing for a minimum period of six (6) months immediately after reinstatement, submit, at her expense, and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Refusal to submit such specimen, or failure to submit such specimen on the day she is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MS. SMITH** shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. SMITH's** history.

#### **MS. SMITH shall:**

- a. Provide a copy of this Order, prior to initiating treatment, to

additional treating practitioners;

- b. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;
- c. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and
- d. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. SMITH** and submit the report directly to the Board.

### ***Employment Conditions***

6. **Upon the request of the Board or its designee, prior to working in a position where a license to practice nursing is required**, complete and submit satisfactory documentation of completion of a nurse refresher course or an extensive orientation approved in advance by the Board or its designee.
7. **Prior to accepting employment as a nurse**, each time with every employer, notify the Board, in writing. Any period during which **MS. SMITH** does not work in a position within the State of Ohio for which a license to practice nursing is required **shall not count** toward fulfilling the probationary period imposed by this Order.
8. Be under a continuing duty to provide a copy of this Order to any new employer **prior to accepting employment as a nurse**.
9. Have current employer(s), if working in a position where a license to practice nursing is required, submit written reports regarding job performance **on a quarterly basis beginning within thirty (30) days of the effective date of this Order or beginning within thirty (30) days of working in a position as a nurse**.
10. Have current employer(s) send documentation to the Board, along with the first employer report, of receipt of a copy of this Order, including the date this Order was received.

### ***Reporting Requirements for Probationary Period***

11. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.

12. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
13. Submit any and all information that the Board may request regarding **MS. SMITH's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
14. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.
15. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: [monitoring@nursing.ohio.gov](mailto:monitoring@nursing.ohio.gov) or by mail to:

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16. Verify that the reports and documentation required by this Order are received in the Board office.
17. Inform the Board **within five (5) business days**, in writing, of any change in employment status or of any change in residential or home address or telephone number.

### **LICENSE RESTRICTIONS**

**In addition to Probationary Terms and Restrictions, MS. SMITH's license is subject to the following License Restrictions:**

#### **Temporary Narcotic Restriction**

**Upon reinstatement, MS. SMITH** shall not administer, have access to, or possess (except as prescribed for **MS. SMITH's** use by another so authorized by law who has full knowledge of **MS. SMITH's** history) any narcotics, other controlled substances, or mood altering drugs for a minimum period of **one (1) year** in which **MS. SMITH** is working in a position that requires a nursing license. At any time after the minimum period of one (1) year previously described, **MS. SMITH** may submit a written request to the Board to have this restriction re-evaluated. In addition, **MS. SMITH** shall not count narcotics or possess or carry any work keys for locked medication carts, cabinets, drawers, or containers. **MS. SMITH** shall not call in or order prescriptions or prescription refills.

### **Permanent Practice Restrictions**

**Upon reinstatement, MS. SMITH** shall not practice nursing as a licensed practical nurse (1) in a patient's residence; (2) for staffing agencies or pools; (3) for an individual or group of individuals who directly engage **MS. SMITH** to provide nursing services for fees, compensation, or other consideration or who engage **MS. SMITH** as a volunteer; or (4) as an independent contractor or for *locum tenens* assignments.

**Upon reinstatement, MS. SMITH** shall not function in a position or employment where the job duties or requirements involve management of nursing and nursing responsibilities. Such positions include, but are not limited to, the following: Director of Nursing, Assistant Director of Nursing, Nurse Manager, Vice President of Nursing.

### **FAILURE TO COMPLY**

The stay of **MS. SMITH's** suspension shall be lifted and **MS. SMITH's** license to practice nursing as a licensed practical nurse will be automatically suspended if it appears to the Board that **MS. SMITH** has violated or breached any terms or conditions of this Order. Following the automatic suspension, the Board shall notify **MS. SMITH** via certified mail of the specific nature of the charges and automatic suspension of **MS. SMITH's** license. **MS. SMITH** may request a hearing regarding the charges.

### **DURATION**

The Board may only alter the probationary period imposed by this Order if: (1) the Board determines that **MS. SMITH** has complied with all aspects of this Order; and (2) the Board determines that **MS. SMITH** is able to practice nursing according to acceptable and prevailing standards of safe nursing care without Board monitoring, based upon an interview with **MS. SMITH** and review of the reports as required herein.

As indicated above under Employment Conditions, any period during which **MS. SMITH** does not work in a position within the State of Ohio for which a license to practice nursing is required shall not count toward fulfilling the probationary period imposed by this Order.

Motion adopted by a majority vote of the Board members present with Barbara Douglas, Lisa Klenke and Sandra Ranck abstaining.

This Order shall become effective immediately and is hereby entered upon the Journal of the Board for the 25<sup>th</sup> day of January 2018.

Smith, Sherita Renee, P.N. 130628 (CASE #17-2596, #17-2595)

**Action:** It was moved by Nancy Fellows, seconded by Matthew Carle, that upon consideration of the charges stated against **SHERITA RENEE SMITH** in the July 27, 2017 Notice of Opportunity for Hearing and evidence supporting the charges, the Board find that **MS. SMITH** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice of Opportunity for Hearing, and that **MS. SMITH's** license to practice nursing as a licensed practical nurse be suspended and that the suspension is stayed subject to the probationary terms and restrictions set forth below for a minimum period of two (2) years including the **Permanent Practice Restrictions**, set forth below.

### **PROBATIONARY PERIOD**

**MS. SMITH's** license shall be subject to Probationary Terms and Restrictions for a minimum period of two (2) years.

### **PROBATIONARY TERMS AND RESTRICTIONS**

**MS. SMITH shall:**

1. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
2. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
3. **Within ninety (90) days of the effective date of this Order**, submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MS. SMITH**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MS. SMITH's** criminal records check to the Board.

#### ***Educational Requirements***

4. **Within six (6) months of the effective date of this Order**, successfully complete and submit satisfactory documentation of successful completion of the following continuing education, or other comparable course(s) approved in advance by the Board or its designee: five (5) hours Patient Rights, five (5) hours Professional Accountability, and two (2) hours Ohio Nursing Law and Rules. Continuing education required by this Order **does not meet the continuing education requirements for license renewal.**

### ***Employment Conditions***

5. **Upon the request of the Board or its designee**, complete and submit satisfactory documentation of completion of a nurse refresher course or an extensive orientation approved in advance by the Board or its designee.
6. Notify the Board, in writing, of the name and address of any current employer **within thirty (30) days following the effective date of this Order**, or any new employer prior to accepting nursing employment. Any period during which **MS. SMITH** does not work in a position within the State of Ohio for which a license to practice nursing is required **shall not count** toward fulfilling the probationary period imposed by this Order.
7. **Within fifteen (15) days of the effective date of this Order**, provide her current employer(s) with a copy of this Order, if working in a position in which a nursing license is required. **MS. SMITH** is under a continuing duty to provide a copy of this Order to any new employer **prior to accepting employment as a nurse**.
8. Have current employer(s), if working in a position where a license to practice nursing is required, submit written reports regarding job performance **on a quarterly basis beginning within thirty (30) days of the effective date of this Order or beginning within thirty (30) days of working in a position as a nurse**.
9. Have current employer(s) send documentation to the Board, along with the first employer report, of receipt of a copy of this Order, including the date this Order was received.

### ***Reporting Requirements for Probationary Period***

10. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
11. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
12. Submit any and all information that the Board may request regarding **MS. SMITH's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
13. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.
14. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this

Order shall be sent by email to: [monitoring@nursing.ohio.gov](mailto:monitoring@nursing.ohio.gov) or by mail to:

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Columbus, OH 43215-3466**

15. Verify that the reports and documentation required by this Order are received in the Board office.
16. Inform the Board **within five (5) business days**, in writing, of any change in employment status or of any change in residential or home address or telephone number.

### **LICENSE RESTRICTIONS**

**In addition to Probationary Terms and Restrictions, MS. SMITH's license is subject to the following License Restrictions:**

#### **Permanent Practice Restriction**

**MS. SMITH** shall not practice nursing as a licensed practical nurse as an independent provider or independent contractor where the nurse provides nursing care and is reimbursed for services by the State of Ohio through State agencies or agents of the State.

#### **FAILURE TO COMPLY**

The stay of **MS. SMITH's** suspension shall be lifted and **MS. SMITH's** license to practice nursing as a licensed practical nurse will be automatically suspended if it appears to the Board that **MS. SMITH** has violated or breached any terms or conditions of this Order. Following the automatic suspension, the Board shall notify **MS. SMITH** via certified mail of the specific nature of the charges and automatic suspension of **MS. SMITH's** license. **MS. SMITH** may request a hearing regarding the charges.

#### **DURATION**

The Board may only alter the probationary period imposed by this Order if: (1) the Board determines that **MS. SMITH** has complied with all aspects of this Order; and (2) the Board determines that **MS. SMITH** is able to practice nursing according to acceptable and prevailing standards of safe nursing care without Board monitoring, based upon an interview with **MS. SMITH** and review of the reports as required herein.

As indicated above under Employment Conditions, any period during which **MS. SMITH** does not work in a position within the State of Ohio for which a license to practice nursing is required shall not count toward fulfilling the probationary period imposed by this Order.

Motion adopted by a majority vote of the Board members present with Barbara Douglas, Lisa Klenke and Sandra Ranck abstaining.

This Order shall become effective immediately and is hereby entered upon the Journal of the Board for the 25<sup>th</sup> day of January 2018.

Boycan Chipps, Sierra Nicole, P.N. 153590 (CASE #17-1888)

**Action:** It was moved by Matthew Carle, seconded by Lauralee Krabill, that upon consideration of the charges stated against **SIERRA NICOLE BOYCAN CHIPPS** in the May 18, 2017 Notice of Automatic Suspension and Opportunity for Hearing and evidence supporting the charges, the Board find that **MS. BOYCAN CHIPPS** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice of Automatic Suspension and Opportunity for Hearing, and that **MS. BOYCAN CHIPPS's** license to practice nursing as a licensed practical nurse be suspended for an indefinite period of time with the conditions for reinstatement set forth below, and following reinstatement, **MS. BOYCAN CHIPPS's** license to practice nursing as a licensed practical nurse shall be subject to a stayed suspension under the probationary terms and restrictions set forth below for a minimum period of one (1) year including the **Temporary Practice Restrictions, unless otherwise approved in advance**, set forth below.

### **SUSPENSION OF LICENSE**

**MS. BOYCAN CHIPPS's** license to practice as a licensed practical nurse is suspended for an indefinite period of time.

The Board may reinstate **MS. BOYCAN CHIPPS's** license to practice as a licensed practical nurse if **MS. BOYCAN CHIPPS** submits a written request for reinstatement and is determined by the Board or its designee to have complied with the Conditions for Reinstatement.

### **CONDITIONS FOR REINSTATEMENT**

**MS. BOYCAN CHIPPS shall:**

1. Be determined, by the Board or its designee, to be able to practice nursing according to acceptable and prevailing standards of safe nursing care based upon an interview and review of the documentation specified in this Order.
2. Obey all federal, state, and local laws, and all laws and rules governing

the practice of nursing in Ohio.

3. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
4. **Within ninety (90) days immediately prior to requesting reinstatement**, submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MS. BOYCAN CHIPPS**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MS. BOYCAN CHIPPS's** criminal records check to the Board. The Board will not consider a request for reinstatement until **MS. BOYCAN CHIPPS's** completed criminal records check, including the FBI check, is received by the Board.

### ***Educational Requirements***

5. Establish contact with a nursing educator, approved in advance by the Board or its designee, who has no less than a master's degree and who is affiliated with a nursing educational program.
  - a. Have the educator provide the Board with a written report of an assessment of **MS. BOYCAN CHIPPS**, which identifies **MS. BOYCAN CHIPPS's** knowledge/practice deficiencies and remedial educational needs.
  - b. Prior to the assessment, provide the nursing educator with a copy of this Order and the Notice of Automatic Suspension and Opportunity for Hearing and submit to any nursing skills or knowledge assessments required by the educator. **MS. BOYCAN CHIPPS** shall also execute releases prior to the assessment to permit the educator to obtain any information deemed appropriate and necessary for the assessment including information from **MS. BOYCAN CHIPPS's** employer(s), former employers, and Board staff.
  - c. Following the assessment, have the educator provide the Board with a copy of a learning plan developed by the educator for **MS. BOYCAN CHIPPS** and obtain approval of the learning plan by the Board or its designee. The learning plan shall identify specific remediation that **MS. BOYCAN CHIPPS** shall complete to address any knowledge/practice deficiencies and remedial educational needs identified by the educator and shall identify the time frame during which **MS. BOYCAN CHIPPS** shall complete such learning plan.
  - d. Successfully complete and submit satisfactory documentation of successful completion of the learning plan within the time frame

specified in the learning plan.

- e. Be responsible for all costs associated with meeting the requirements of the learning plan.
- f. **After MS. BOYCAN CHIPPS has successfully completed the learning plan**, have the educator provide the Board with:
  - i. An assessment and any recommendations for additional remedial education and/or restrictions that should be placed on **MS. BOYCAN CHIPPS's** license; and
  - ii. A written opinion stating whether **MS. BOYCAN CHIPPS** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
- g. The Board may utilize the educator's recommendations and conclusions from the assessment as a basis for additional terms and restrictions on **MS. BOYCAN CHIPPS's** license.
- h. If **MS. BOYCAN CHIPPS** has met all other conditions for reinstatement, in the event that the educator's recommendations include a clinical component, this requirement will be completed following reinstatement of **MS. BOYCAN CHIPPS's** nursing license and prior to **MS. BOYCAN CHIPPS** practicing as a nurse.

#### ***Reporting Requirements for Suspension Period***

- 6. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
- 7. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
- 8. Submit any and all information that the Board may request regarding **MS. BOYCAN CHIPPS's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
- 9. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board.
- 10. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: [monitoring@nursing.ohio.gov](mailto:monitoring@nursing.ohio.gov) or by mail to:

**Compliance Unit**

**Ohio Board of Nursing  
17 South High Street, Suite 660  
Columbus, OH 43215-3466**

11. Verify that the reports and documentation required by this Order are received in the Board office.
12. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.

**PROBATIONARY PERIOD**

Following reinstatement, the suspension shall be stayed and **MS. BOYCAN CHIPPS's** license shall be subject to Probationary Terms and Restrictions for a minimum period of one (1) year.

**PROBATIONARY TERMS AND RESTRICTIONS**

**MS. BOYCAN CHIPPS shall:**

1. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
2. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.

***Educational Requirements***

3. **Within ninety (90) days of reinstatement**, successfully complete and submit satisfactory documentation of successful completion of the following continuing education, or other comparable course(s) approved in advance by the Board or its designee: five (5) hours Preventing Medication Errors, two (2) hours Professional Accountability, and two (2) hours Ohio Nursing Law and Rules. Continuing education required by this Order **does not meet the continuing education requirements for license renewal.**

***Employment Conditions***

4. **Upon the request of the Board or its designee, prior to working in a position where a license to practice nursing is required**, complete and submit satisfactory documentation of completion of a nurse refresher course or an extensive orientation approved in advance by the Board or its designee.
5. **Prior to accepting employment as a nurse**, each time with every employer, notify the Board, in writing. Any period during which **MS.**

**BOYCAN CHIPPS** does not work in a position within the State of Ohio for which a license to practice nursing is required **shall not count** toward fulfilling the probationary period imposed by this Order.

6. Be under a continuing duty to provide a copy of this Order to any new employer **prior to accepting employment as a nurse.**
7. Have current employer(s), if working in a position where a license to practice nursing is required, submit written reports regarding job performance **on a quarterly basis beginning within thirty (30) days of the effective date of this Order or beginning within thirty (30) days of working in a position as a nurse.**
8. Have current employer(s) send documentation to the Board, along with the first employer report, of receipt of a copy of this Order, including the date this Order was received.

***Reporting Requirements for Probationary Period***

9. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
10. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
11. Submit any and all information that the Board may request regarding **MS. BOYCAN CHIPPS's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
12. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.
13. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: [monitoring@nursing.ohio.gov](mailto:monitoring@nursing.ohio.gov) or by mail to:

**Compliance Unit  
Ohio Board of Nursing  
17 South High Street, Suite 660  
Columbus, OH 43215-3466**

14. Verify that the reports and documentation required by this Order are received in the Board office.

15. Inform the Board **within five (5) business days**, in writing, of any change in employment status or of any change in residential or home address or telephone number.

## **LICENSE RESTRICTIONS**

**In addition to Probationary Terms and Restrictions, MS. BOYCAN CHIPPS's license is subject to the following License Restrictions:**

### **Temporary Practice Restrictions**

**Upon reinstatement, unless otherwise approved in advance, in writing, by the Board or its designee, MS. BOYCAN CHIPPS** shall not practice nursing as a licensed practical nurse (1) in a patient's residence; (2) for staffing agencies or pools; (3) for an individual or group of individuals who directly engage **MS. BOYCAN CHIPPS** to provide nursing services for fees, compensation, or other consideration or who engage **MS. BOYCAN CHIPPS** as a volunteer; or (4) as an independent contractor or for *locum tenens* assignments.

**Upon reinstatement, unless otherwise approved in advance, in writing, by the Board or its designee, MS. BOYCAN CHIPPS** shall not function in a position or employment where the job duties or requirements involve management of nursing and nursing responsibilities. Such positions include, but are not limited to, the following: Director of Nursing, Assistant Director of Nursing, Nurse Manager, Vice President of Nursing.

### **FAILURE TO COMPLY**

The stay of **MS. BOYCAN CHIPPS's** suspension shall be lifted and **MS. BOYCAN CHIPPS's** license to practice nursing as a licensed practical nurse will be automatically suspended if it appears to the Board that **MS. BOYCAN CHIPPS** has violated or breached any terms or conditions of this Order. Following the automatic suspension, the Board shall notify **MS. BOYCAN CHIPPS** via certified mail of the specific nature of the charges and automatic suspension of **MS. BOYCAN CHIPPS's** license. **MS. BOYCAN CHIPPS** may request a hearing regarding the charges.

### **DURATION**

The Board may only alter the probationary period imposed by this Order if: (1) the Board determines that **MS. BOYCAN CHIPPS** has complied with all aspects of this Order; and (2) the Board determines that **MS. BOYCAN CHIPPS** is able to practice nursing according to acceptable and prevailing standards of safe nursing care without Board monitoring, based upon an interview with **MS. BOYCAN CHIPPS** and review of the reports as required herein.

As indicated above under Employment Conditions, any period during which **MS. BOYCAN CHIPPS** does not work in a position within the State of Ohio for which a license to practice nursing is required shall not count toward fulfilling the probationary period imposed by this Order.

Motion adopted by a majority vote of the Board members present with Barbara Douglas, Lisa Klenke and Sandra Ranck abstaining.

This Order shall become effective immediately and is hereby entered upon the Journal of the Board for the 25<sup>th</sup> day of January 2018.

Rolen, Jr., Michael Douglas, P.N. 149694 (CASE #17-3239)

**Action:** It was moved by Patricia Sharpnack, seconded by Lauralee Krabill, that upon consideration of the charges stated against **MICHAEL DOUGLAS ROLEN, JR.** in the July 27, 2017 Notice of Automatic Suspension and Opportunity for Hearing and evidence supporting the charges, the Board find that **MR. ROLEN** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice of Automatic Suspension and Opportunity for Hearing, and that **MR. ROLEN's** license to practice nursing as a licensed practical nurse be suspended for an indefinite period of time with the conditions for reinstatement set forth below, and following reinstatement, **MR. ROLEN's** license to practice nursing as a licensed practical nurse shall be subject to a stayed suspension under the probationary terms and restrictions set forth below for a minimum period of two (2) years including the **previously imposed permanent practice restrictions**, set forth below.

### **SUSPENSION OF LICENSE**

**MR. ROLEN's** license to practice as a licensed practical nurse is suspended for an indefinite period of time.

The Board may reinstate **MR. ROLEN's** license to practice as a licensed practical nurse if **MR. ROLEN** submits a written request for reinstatement and is determined by the Board or its designee to have complied with the Conditions for Reinstatement.

### **CONDITIONS FOR REINSTATEMENT**

**MR. ROLEN shall:**

1. Be determined, by the Board or its designee, to be able to practice nursing according to acceptable and prevailing standards of safe nursing care based upon an interview and review of the documentation specified in this Order.
2. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.

3. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
4. **Within ninety (90) days immediately prior to requesting reinstatement**, submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MR. ROLEN**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MR. ROLEN's** criminal records check to the Board. The Board will not consider a request for reinstatement until **MR. ROLEN's** completed criminal records check, including the FBI check, is received by the Board.
5. Pay a fine of five hundred dollars (\$500.00), payable: online by credit or debit card; or payable to the "Treasurer, State of Ohio," by certified check, cashier check, or money order mailed to the attention of the Compliance Unit, Ohio Board of Nursing, 17 South High Street, Suite 660, Columbus, OH 43215-3466.

#### ***Educational Requirements***

6. Successfully complete and submit satisfactory documentation of successful completion of the following continuing education, or other comparable course(s) approved in advance by the Board or its designee: ten (10) hours Professionalism and Ethics, five (5) hours Dealing with Difficult Patients, three (3) hours Anger Management, five (5) hours Disciplinary Actions, two (2) hours Ohio Nursing Law and Rules. Continuing education required by this Order **does not meet the continuing education requirements for license renewal**.

#### ***Reporting Requirements for Suspension Period***

7. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
8. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
9. Submit any and all information that the Board may request regarding **MR. ROLEN's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
10. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board.
11. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this

Order shall be sent by email to: [monitoring@nursing.ohio.gov](mailto:monitoring@nursing.ohio.gov) or by mail to:

**Compliance Unit  
Ohio Board of Nursing  
17 South High Street, Suite 660  
Columbus, OH 43215-3466**

12. Verify that the reports and documentation required by this Order are received in the Board office.
13. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.

### **PROBATIONARY PERIOD**

Following reinstatement, the suspension shall be stayed and **MR. ROLEN's** license shall be subject to Probationary Terms and Restrictions for a minimum period of two (2) years.

### **PROBATIONARY TERMS AND RESTRICTIONS**

**MR. ROLEN shall:**

1. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
2. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.

#### ***Employment Conditions***

3. **Upon the request of the Board or its designee, prior to working in a position where a license to practice nursing is required**, complete and submit satisfactory documentation of completion of a nurse refresher course or an extensive orientation approved in advance by the Board or its designee.
4. **Prior to accepting employment as a nurse**, each time with every employer, notify the Board, in writing. Any period during which **MR. ROLEN** does not work in a position within the State of Ohio for which a license to practice nursing is required **shall not count** toward fulfilling the probationary period imposed by this Order.
5. Be under a continuing duty to provide a copy of this Order to any new employer **prior to accepting employment as a nurse**.

6. Have current employer(s), if working in a position where a license to practice nursing is required, submit written reports regarding job performance **on a quarterly basis beginning within thirty (30) days of the effective date of this Order or beginning within thirty (30) days of working in a position as a nurse.**
7. Have current employer(s) send documentation to the Board, along with the first employer report, of receipt of a copy of this Order, including the date this Order was received.

***Reporting Requirements for Probationary Period***

8. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
9. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
10. Submit any and all information that the Board may request regarding **MR. ROLEN's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
11. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.
12. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: [monitoring@nursing.ohio.gov](mailto:monitoring@nursing.ohio.gov) or by mail to:

**Compliance Unit  
Ohio Board of Nursing  
17 South High Street, Suite 660  
Columbus, OH 43215-3466**

13. Verify that the reports and documentation required by this Order are received in the Board office.
14. Inform the Board **within five (5) business days**, in writing, of any change in employment status or of any change in residential or home address or telephone number.

**LICENSE RESTRICTIONS**

**In addition to Probationary Terms and Restrictions, MR. ROLEN's license is subject to the following License Restrictions:**

### **Permanent Practice Restrictions**

**Upon reinstatement, unless otherwise approved in advance, in writing, by the Board or its designee, MR. ROLEN** shall not practice nursing as a licensed practical nurse (1) for agencies providing home care in the patient's residence; (2) for hospice care programs providing hospice care in the patient's residence; (3) for staffing agencies or pools; (4) as an independent provider where the nurse provides nursing care and is reimbursed for services by the State of Ohio through State agencies or agents of the State; or (5) for an individual or group of individuals who directly engage **MR. ROLEN** to provide nursing services for fees, compensation, or other consideration or as a volunteer.

**Upon reinstatement, unless otherwise approved in advance, in writing, by the Board or its designee, MR. ROLEN** shall not function in a position or employment where the job duties or requirements involve management of nursing and nursing responsibilities. Such positions include but are not limited to the following: Director of Nursing, Assistant Director of Nursing, Nurse Manager, Vice President of Nursing.

### **FAILURE TO COMPLY**

The stay of **MR. ROLEN's** suspension shall be lifted and **MR. ROLEN's** license to practice nursing as a licensed practical nurse will be automatically suspended if it appears to the Board that **MR. ROLEN** has violated or breached any terms or conditions of this Order. Following the automatic suspension, the Board shall notify **MR. ROLEN** via certified mail of the specific nature of the charges and automatic suspension of **MR. ROLEN's** license. **MR. ROLEN** may request a hearing regarding the charges.

### **DURATION**

The Board may only alter the probationary period imposed by this Order if: (1) the Board determines that **MR. ROLEN** has complied with all aspects of this Order; and (2) the Board determines that **MR. ROLEN** is able to practice nursing according to acceptable and prevailing standards of safe nursing care without Board monitoring, based upon an interview with **MR. ROLEN** and review of the reports as required herein.

As indicated above under Employment Conditions, any period during which **MR. ROLEN** does not work in a position within the State of Ohio for which a license to practice nursing is required shall not count toward fulfilling the probationary period imposed by this Order.

Motion adopted by a majority vote of the Board members present with Barbara Douglas, Lisa Klenke and Sandra Ranck abstaining.

This Order shall become effective immediately and is hereby entered upon the Journal of the Board for the 25<sup>th</sup> day of January 2018.

Stacy, Shawn Henry, P.N. 131419 (CASE #16-7137)

**Action:** It was moved by J. Jane McFee, seconded by Patricia Sharpnack, that upon consideration of the charges stated against **SHAWN HENRY STACY** in the March 9, 2017 Notice of Automatic Suspension and Opportunity for Hearing and evidence supporting the charges, the Board find that **MR. STACY** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice of Automatic Suspension and Opportunity for Hearing, and that **MR. STACY's** license to practice nursing as a licensed practical nurse be suspended for an indefinite period of time but not less than one (1) year with the conditions for reinstatement set forth below.

### **SUSPENSION OF LICENSE**

**MR. STACY's** license to practice as a licensed practical nurse is suspended for an indefinite period of time but not less than one (1) year.

The Board may reinstate **MR. STACY's** license to practice as a licensed practical nurse if **MR. STACY** submits a written request for reinstatement and is determined by the Board or its designee to have complied with the Conditions for Reinstatement.

### **CONDITIONS FOR REINSTATEMENT**

**MR. STACY shall:**

1. Be determined, by the Board or its designee, to be able to practice nursing according to acceptable and prevailing standards of safe nursing care based upon an interview and review of the documentation specified in this Order.
2. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
3. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
4. **Within ninety (90) days immediately prior to requesting reinstatement**, submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MR. STACY**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MR. STACY's** criminal records check to the Board. The Board will not consider a request for reinstatement until **MR. STACY's** completed criminal records check, including the FBI check, is received by the Board.

5. Pay a fine of five hundred dollars (\$500.00), payable: online by credit or debit card; or payable to the "Treasurer, State of Ohio," by certified check, cashier check, or money order mailed to the attention of the Compliance Unit, Ohio Board of Nursing, 17 South High Street, Suite 660, Columbus, OH 43215-3466.

### ***Educational Requirements***

6. **Upon the request of the Board or its designee, prior to working in a position where a license to practice nursing is required**, complete and submit satisfactory documentation of completion of a nurse refresher course or an extensive orientation approved in advance by the Board or its designee.
7. Successfully complete and submit satisfactory documentation of successful completion of the following continuing education, or other comparable course(s) approved in advance by the Board or its designee: Five (5) hours Professional Accountability and Legal Liability, and two (2) hours Ohio Nursing Law and Rules. Continuing education required by this Order **does not meet the continuing education requirements for license renewal.**

### ***Reporting Requirements for Suspension Period***

8. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
9. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
10. Submit any and all information that the Board may request regarding **MR. STACY's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
11. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board.
12. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: [monitoring@nursing.ohio.gov](mailto:monitoring@nursing.ohio.gov) or by mail to:

**Compliance Unit  
Ohio Board of Nursing  
17 South High Street, Suite 660  
Columbus, OH 43215-3466**

13. Verify that the reports and documentation required by this Order are received in the Board office.

14. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.

Motion adopted by a majority vote of the Board members present with Barbara Douglas, Lisa Klenke and Sandra Ranck abstaining.

This Order shall become effective immediately and is hereby entered upon the Journal of the Board for the 25<sup>th</sup> day of January 2018.

Tylicki, Cortney Louise, P.N. 145784 (CASE #17-3990, #17-3931, #16-2401)

**Action:** It was moved by Lauralee Krabill, seconded by Matthew Carle, that upon consideration of the charges stated against **CORTNEY LOUISE TYLICKI** in the July 27, 2017 Notice of Automatic Suspension and Opportunity for Hearing and evidence supporting the charges, the Board find that **MS. TYLICKI** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice of Automatic Suspension and Opportunity for Hearing, and that **MS. TYLICKI's** license to practice nursing as a licensed practical nurse be suspended for an indefinite period of time with the conditions for reinstatement set forth below, and following reinstatement, **MS. TYLICKI's** license to practice nursing as a licensed practical nurse shall be subject to a stayed suspension under the probationary terms and restrictions set forth below for a minimum period of three (3) years including the **Temporary Practice Restrictions, unless otherwise approved in advance**, set forth below.

#### **SUSPENSION OF LICENSE**

**MS. TYLICKI's** license to practice as a licensed practical nurse is suspended for an indefinite period of time.

The Board may reinstate **MS. TYLICKI's** license to practice as a licensed practical nurse if **MS. TYLICKI** submits a written request for reinstatement and is determined by the Board or its designee to have complied with the Conditions for Reinstatement.

#### **CONDITIONS FOR REINSTATEMENT**

**MS. TYLICKI shall:**

1. Be determined, by the Board or its designee, to be able to practice nursing according to acceptable and prevailing standards of safe nursing care based upon an interview and review of the documentation specified in this Order.

2. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
3. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
4. **Within ninety (90) days immediately prior to requesting reinstatement**, submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MS. TYLICKI**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MS. TYLICKI's** criminal records check to the Board. The Board will not consider a request for reinstatement until **MS. TYLICKI's** completed criminal records check, including the FBI check, is received by the Board.
5. Pay a fine of five hundred dollars (\$500.00), payable: online by credit or debit card; or payable to the "Treasurer, State of Ohio," by certified check, cashier check, or money order mailed to the attention of the Compliance Unit, Ohio Board of Nursing, 17 South High Street, Suite 660, Columbus, OH 43215-3466.

### ***Monitoring***

6. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. TYLICKI's** history. **MS. TYLICKI** shall self-administer the prescribed drugs only in the manner prescribed.
7. **Prior to requesting reinstatement, MS. TYLICKI** shall submit, at **MS. TYLICKI's** expense and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Upon and after **MS. TYLICKI's** initiation of drug screening, refusal to submit such specimen, or failure to submit such specimen on the day she is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MS. TYLICKI** shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who has received a complete copy of this Order prior to prescribing for **MS. TYLICKI**.
  - a. **Prior** to initiating drug screening:
    - i. Provide a copy of this Order to all treating practitioners;

- ii. Provide to the Board a list of all treating practitioners, including addresses and telephone numbers; and
  - iii. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. TYLICKI**, *and* submit the report directly to the Board.
- b. **After** initiating drug screening, be under a **continuing duty** to:
- i. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
  - ii. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;
  - iii. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and
  - iv. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. TYLICKI** *and* submit the report directly to the Board.

### ***Reporting Requirements for Suspension Period***

- 8. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
- 9. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
- 10. Submit any and all information that the Board may request regarding **MS. TYLICKI's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
- 11. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board.
- 12. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: [monitoring@nursing.ohio.gov](mailto:monitoring@nursing.ohio.gov) or by mail to:

**Ohio Board of Nursing  
17 South High Street, Suite 660  
Columbus, OH 43215-3466**

13. Verify that the reports and documentation required by this Order are received in the Board office.
14. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.

**PROBATIONARY PERIOD**

Following reinstatement, the suspension shall be stayed and **MS. TYLICKI's** license shall be subject to Probationary Terms and Restrictions for a minimum period of three (3) years.

**PROBATIONARY TERMS AND RESTRICTIONS**

**MS. TYLICKI shall:**

1. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
2. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.

***Evaluations***

3. **Upon the request of the Board or its designee and within sixty (60) days of that request**, at **MS. TYLICKI's** expense, obtain a chemical dependency evaluation by a chemical dependency professional approved by the Board or its designee and, prior to the evaluation, provide the chemical dependency professional with a copy of this Order and the Notice of Automatic Suspension and Opportunity for Hearing. **MS. TYLICKI** shall execute releases to permit the chemical dependency professional to obtain any information deemed appropriate and necessary for the evaluation. The chemical dependency professional shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on **MS. TYLICKI's** license, and a statement as to whether **MS. TYLICKI** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
4. **If a chemical dependency evaluation is requested**, provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the chemical dependency professional described above until released. Further, the Board may utilize the

professional's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on **MS. TYLICKI's** license.

### ***Monitoring***

5. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. TYLICKI's** history. **MS. TYLICKI** shall self-administer prescribed drugs only in the manner prescribed.
6. Submit, at her expense, and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Refusal to submit such specimen, or failure to submit such specimen on the day she is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MS. TYLICKI** shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. TYLICKI's** history.

**MS. TYLICKI** shall:

- a. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
- b. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;
- c. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and
- d. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. TYLICKI** *and* submit the report directly to the Board.

### ***Employment Conditions***

7. **Upon the request of the Board or its designee, prior to working in a position where a license to practice nursing is required**, complete and submit satisfactory documentation of completion of a nurse refresher course or an extensive orientation approved in advance by the Board or its designee.
8. **Prior to accepting employment as a nurse**, each time with every employer, notify the Board, in writing. Any period during which **MS. TYLICKI** does not work in a position within the State of Ohio for which a license to practice nursing is required **shall not count** toward fulfilling the probationary period imposed by this Order.
9. Be under a continuing duty to provide a copy of this Order to any new employer **prior to accepting employment as a nurse**.
10. Have current employer(s), if working in a position where a license to practice nursing is required, submit written reports regarding job performance **on a quarterly basis beginning within thirty (30) days of the effective date of this Order or beginning within thirty (30) days of working in a position as a nurse**.
11. Have current employer(s) send documentation to the Board, along with the first employer report, of receipt of a copy of this Order, including the date this Order was received.

### ***Reporting Requirements for Probationary Period***

12. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
13. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
14. Submit any and all information that the Board may request regarding **MS. TYLICKI's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
15. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.
16. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: [monitoring@nursing.ohio.gov](mailto:monitoring@nursing.ohio.gov) or by mail to:

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Ohio Board of Nursing  
17 South High Street, Suite 660  
Columbus, OH 43215-3466**

17. Verify that the reports and documentation required by this Order are received in the Board office.
18. Inform the Board **within five (5) business days**, in writing, of any change in employment status or of any change in residential or home address or telephone number.

**LICENSE RESTRICTIONS**

**In addition to Probationary Terms and Restrictions, MS. TYLICKI's license is subject to the following License Restrictions:**

**Temporary Practice Restrictions**

**Upon reinstatement and unless otherwise approved in advance, in writing, by the Board or its designee, MS. TYLICKI** shall not practice nursing as a licensed practical nurse (1) in a patient's residence; (2) for staffing agencies or pools; (3) for an individual or group of individuals who directly engage **MS. TYLICKI** to provide nursing services for fees, compensation, or other consideration or who engage **MS. TYLICKI** as a volunteer; or (4) as an independent contractor or for *locum tenens* assignments.

**Upon reinstatement and unless otherwise approved in advance, in writing, by the Board or its designee, MS. TYLICKI** shall not function in a position or employment where the job duties or requirements involve management of nursing and nursing responsibilities. Such positions include, but are not limited to, the following: Director of Nursing, Assistant Director of Nursing, Nurse Manager, Vice President of Nursing.

**FAILURE TO COMPLY**

The stay of **MS. TYLICKI's** suspension shall be lifted and **MS. TYLICKI's** license to practice nursing as a licensed practical nurse will be automatically suspended if it appears to the Board that **MS. TYLICKI** has violated or breached any terms or conditions of this Order. Following the automatic suspension, the Board shall notify **MS. TYLICKI** via certified mail of the specific nature of the charges and automatic suspension of **MS. TYLICKI's** license. **MS. TYLICKI** may request a hearing regarding the charges.

**DURATION**

The Board may only alter the probationary period imposed by this Order if: (1) the Board determines that **MS. TYLICKI** has complied with all aspects of this Order; and (2) the Board determines that **MS. TYLICKI** is able to practice nursing according to acceptable and prevailing standards of safe nursing care without Board monitoring, based upon an interview with **MS. TYLICKI** and review of the reports as required herein.

As indicated above under Employment Conditions, any period during which **MS. TYLICKI** does not work in a position within the State of Ohio for which a license to practice nursing is required shall not count toward fulfilling the probationary period imposed by this Order.

Motion adopted by a majority vote of the Board members present with Barbara Douglas, Lisa Klenke and Sandra Ranck abstaining.

This Order shall become effective immediately and is hereby entered upon the Journal of the Board for the 25<sup>th</sup> day of January 2018.

Erdy, Brenda Dawn, R.N. 199380 (CASE #16-6827)

**Action:** It was moved by Erin Keels, seconded by Joanna Ridgeway, that upon consideration of the charges stated against **BRENDA DAWN ERDY** in the January 26, 2017 Notice of Opportunity for Hearing and evidence supporting the charges, the Board find that **MS. ERDY** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice of Opportunity for Hearing, and that **MS. ERDY's** license to practice nursing as a registered nurse be suspended for an indefinite period of time with the conditions for reinstatement set forth below.

### **SUSPENSION OF LICENSE**

**MS. ERDY's** license to practice as a registered nurse is suspended for an indefinite period of time.

The Board may reinstate **MS. ERDY's** license to practice as a registered nurse if **MS. ERDY** submits a written request for reinstatement and is determined by the Board or its designee to have complied with the Conditions for Reinstatement.

### **CONDITIONS FOR REINSTATEMENT**

**MS. ERDY shall:**

1. Be determined, by the Board or its designee, to be able to practice nursing according to acceptable and prevailing standards of safe nursing care based upon an interview and review of the documentation specified in this Order.
2. Obey all federal, state, and local laws, and all laws and rules governing

- the practice of nursing in Ohio.
3. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
  4. **Within ninety (90) days immediately prior to requesting reinstatement**, submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MS. ERDY**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MS. ERDY's** criminal records check to the Board. The Board will not consider a request for reinstatement until **MS. ERDY's** completed criminal records check, including the FBI check, is received by the Board.
  5. Submit documentation of her full compliance with the terms and conditions imposed by the Published Consent Order issued by the State of North Carolina Board of Nursing, dated September 28, 2016, and that her North Carolina license is current, valid, and unrestricted.
  6. **Upon the request of the Board or its designee, prior to working in a position where a license to practice nursing is required**, complete and submit satisfactory documentation of completion of a nurse refresher course or an extensive orientation approved in advance by the Board or its designee.

***Reporting Requirements for Suspension Period***

7. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
8. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
9. Submit any and all information that the Board may request regarding **MS. ERDY's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
10. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board.
11. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: [monitoring@nursing.ohio.gov](mailto:monitoring@nursing.ohio.gov) or by mail to:

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Columbus, OH 43215-3466**

12. Verify that the reports and documentation required by this Order are received in the Board office.
13. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.

Motion adopted by a majority vote of the Board members present with Barbara Douglas, Lisa Klenke and Sandra Ranck abstaining.

This Order shall become effective immediately and is hereby entered upon the Journal of the Board for the 25<sup>th</sup> day of January 2018.

Wettmarshausen, Sylvia Ann, R.N. 355627 (CASE #16-3521)

**Action:** It was moved by Joanna Ridgeway, seconded by Erin Keels, that upon consideration of the charges stated against **SYLVIA ANN WETTMARSHAUSEN** in the July 27, 2017 Notice of Opportunity for Hearing and evidence supporting the charges, the Board find that **MS. WETTMARSHAUSEN** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice of Opportunity for Hearing, and that **MS. WETTMARSHAUSEN's** license to practice nursing as a registered nurse be **REPRIMANDED**.

**MS. WETTMARSHAUSEN shall:**

**Within six (6) months of the effective date of this Order**, successfully complete and submit satisfactory documentation of successful completion of the following continuing education, or other comparable course(s) approved in advance by the Board or its designee: five (5) hours Professional Accountability and Legal Liability, and two (2) hours Ohio Nursing Law and Rules. Continuing education required by this Order **does not meet the continuing education requirements for license renewal**.

Motion adopted by a majority vote of the Board members present with Barbara Douglas, Lisa Klenke and Sandra Ranck abstaining.

This Order shall become effective immediately and is hereby entered upon the Journal of the Board for the 25<sup>th</sup> day of January 2018.

Torres, Suzanne Elizabeth, R.N. 315304 (CASE #16-3311)

**Action:** It was moved by Nancy Fellows, seconded by Matthew Carle, that upon consideration of the charges stated against **SUZANNE ELIZABETH TORRES** in the May 18, 2017 Notice of Opportunity for Hearing and evidence supporting the charges, the Board find that **MS. TORRES** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice of

Opportunity for Hearing, and that **MS. TORRES's** license to practice nursing as a registered nurse be suspended for an indefinite period of time with the conditions for reinstatement set forth below.

### **SUSPENSION OF LICENSE**

**MS. TORRES's** license to practice as a registered nurse is suspended for an indefinite period of time.

The Board may reinstate **MS. TORRES's** license to practice as a registered nurse if **MS. TORRES** submits a written request for reinstatement and is determined by the Board or its designee to have complied with the Conditions for Reinstatement.

### **CONDITIONS FOR REINSTATEMENT**

**MS. TORRES shall:**

1. Be determined, by the Board or its designee, to be able to practice nursing according to acceptable and prevailing standards of safe nursing care based upon an interview and review of the documentation specified in this Order.
2. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
3. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
4. **Within ninety (90) days immediately prior to requesting reinstatement**, submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MS. TORRES**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MS. TORRES's** criminal records check to the Board. The Board will not consider a request for reinstatement until **MS. TORRES's** completed criminal records check, including the FBI check, is received by the Board.
5. Submit documentation of her full compliance with the terms and conditions imposed by the Consent Agreement and Order issued by the Commonwealth of Pennsylvania State Board of Nursing dated April 20, 2016, and that her Pennsylvania nursing license is current, valid, and unrestricted.
6. **Upon the request of the Board or its designee, prior to working in a position where a license to practice nursing is required**, complete and submit satisfactory documentation of completion of a nurse refresher

course or an extensive orientation approved in advance by the Board or its designee.

***Reporting Requirements for Suspension Period***

7. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
8. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
9. Submit any and all information that the Board may request regarding **MS. TORRES's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
10. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board.
11. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: [monitoring@nursing.ohio.gov](mailto:monitoring@nursing.ohio.gov) or by mail to:

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12. Verify that the reports and documentation required by this Order are received in the Board office.
13. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.

Motion adopted by a majority vote of the Board members present with Barbara Douglas, Lisa Klenke and Sandra Ranck abstaining.

This Order shall become effective immediately and is hereby entered upon the Journal of the Board for the 25<sup>th</sup> day of January 2018.

Tuggle, Gina M., R.N. 341422 (CASE #17-2072, #16-6844)

**Action:** It was moved by Matthew Carle, seconded by Lauralee Krabill, that upon consideration of the charges stated against **GINA M. TUGGLE** in the June 21, 2017 Notice of Immediate Suspension and Opportunity for Hearing and the July 27, 2017 Notice of Opportunity for Hearing ("Notices") and evidence supporting the charges, the Board find that **MS. TUGGLE** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the

Notices, and that **MS. TUGGLE's** license to practice nursing as a registered nurse be suspended for an indefinite period of time but not less than two (2) years with the conditions for reinstatement set forth below, and following reinstatement, **MS. TUGGLE's** license to practice nursing as a registered nurse shall be subject to a stayed suspension under the probationary terms and restrictions set forth below for a minimum period of three (3) years including the **Temporary Narcotic and Temporary Practice Restrictions**, set forth below.

### SUSPENSION OF LICENSE

**MS. TUGGLE's** license to practice as a registered nurse is suspended for an indefinite period of time but not less than two (2) years.

The Board may reinstate **MS. TUGGLE's** license to practice as a registered nurse if **MS. TUGGLE** submits a written request for reinstatement and is determined by the Board or its designee to have complied with the Conditions for Reinstatement.

### CONDITIONS FOR REINSTATEMENT

**MS. TUGGLE shall:**

1. Be determined, by the Board or its designee, to be able to practice nursing according to acceptable and prevailing standards of safe nursing care based upon an interview and review of the documentation specified in this Order.
2. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
3. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
4. **Within ninety (90) days immediately prior to requesting reinstatement**, submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MS. TUGGLE**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MS. TUGGLE's** criminal records check to the Board. The Board will not consider a request for reinstatement until **MS. TUGGLE's** completed criminal records check, including the FBI check, is received by the Board.
5. Submit documentation of her full compliance with the requirements imposed by the Wood County Court of Common Pleas in Case Number 2017 CR 0021.

### ***Evaluations***

6. **Within ninety (90) days immediately prior to requesting reinstatement,** at **MS. TUGGLE's** expense, obtain a chemical dependency evaluation by a chemical dependency professional approved by the Board or its designee and, prior to the evaluation, provide the chemical dependency professional with a copy of this Order and the Notices. **MS. TUGGLE** shall execute releases to permit the chemical dependency professional to obtain any information deemed appropriate and necessary for the evaluation. The chemical dependency professional shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on **MS. TUGGLE's** license, and a statement as to whether **MS. TUGGLE** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
7. Provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the chemical dependency professional described above until released. Further, the Board may utilize the professional's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on **MS. TUGGLE's** license.

### ***Monitoring***

8. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. TUGGLE's** history. **MS. TUGGLE** shall self-administer the prescribed drugs only in the manner prescribed.
9. Abstain completely from the use of alcohol or any products containing alcohol.
10. **For a minimum, continuous period of six (6) months immediately prior to requesting reinstatement,** submit, at **MS. TUGGLE's** expense and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Upon and after **MS. TUGGLE's** initiation of drug screening, refusal to submit such specimen, or failure to submit such specimen on the day she is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MS. TUGGLE** shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who has received a complete copy of this Order prior to prescribing for **MS.**

**TUGGLE.**

- a. **Prior** to initiating drug screening:
  - i. Provide a copy of this Order to all treating practitioners;
  - ii. Provide to the Board a list of all treating practitioners, including addresses and telephone numbers; and
  - iii. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. TUGGLE**, **and** submit the report directly to the Board.
  
- b. **After** initiating drug screening, be under a **continuing duty** to:
  - i. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
  - ii. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;
  - iii. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and
  - iv. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. TUGGLE** **and** submit the report directly to the Board.

11. **For a minimum, continuous period of six (6) months immediately prior to requesting reinstatement**, attend a minimum of one (1) meeting per week of a support or peer group meeting approved in advance by the Board, or a Twelve Step program, and provide satisfactory documentation of such attendance to the Board prior to reinstatement.

***Reporting Requirements for Suspension Period***

12. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
13. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
14. Submit any and all information that the Board may request regarding **MS.**

- TUGGLE's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
15. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board.
  16. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: [monitoring@nursing.ohio.gov](mailto:monitoring@nursing.ohio.gov) or by mail to:

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17 South High Street, Suite 660  
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17. Verify that the reports and documentation required by this Order are received in the Board office.
18. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.

### **PROBATIONARY PERIOD**

Following reinstatement, the suspension shall be stayed and **MS. TUGGLE's** license shall be subject to Probationary Terms and Restrictions for a minimum period of three (3) years.

### **PROBATIONARY TERMS AND RESTRICTIONS**

**MS. TUGGLE shall:**

1. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
2. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.

***Educational Requirements***

3. Within ninety (90) days of reinstatement, successfully complete and submit satisfactory documentation of successful completion of the following continuing education, or other comparable course(s) approved in advance by the Board or its designee: five (5) hours Ohio Nursing Law and Rules. Continuing education required by this Order **does not meet the continuing education requirements for license renewal.**

### **Monitoring**

4. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. TUGGLE's** history. **MS. TUGGLE** shall self-administer prescribed drugs only in the manner prescribed.
5. Abstain completely from the use of alcohol or any products containing alcohol.
6. **If recommended by the chemical dependency evaluation or upon the request of the Board or its designee**, submit, at her expense, and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Refusal to submit such specimen, or failure to submit such specimen on the day she is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MS. TUGGLE** shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. TUGGLE's** history.

#### **MS. TUGGLE shall:**

- a. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
  - b. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;
  - c. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and
  - d. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. TUGGLE** *and* submit the report directly to the Board.
7. **If recommended by the chemical dependency evaluation or upon the request of the Board or its designee**, attend a minimum of one (1) meeting per week of a support or peer group meeting approved in advance by the Board, or a Twelve Step program, and provide satisfactory documentation of such attendance to the Board every six (6) months. **MS. TUGGLE may request release from this requirement after indefinite**

**of the probationary period.**

***Employment Conditions***

8. **Upon the request of the Board or its designee, prior to working in a position where a license to practice nursing is required**, complete and submit satisfactory documentation of completion of a nurse refresher course or an extensive orientation approved in advance by the Board or its designee.
9. **Prior to accepting employment as a nurse**, each time with every employer, notify the Board, in writing. Any period during which **MS. TUGGLE** does not work in a position within the State of Ohio for which a license to practice nursing is required **shall not count** toward fulfilling the probationary period imposed by this Order.
10. Be under a continuing duty to provide a copy of this Order to any new employer **prior to accepting employment as a nurse**.
11. Have current employer(s), if working in a position where a license to practice nursing is required, submit written reports regarding job performance **on a quarterly basis beginning within thirty (30) days of the effective date of this Order or beginning within thirty (30) days of working in a position as a nurse**.
12. Have current employer(s) send documentation to the Board, along with the first employer report, of receipt of a copy of this Order, including the date this Order was received.

***Reporting Requirements for Probationary Period***

13. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
14. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
15. Submit any and all information that the Board may request regarding **MS. TUGGLE's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
16. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.
17. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this

Order shall be sent by email to: [monitoring@nursing.ohio.gov](mailto:monitoring@nursing.ohio.gov) or by mail to:

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18. Verify that the reports and documentation required by this Order are received in the Board office.
19. Inform the Board **within five (5) business days**, in writing, of any change in employment status or of any change in residential or home address or telephone number.

### **LICENSE RESTRICTIONS**

**In addition to Probationary Terms and Restrictions, MS. TUGGLE's license is subject to the following License Restrictions:**

#### **Temporary Narcotic Restriction**

**Upon reinstatement, MS. TUGGLE** shall not administer, have access to, or possess (except as prescribed for **MS. TUGGLE's** use by another so authorized by law who has full knowledge of **MS. TUGGLE's** history) any narcotics, other controlled substances, or mood altering drugs for a minimum period of **two (2) years** in which **MS. TUGGLE** is working in a position that requires a nursing license. At any time after the minimum period of two (2) years previously described, **MS. TUGGLE** may submit a written request to the Board to have this restriction re-evaluated. In addition, **MS. TUGGLE** shall not count narcotics or possess or carry any work keys for locked medication carts, cabinets, drawers, or containers. **MS. TUGGLE** shall not call in or order prescriptions or prescription refills.

#### **Temporary Practice Restrictions**

**Upon reinstatement, MS. TUGGLE** shall not practice nursing as a registered nurse (1) in a patient's residence; (2) for staffing agencies or pools; (3) for an individual or group of individuals who directly engage **MS. TUGGLE** to provide nursing services for fees, compensation, or other consideration or who engage **MS. TUGGLE** as a volunteer; or (4) as an independent contractor or for *locum tenens* assignments.

**Upon reinstatement, MS. TUGGLE** shall not function in a position or employment where the job duties or requirements involve management of nursing and nursing responsibilities, or supervising and evaluating nursing practice. Such positions include, but are not limited to, the following: Director of

Nursing, Assistant Director of Nursing, Nurse Manager, Vice President of Nursing.

### **FAILURE TO COMPLY**

The stay of **MS. TUGGLE's** suspension shall be lifted and **MS. TUGGLE's** license to practice nursing as a registered nurse will be automatically suspended if it appears to the Board that **MS. TUGGLE** has violated or breached any terms or conditions of this Order. Following the automatic suspension, the Board shall notify **MS. TUGGLE** via certified mail of the specific nature of the charges and automatic suspension of **MS. TUGGLE's** license. **MS. TUGGLE** may request a hearing regarding the charges.

### **DURATION**

The Board may only alter the probationary period imposed by this Order if: (1) the Board determines that **MS. TUGGLE** has complied with all aspects of this Order; and (2) the Board determines that **MS. TUGGLE** is able to practice nursing according to acceptable and prevailing standards of safe nursing care without Board monitoring, based upon an interview with **MS. TUGGLE** and review of the reports as required herein.

As indicated above under Employment Conditions, any period during which **MS. TUGGLE** does not work in a position within the State of Ohio for which a license to practice nursing is required shall not count toward fulfilling the probationary period imposed by this Order.

Motion adopted by a majority vote of the Board members present with Barbara Douglas, Lisa Klenke and Sandra Ranck abstaining.

This Order shall become effective immediately and is hereby entered upon the Journal of the Board for the 25<sup>th</sup> day of January 2018.

Bowman, Tonya Louise, P.N. 120610 (CASE #17-3217)

**Action:** It was moved by Patricia Sharpnack, seconded by J. Jane McFee, that upon consideration of the charges stated against **TONYA LOUISE BOWMAN** in the July 27, 2017 Notice of Automatic Suspension and Opportunity for Hearing and evidence supporting the charges, the Board find that **MS. BOWMAN** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice of Automatic Suspension and Opportunity for Hearing, and that **MS. BOWMAN's** license to practice nursing as a licensed practical nurse be suspended for an indefinite period of time with the conditions for reinstatement set forth below, and following reinstatement, **MS. BOWMAN's** license to practice nursing as a licensed practical nurse shall be subject to a stayed suspension under the probationary terms and restrictions set forth below for a minimum period of one (1) year.

### **SUSPENSION OF LICENSE**

**MS. BOWMAN's** license to practice as a licensed practical nurse is suspended for an indefinite period of time.

The Board may reinstate **MS. BOWMAN's** license to practice as a licensed practical nurse if **MS. BOWMAN** submits a written request for reinstatement and is determined by the Board or its designee to have complied with the Conditions for Reinstatement.

### **CONDITIONS FOR REINSTATEMENT**

**MS. BOWMAN shall:**

1. Be determined, by the Board or its designee, to be able to practice nursing according to acceptable and prevailing standards of safe nursing care based upon an interview and review of the documentation specified in this Order.
2. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
3. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
4. **Within ninety (90) days immediately prior to requesting reinstatement**, submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MS. BOWMAN**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MS. BOWMAN's** criminal records check to the Board. The Board will not consider a request for reinstatement until **MS. BOWMAN's** completed criminal records check, including the FBI check, is received by the Board.
5. Pay a fine of one thousand dollars (\$1,000.00), payable: online by credit or debit card; or payable to the "Treasurer, State of Ohio," by certified check, cashier check, or money order mailed to the attention of the Compliance Unit, Ohio Board of Nursing, 17 South High Street, Suite 660, Columbus, OH 43215-3466.

### ***Educational Requirements***

6. Successfully complete and submit satisfactory documentation of successful completion of the following continuing education, or other comparable course(s) approved in advance by the Board or its designee: fifteen (15) hours Ethical Decision Making, two (2) hours Scope of Practice for RN's and LPN's, five (5) hours Professional Accountability and Legal

Liability for Nurses, five (5) hours Disciplinary Actions, and two (2) hours Ohio Nursing Law and Rules. Continuing education required by this Order **does not meet the continuing education requirements for license renewal.**

***Reporting Requirements for Suspension Period***

7. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
8. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
9. Submit any and all information that the Board may request regarding **MS. BOWMAN's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
10. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board.
11. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: [monitoring@nursing.ohio.gov](mailto:monitoring@nursing.ohio.gov) or by mail to:

**Compliance Unit  
Ohio Board of Nursing  
17 South High Street, Suite 660  
Columbus, OH 43215-3466**

12. Verify that the reports and documentation required by this Order are received in the Board office.
13. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.

**PROBATIONARY PERIOD**

Following reinstatement, the suspension shall be stayed and **MS. BOWMAN's** license shall be subject to Probationary Terms and Restrictions for a minimum period of one (1) year.

## **PROBATIONARY TERMS AND RESTRICTIONS**

### **MS. BOWMAN shall:**

1. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
2. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.

### ***Employment Conditions***

3. **Upon the request of the Board or its designee, prior to working in a position where a license to practice nursing is required**, complete and submit satisfactory documentation of completion of a nurse refresher course or an extensive orientation approved in advance by the Board or its designee.
4. **Prior to accepting employment as a nurse**, each time with every employer, notify the Board, in writing. Any period during which **MS. BOWMAN** does not work in a position within the State of Ohio for which a license to practice nursing is required **shall not count** toward fulfilling the probationary period imposed by this Order.
5. Be under a continuing duty to provide a copy of this Order to any new employer **prior to accepting employment as a nurse**.
6. Have current employer(s), if working in a position where a license to practice nursing is required, submit written reports regarding job performance **on a quarterly basis beginning within thirty (30) days of the effective date of this Order or beginning within thirty (30) days of working in a position as a nurse**.
7. Have current employer(s) send documentation to the Board, along with the first employer report, of receipt of a copy of this Order, including the date this Order was received.

### ***Reporting Requirements for Probationary Period***

8. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
9. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.

10. Submit any and all information that the Board may request regarding **MS. BOWMAN's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
11. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.
12. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: [monitoring@nursing.ohio.gov](mailto:monitoring@nursing.ohio.gov) or by mail to:

**Compliance Unit  
Ohio Board of Nursing  
17 South High Street, Suite 660  
Columbus, OH 43215-3466**

13. Verify that the reports and documentation required by this Order are received in the Board office.
14. Inform the Board **within five (5) business days**, in writing, of any change in employment status or of any change in residential or home address or telephone number.

#### **FAILURE TO COMPLY**

The stay of **MS. BOWMAN's** suspension shall be lifted and **MS. BOWMAN's** license to practice nursing as a licensed practical nurse will be automatically suspended if it appears to the Board that **MS. BOWMAN** has violated or breached any terms or conditions of this Order. Following the automatic suspension, the Board shall notify **MS. BOWMAN** via certified mail of the specific nature of the charges and automatic suspension of **MS. BOWMAN's** license. **MS. BOWMAN** may request a hearing regarding the charges.

#### **DURATION**

The Board may only alter the probationary period imposed by this Order if: (1) the Board determines that **MS. BOWMAN** has complied with all aspects of this Order; and (2) the Board determines that **MS. BOWMAN** is able to practice nursing according to acceptable and prevailing standards of safe nursing care without Board monitoring, based upon an interview with **MS. BOWMAN** and review of the reports as required herein.

As indicated above under Employment Conditions, any period during which **MS. BOWMAN** does not work in a position within the State of Ohio for which a license to practice nursing is required shall not count toward fulfilling the probationary

period imposed by this Order.

Motion adopted by a majority vote of the Board members present with Barbara Douglas, Lisa Klenke and Sandra Ranck abstaining.

This Order shall become effective immediately and is hereby entered upon the Journal of the Board for the 25<sup>th</sup> day of January 2018.

Bradley, Violet Rae, P.N. 133419 (CASE #17-1912, #17-1908)

**Action:** It was moved by J. Jane McFee, seconded by Patricia Sharpnack, that upon consideration of the charges stated against **VIOLET RAE BRADLEY** in the July 27, 2017 Notice of Automatic Suspension and Opportunity for Hearing and evidence supporting the charges, the Board find that **MS. BRADLEY** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice of Automatic Suspension and Opportunity for Hearing, and that **MS. BRADLEY's** license to practice nursing as a licensed practical nurse be suspended for an indefinite period of time with the conditions for reinstatement set forth below, and following reinstatement, **MS. BRADLEY's** license to practice nursing as a licensed practical nurse shall be subject to a stayed suspension under the probationary terms and restrictions set forth below for a minimum period of two (2) years including the **Temporary Narcotic and Temporary Practice Restrictions**, set forth below.

### SUSPENSION OF LICENSE

**MS. BRADLEY's** license to practice as a licensed practical nurse is suspended for an indefinite period of time.

The Board may reinstate **MS. BRADLEY's** license to practice as a licensed practical nurse if **MS. BRADLEY** submits a written request for reinstatement and is determined by the Board or its designee to have complied with the Conditions for Reinstatement.

### CONDITIONS FOR REINSTATEMENT

**MS. BRADLEY shall:**

1. Be determined, by the Board or its designee, to be able to practice nursing according to acceptable and prevailing standards of safe nursing care based upon an interview and review of the documentation specified in this Order.
2. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
3. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.

4. **Within ninety (90) days immediately prior to requesting reinstatement**, submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MS. BRADLEY**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MS. BRADLEY's** criminal records check to the Board. The Board will not consider a request for reinstatement until **MS. BRADLEY's** completed criminal records check, including the FBI check, is received by the Board.
5. Pay a fine of five hundred dollars (\$500.00), payable: online by credit or debit card; or payable to the "Treasurer, State of Ohio," by certified check, cashier check, or money order mailed to the attention of the Compliance Unit, Ohio Board of Nursing, 17 South High Street, Suite 660, Columbus, OH 43215-3466.

### **Evaluations**

6. **Within ninety (90) days immediately prior to requesting reinstatement**, at **MS. BRADLEY's** expense, obtain a mental health evaluation from a Board approved evaluator and provide the Board with complete documentation of such evaluation. Prior to the evaluation, **MS. BRADLEY** shall provide the mental health evaluator with a copy of this Order and the Notice of Automatic Suspension and Opportunity for Hearing. **MS. BRADLEY** shall execute releases to permit the mental health evaluator to obtain any information deemed appropriate and necessary for the evaluation. The mental health evaluator shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on **MS. BRADLEY's** license, and a statement as to whether **MS. BRADLEY** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
7. Provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the mental health evaluator described above until released. Further, the Board may utilize the mental health evaluator's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on **MS. BRADLEY's** license.
8. **Within ninety (90) days immediately prior to requesting reinstatement**, at **MS. BRADLEY's** expense, obtain a chemical dependency evaluation by a chemical dependency professional approved by the Board or its designee and, prior to the evaluation, provide the chemical dependency professional with a copy of this Order and the Notice of Automatic Suspension and Opportunity for Hearing. **MS. BRADLEY** shall execute releases to permit the chemical dependency

professional to obtain any information deemed appropriate and necessary for the evaluation. The chemical dependency professional shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on **MS. BRADLEY's** license, and a statement as to whether **MS. BRADLEY** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.

9. Provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the chemical dependency professional described above until released. Further, the Board may utilize the professional's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on **MS. BRADLEY's** license.

### ***Monitoring***

10. **Prior to requesting reinstatement**, submit, at **MS. BRADLEY's** expense and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Upon and after **MS. BRADLEY's** initiation of drug screening, refusal to submit such specimen, or failure to submit such specimen on the day she is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MS. BRADLEY** shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who has received a complete copy of this Order prior to prescribing for **MS. BRADLEY**.
  - a. ***Prior*** to initiating drug screening:
    - i. Provide a copy of this Order to all treating practitioners;
    - ii. Provide to the Board a list of all treating practitioners, including addresses and telephone numbers; and
    - iii. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. BRADLEY**, ***and*** submit the report directly to the Board.
  - b. ***After*** initiating drug screening, be under a ***continuing duty*** to:
    - i. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;

- ii. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;
- iii. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and
- iv. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. BRADLEY** and submit the report directly to the Board.

***Reporting Requirements for Suspension Period***

11. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
12. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
13. Submit any and all information that the Board may request regarding **MS. BRADLEY's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
14. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board.
15. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: [monitoring@nursing.ohio.gov](mailto:monitoring@nursing.ohio.gov) or by mail to:

**Compliance Unit  
Ohio Board of Nursing  
17 South High Street, Suite 660  
Columbus, OH 43215-3466**

16. Verify that the reports and documentation required by this Order are received in the Board office.
17. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.

## **PROBATIONARY PERIOD**

Following reinstatement, the suspension shall be stayed and **MS. BRADLEY's** license shall be subject to Probationary Terms and Restrictions for a minimum period of two (2) years.

## **PROBATIONARY TERMS AND RESTRICTIONS**

### **MS. BRADLEY shall:**

1. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
2. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.

### ***Monitoring***

3. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. BRADLEY's** history. **MS. BRADLEY** shall self-administer prescribed drugs only in the manner prescribed.
4. Abstain completely from the use of alcohol or any products containing alcohol.
5. Submit, at her expense, and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. **MS. BRADLEY may request release from this requirement after six (6) months of the probationary period.** Refusal to submit such specimen, or failure to submit such specimen on the day she is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MS. BRADLEY** shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. BRADLEY's** history.

### **MS. BRADLEY shall:**

- a. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
- b. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;

- c. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and
- d. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. BRADLEY** and submit the report directly to the Board.

### ***Employment Conditions***

6. **Upon the request of the Board or its designee, prior to working in a position where a license to practice nursing is required**, complete and submit satisfactory documentation of completion of a nurse refresher course or an extensive orientation approved in advance by the Board or its designee.
7. **Prior to accepting employment as a nurse**, each time with every employer, notify the Board, in writing. Any period during which **MS. BRADLEY** does not work in a position within the State of Ohio for which a license to practice nursing is required **shall not count** toward fulfilling the probationary period imposed by this Order.
8. Be under a continuing duty to provide a copy of this Order to any new employer **prior to accepting employment as a nurse**.
9. Have current employer(s), if working in a position where a license to practice nursing is required, submit written reports regarding job performance **on a quarterly basis beginning within thirty (30) days of the effective date of this Order or beginning within thirty (30) days of working in a position as a nurse**.
10. Have current employer(s) send documentation to the Board, along with the first employer report, of receipt of a copy of this Order, including the date this Order was received.

### ***Reporting Requirements for Probationary Period***

11. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
12. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.

13. Submit any and all information that the Board may request regarding **MS. BRADLEY's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
14. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.
15. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: [monitoring@nursing.ohio.gov](mailto:monitoring@nursing.ohio.gov) or by mail to:

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Ohio Board of Nursing  
17 South High Street, Suite 660  
Columbus, OH 43215-3466**

16. Verify that the reports and documentation required by this Order are received in the Board office.
17. Inform the Board **within five (5) business days**, in writing, of any change in employment status or of any change in residential or home address or telephone number.

### **LICENSE RESTRICTIONS**

**In addition to Probationary Terms and Restrictions, MS. BRADLEY's license is subject to the following License Restrictions:**

#### **Temporary Narcotic Restriction**

**Upon reinstatement, MS. BRADLEY** shall not administer, have access to, or possess (except as prescribed for **MS. BRADLEY's** use by another so authorized by law who has full knowledge of **MS. BRADLEY's** history) any narcotics, other controlled substances, or mood altering drugs. In addition, **MS. BRADLEY** shall not count narcotics or possess or carry any work keys for locked medication carts, cabinets, drawers, or containers. **MS. BRADLEY** shall not call in or order prescriptions or prescription refills.

#### **Temporary Practice Restrictions**

**Upon reinstatement, MS. BRADLEY** shall not practice nursing as a licensed practical nurse (1) in a patient's residence; (2) for staffing agencies or pools; (3) for an individual or group of individuals who directly engage **MS. BRADLEY** to provide nursing services for fees, compensation, or other consideration or who engage **MS. BRADLEY** as a volunteer; or (4) as an independent contractor or for

*locum tenens* assignments.

**Upon reinstatement, MS. BRADLEY** shall not function in a position or employment where the job duties or requirements involve management of nursing and nursing responsibilities. Such positions include, but are not limited to, the following: Director of Nursing, Assistant Director of Nursing, Nurse Manager, Vice President of Nursing.

### **FAILURE TO COMPLY**

The stay of **MS. BRADLEY's** suspension shall be lifted and **MS. BRADLEY's** license to practice nursing as a licensed practical nurse will be automatically suspended if it appears to the Board that **MS. BRADLEY** has violated or breached any terms or conditions of this Order. Following the automatic suspension, the Board shall notify **MS. BRADLEY** via certified mail of the specific nature of the charges and automatic suspension of **MS. BRADLEY's** license. **MS. BRADLEY** may request a hearing regarding the charges.

### **DURATION**

The Board may only alter the probationary period imposed by this Order if: (1) the Board determines that **MS. BRADLEY** has complied with all aspects of this Order; and (2) the Board determines that **MS. BRADLEY** is able to practice nursing according to acceptable and prevailing standards of safe nursing care without Board monitoring, based upon an interview with **MS. BRADLEY** and review of the reports as required herein.

As indicated above under Employment Conditions, any period during which **MS. BRADLEY** does not work in a position within the State of Ohio for which a license to practice nursing is required shall not count toward fulfilling the probationary period imposed by this Order.

Motion adopted by a majority vote of the Board members present with Barbara Douglas, Lisa Klenke and Sandra Ranck abstaining.

This Order shall become effective immediately and is hereby entered upon the Journal of the Board for the 25<sup>th</sup> day of January 2018.

Hall, Syreeta Roberta, P.N. 135425 (CASE #17-3586)

**Action:** It was moved by Lauralee Krabill, seconded by Matthew Carle, that upon consideration of the charges stated against **SYREETA ROBERTA HALL** in the July 27, 2017 Notice of Automatic Suspension and Opportunity for Hearing and evidence supporting the charges, the Board find that **MS. HALL** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice of Automatic Suspension and Opportunity for Hearing, and that **MS. HALL's** license to practice nursing as a licensed practical nurse be suspended for an indefinite period of time but not less than two (2) years with the

conditions for reinstatement set forth below, and following reinstatement, **MS. HALL's** license to practice nursing as a licensed practical nurse shall be subject to a stayed suspension under the probationary terms and restrictions set forth below for a minimum period of three (3) years including the **Temporary Narcotic and Permanent Practice Restrictions**, set forth below.

### **SUSPENSION OF LICENSE**

**MS. HALL's** license to practice as a licensed practical nurse is suspended for an indefinite period of time but not less than two (2) years.

The Board may reinstate **MS. HALL's** license to practice as a licensed practical nurse if **MS. HALL** submits a written request for reinstatement and is determined by the Board or its designee to have complied with the Conditions for Reinstatement.

### **CONDITIONS FOR REINSTATEMENT**

**MS. HALL shall:**

1. Be determined, by the Board or its designee, to be able to practice nursing according to acceptable and prevailing standards of safe nursing care based upon an interview and review of the documentation specified in this Order.
2. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
3. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
4. **Within ninety (90) days immediately prior to requesting reinstatement**, submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MS. HALL**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MS. HALL's** criminal records check to the Board. The Board will not consider a request for reinstatement until **MS. HALL's** completed criminal records check, including the FBI check, is received by the Board.
5. Submit satisfactory documentation of successful completion of the following continuing education, or other comparable course(s) approved in advance by the Board or its designee: four (4) hours Disciplinary Actions, five (5) hours Professional Accountability and Legal Liability, ten (10) hours Alcohol, Alcohol Abuse & Alcohol Dependence, and two (2) hours Ohio Nursing Law and Rules. Continuing education required by this Order **does not meet the continuing education requirements for license**

**renewal.**

### ***Evaluations***

6. **Within ninety (90) days immediately prior to requesting reinstatement,** at **MS. HALL's** expense, obtain a comprehensive physical examination by a Board approved physician for the purposes of evaluating **MS. HALL's** fitness for duty and safety to practice nursing as a licensed practical nurse. This Board approved physician shall provide the Board with complete documentation of **MS. HALL's** comprehensive physical examination and with a comprehensive assessment regarding **MS. HALL's** fitness for duty and safety to practice nursing as a licensed practical nurse. Prior to the examination, **MS. HALL** shall provide the Board approved physician with a copy of this Order and the Notice of Automatic Suspension and Opportunity for Hearing. **MS. HALL** shall execute releases to permit the Board approved physician performing the comprehensive physical examination, and assessment to obtain any information deemed appropriate and necessary for the assessment. The evaluating physician shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on **MS. HALL's** license to practice, and stating whether **MS. HALL** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
7. The Board may utilize the Board approved physician's recommendations and conclusions from the comprehensive physical examination and assessment as a basis for additional terms and restrictions on **MS. HALL's** license.
8. **Within ninety (90) days immediately prior to requesting reinstatement,** at **MS. HALL's** expense, obtain a chemical dependency evaluation by a chemical dependency professional approved by the Board or its designee and, prior to the evaluation, provide the chemical dependency professional with a copy of this Order and the Notice of Automatic Suspension and Opportunity for Hearing. **MS. HALL** shall execute releases to permit the chemical dependency professional to obtain any information deemed appropriate and necessary for the evaluation. The chemical dependency professional shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on **MS. HALL's** license, and a statement as to whether **MS. HALL** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
9. Provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the chemical dependency professional described above until released. Further, the Board may

utilize the professional's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on **MS. HALL's** license.

### **Monitoring**

10. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. HALL's** history. **MS. HALL** shall self-administer the prescribed drugs only in the manner prescribed.
11. Abstain completely from the use of alcohol or any products containing alcohol.
12. **For a minimum, continuous period of one (1) year immediately prior to requesting reinstatement**, submit, at **MS. HALL's** expense and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Upon and after **MS. HALL's** initiation of drug screening, refusal to submit such specimen, or failure to submit such specimen on the day she is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MS. HALL** shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who has received a complete copy of this Order prior to prescribing for **MS. HALL**.
  - a. **Prior** to initiating drug screening:
    - i. Provide a copy of this Order to all treating practitioners;
    - ii. Provide to the Board a list of all treating practitioners, including addresses and telephone numbers; and
    - iii. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. HALL**, **and** submit the report directly to the Board.
  - b. **After** initiating drug screening, be under a **continuing duty** to:
    - i. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
    - ii. Update the list of treating practitioners with the Board within

forty-eight (48) hours of being treated by another practitioner;

- iii. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and
- iv. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. HALL** and submit the report directly to the Board.

13. **For a minimum, continuous period of one (1) year immediately prior to requesting reinstatement**, attend a minimum of one (1) meeting per week of a support or peer group meeting approved in advance by the Board, or a Twelve Step program, and provide satisfactory documentation of such attendance to the Board prior to reinstatement.

***Reporting Requirements for Suspension Period***

- 14. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
- 15. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
- 16. Submit any and all information that the Board may request regarding **MS. HALL's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
- 17. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board.
- 18. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: [monitoring@nursing.ohio.gov](mailto:monitoring@nursing.ohio.gov) or by mail to:

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Ohio Board of Nursing  
17 South High Street, Suite 660  
Columbus, OH 43215-3466**

- 19. Verify that the reports and documentation required by this Order are received in the Board office.
- 20. Inform the Board **within five (5) business days**, in writing, of any change

in residential or home address or telephone number.

## **PROBATIONARY PERIOD**

Following reinstatement, the suspension shall be stayed and **MS. HALL's** license shall be subject to Probationary Terms and Restrictions for a minimum period of three (3) years.

## **PROBATIONARY TERMS AND RESTRICTIONS**

### **MS. HALL shall:**

1. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
2. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.

### ***Evaluations***

3. **Upon the request of the Board or its designee and within sixty (60) days of that request**, at **MS. HALL's** expense, obtain a chemical dependency evaluation by a chemical dependency professional approved by the Board or its designee and, prior to the evaluation, provide the chemical dependency professional with a copy of this Order and the Notice of Automatic Suspension and Opportunity for Hearing. **MS. HALL** shall execute releases to permit the chemical dependency professional to obtain any information deemed appropriate and necessary for the evaluation. The chemical dependency professional shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on **MS. HALL's** license, and a statement as to whether **MS. HALL** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
4. **If a chemical dependency evaluation is requested**, provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the chemical dependency professional described above until released. Further, the Board may utilize the professional's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on **MS. HALL's** license.

### **Monitoring**

5. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. HALL's** history. **MS. HALL** shall self-administer prescribed drugs only in the manner prescribed.
6. Abstain completely from the use of alcohol or any products containing alcohol.
7. Submit, at her expense, and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Refusal to submit such specimen, or failure to submit such specimen on the day she is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MS. HALL** shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. HALL's** history.

### **MS. HALL** shall:

- a. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
  - b. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;
  - c. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and
  - d. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. HALL** *and* submit the report directly to the Board.
8. Attend a minimum of one (1) meeting per week of a support or peer group meeting approved in advance by the Board, or a Twelve Step program, and provide satisfactory documentation of such attendance to the Board every six (6) months.

### ***Employment Conditions***

9. **Upon the request of the Board or its designee, prior to working in a position where a license to practice nursing is required**, complete and submit satisfactory documentation of completion of a nurse refresher course or an extensive orientation approved in advance by the Board or its designee.
10. **Prior to accepting employment as a nurse**, each time with every employer, notify the Board, in writing. Any period during which **MS. HALL** does not work in a position within the State of Ohio for which a license to practice nursing is required **shall not count** toward fulfilling the probationary period imposed by this Order.
11. Be under a continuing duty to provide a copy of this Order to any new employer **prior to accepting employment as a nurse**.
12. Have current employer(s), if working in a position where a license to practice nursing is required, submit written reports regarding job performance **on a quarterly basis beginning within thirty (30) days of the effective date of this Order or beginning within thirty (30) days of working in a position as a nurse**.
13. Have current employer(s) send documentation to the Board, along with the first employer report, of receipt of a copy of this Order, including the date this Order was received.

### ***Reporting Requirements for Probationary Period***

14. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
15. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
16. Submit any and all information that the Board may request regarding **MS. HALL's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
17. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.
18. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: [monitoring@nursing.ohio.gov](mailto:monitoring@nursing.ohio.gov) or by mail to:

**Compliance Unit  
Ohio Board of Nursing  
17 South High Street, Suite 660  
Columbus, OH 43215-3466**

19. Verify that the reports and documentation required by this Order are received in the Board office.
20. Inform the Board **within five (5) business days**, in writing, of any change in employment status or of any change in residential or home address or telephone number.

**LICENSE RESTRICTIONS**

**In addition to Probationary Terms and Restrictions, MS. HALL's license is subject to the following License Restrictions:**

**Temporary Narcotic Restriction**

**Upon reinstatement, MS. HALL** shall not administer, have access to, or possess (except as prescribed for **MS. HALL's** use by another so authorized by law who has full knowledge of **MS. HALL's** history) any narcotics, other controlled substances, or mood altering drugs. In addition, **MS. HALL** shall not count narcotics or possess or carry any work keys for locked medication carts, cabinets, drawers, or containers. **MS. HALL** shall not call in or order prescriptions or prescription refills.

**Permanent Practice Restrictions**

**Upon reinstatement, MS. HALL** shall not practice nursing as a licensed practical nurse (1) in a patient's residence; (2) for staffing agencies or pools; (3) for an individual or group of individuals who directly engage **MS. HALL** to provide nursing services for fees, compensation, or other consideration or who engage **MS. HALL** as a volunteer; or (4) as an independent contractor or for *locum tenens* assignments.

**Upon reinstatement, MS. HALL** shall not function in a position or employment where the job duties or requirements involve management of nursing and nursing responsibilities. Such positions include, but are not limited to, the following: Director of Nursing, Assistant Director of Nursing, Nurse Manager, Vice President of Nursing.

**FAILURE TO COMPLY**

The stay of **MS. HALL's** suspension shall be lifted and **MS. HALL's** license to

practice nursing as a licensed practical nurse will be automatically suspended if it appears to the Board that **MS. HALL** has violated or breached any terms or conditions of this Order. Following the automatic suspension, the Board shall notify **MS. HALL** via certified mail of the specific nature of the charges and automatic suspension of **MS. HALL's** license. **MS. HALL** may request a hearing regarding the charges.

### **DURATION**

The Board may only alter the probationary period imposed by this Order if: (1) the Board determines that **MS. HALL** has complied with all aspects of this Order; and (2) the Board determines that **MS. HALL** is able to practice nursing according to acceptable and prevailing standards of safe nursing care without Board monitoring, based upon an interview with **MS. HALL** and review of the reports as required herein.

As indicated above under Employment Conditions, any period during which **MS. HALL** does not work in a position within the State of Ohio for which a license to practice nursing is required shall not count toward fulfilling the probationary period imposed by this Order.

Motion adopted by a majority vote of the Board members present with Barbara Douglas, Lisa Klenke and Sandra Ranck abstaining.

This Order shall become effective immediately and is hereby entered upon the Journal of the Board for the 25<sup>th</sup> day of January 2018.

Henry, Steven Donald, P.N. 135283 (CASE #17-1877)

**Action:** It was moved by Erin Keels, seconded by Joanna Ridgeway, that upon consideration of the charges stated against **STEVEN DONALD HENRY** in the July 27, 2017 Notice of Automatic Suspension and Opportunity for Hearing and evidence supporting the charges, the Board find that **MR. HENRY** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice of Automatic Suspension and Opportunity for Hearing, and that **MR. HENRY's** license to practice nursing as a licensed practical nurse be suspended for an indefinite period of time with the conditions for reinstatement set forth below, and following reinstatement, **MR. HENRY's** license to practice nursing as a licensed practical nurse shall be subject to a stayed suspension under the probationary terms and restrictions set forth below for a minimum period of one (1) year including the **Temporary Practice Restrictions**, set forth below.

### **SUSPENSION OF LICENSE**

**MR. HENRY's** license to practice as a licensed practical nurse is suspended for an indefinite period of time.

The Board may reinstate **MR. HENRY's** license to practice as a licensed practical nurse if **MR. HENRY** submits a written request for reinstatement and is determined by the Board or its designee to have complied with the Conditions for Reinstatement.

### CONDITIONS FOR REINSTATEMENT

#### **MR. HENRY shall:**

1. Be determined, by the Board or its designee, to be able to practice nursing according to acceptable and prevailing standards of safe nursing care based upon an interview and review of the documentation specified in this Order.
2. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
3. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
4. **Within ninety (90) days immediately prior to requesting reinstatement**, submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MR. HENRY**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MR. HENRY's** criminal records check to the Board. The Board will not consider a request for reinstatement until **MR. HENRY's** completed criminal records check, including the FBI check, is received by the Board.
5. Pay a fine of one thousand dollars (\$1,000.00), payable: online by credit or debit card; or payable to the "Treasurer, State of Ohio," by certified check, cashier check, or money order mailed to the attention of the Compliance Unit, Ohio Board of Nursing, 17 South High Street, Suite 660, Columbus, OH 43215-3466.

#### ***Educational Requirements***

6. Successfully complete and submit satisfactory documentation of successful completion of the following continuing education, or other comparable course(s) approved in advance by the Board or its designee: ten (10) hours Anger Management, and two (2) hours Ohio Nursing Law and Rules. Continuing education required by this Order **does not meet the continuing education requirements for license renewal.**

#### ***Reporting Requirements for Suspension Period***

7. Report to the Board, in writing, any violation of this Order within thirty (30)

days of the occurrence of the violation.

8. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
9. Submit any and all information that the Board may request regarding **MR. HENRY's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
10. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board.
11. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: [monitoring@nursing.ohio.gov](mailto:monitoring@nursing.ohio.gov) or by mail to:

**Compliance Unit  
Ohio Board of Nursing  
17 South High Street, Suite 660  
Columbus, OH 43215-3466**

12. Verify that the reports and documentation required by this Order are received in the Board office.
13. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.

### **PROBATIONARY PERIOD**

Following reinstatement, the suspension shall be stayed and **MR. HENRY's** license shall be subject to Probationary Terms and Restrictions for a minimum period of one (1) year.

### **PROBATIONARY TERMS AND RESTRICTIONS**

**MR. HENRY shall:**

1. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
2. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.

### ***Employment Conditions***

3. **Upon the request of the Board or its designee, prior to working in a position where a license to practice nursing is required**, complete and submit satisfactory documentation of completion of a nurse refresher course or an extensive orientation approved in advance by the Board or its designee.
4. **Prior to accepting employment as a nurse**, each time with every employer, notify the Board, in writing. Any period during which **MR. HENRY** does not work in a position within the State of Ohio for which a license to practice nursing is required **shall not count** toward fulfilling the probationary period imposed by this Order.
5. Be under a continuing duty to provide a copy of this Order to any new employer **prior to accepting employment as a nurse**.
6. Have current employer(s), if working in a position where a license to practice nursing is required, submit written reports regarding job performance **on a quarterly basis beginning within thirty (30) days of the effective date of this Order or beginning within thirty (30) days of working in a position as a nurse**.
7. Have current employer(s) send documentation to the Board, along with the first employer report, of receipt of a copy of this Order, including the date this Order was received.

### ***Reporting Requirements for Probationary Period***

8. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
9. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
10. Submit any and all information that the Board may request regarding **MR. HENRY's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
11. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.
12. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: [monitoring@nursing.ohio.gov](mailto:monitoring@nursing.ohio.gov) or by mail to:

**Compliance Unit  
Ohio Board of Nursing  
17 South High Street, Suite 660  
Columbus, OH 43215-3466**

13. Verify that the reports and documentation required by this Order are received in the Board office.
14. Inform the Board **within five (5) business days**, in writing, of any change in employment status or of any change in residential or home address or telephone number.

**LICENSE RESTRICTIONS**

**In addition to Probationary Terms and Restrictions, MR. HENRY's license is subject to the following License Restrictions:**

**Temporary Practice Restrictions**

**Upon reinstatement, unless otherwise approved in advance, in writing, by the Board or its designee, MR. HENRY** shall not practice nursing as a licensed practical nurse (1) in a patient's residence; (2) for staffing agencies or pools; (3) for an individual or group of individuals who directly engage **MR. HENRY** to provide nursing services for fees, compensation, or other consideration or who engage **MR. HENRY** as a volunteer; or (4) as an independent contractor or for *locum tenens* assignments.

**Upon reinstatement, unless otherwise approved in advance, in writing, by the Board or its designee, MR. HENRY** shall not function in a position or employment where the job duties or requirements involve management of nursing and nursing responsibilities. Such positions include, but are not limited to, the following: Director of Nursing, Assistant Director of Nursing, Nurse Manager, Vice President of Nursing.

**FAILURE TO COMPLY**

The stay of **MR. HENRY's** suspension shall be lifted and **MR. HENRY's** license to practice nursing as a licensed practical nurse will be automatically suspended if it appears to the Board that **MR. HENRY** has violated or breached any terms or conditions of this Order. Following the automatic suspension, the Board shall notify **MR. HENRY** via certified mail of the specific nature of the charges and automatic suspension of **MR. HENRY's** license. **MR. HENRY** may request a hearing regarding the charges.

### **DURATION**

The Board may only alter the probationary period imposed by this Order if: (1) the Board determines that **MR. HENRY** has complied with all aspects of this Order; and (2) the Board determines that **MR. HENRY** is able to practice nursing according to acceptable and prevailing standards of safe nursing care without Board monitoring, based upon an interview with **MR. HENRY** and review of the reports as required herein.

As indicated above under Employment Conditions, any period during which **MR. HENRY** does not work in a position within the State of Ohio for which a license to practice nursing is required shall not count toward fulfilling the probationary period imposed by this Order.

Motion adopted by a majority vote of the Board members present with Barbara Douglas, Lisa Klenke and Sandra Ranck abstaining.

This Order shall become effective immediately and is hereby entered upon the Journal of the Board for the 25<sup>th</sup> day of January 2018.

Johnson, Dennis Lee, P.N. 081126 (CASE #17-4028)

**Action:** It was moved by Joanna Ridgeway, seconded by Erin Keels, that upon consideration of the charges stated against **DENNIS LEE JOHNSON** in the July 27, 2017 Notice of Automatic Suspension and Opportunity for Hearing and evidence supporting the charges, the Board find that **MR. JOHNSON** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice of Automatic Suspension and Opportunity for Hearing, and that **MR. JOHNSON's** license to practice nursing as a licensed practical nurse be suspended for an indefinite period of time with the conditions for reinstatement set forth below, and following reinstatement, **MR. JOHNSON's** license to practice nursing as a licensed practical nurse shall be subject to a stayed suspension under the probationary terms and restrictions set forth below for a minimum period of one (1) year.

### **SUSPENSION OF LICENSE**

**MR. JOHNSON's** license to practice as a licensed practical nurse is suspended for an indefinite period of time.

The Board may reinstate **MR. JOHNSON's** license to practice as a licensed practical nurse if **MR. JOHNSON** submits a written request for reinstatement and is determined by the Board or its designee to have complied with the Conditions for Reinstatement.

### **CONDITIONS FOR REINSTATEMENT**

**MR. JOHNSON shall:**

1. Be determined, by the Board or its designee, to be able to practice nursing according to acceptable and prevailing standards of safe nursing care based upon an interview and review of the documentation specified in this Order.
2. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
3. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
4. **Within ninety (90) days immediately prior to requesting reinstatement**, submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MR. JOHNSON**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MR. JOHNSON's** criminal records check to the Board. The Board will not consider a request for reinstatement until **MR. JOHNSON's** completed criminal records check, including the FBI check, is received by the Board.
5. Pay a fine of one thousand dollars (\$1,000.00), payable: online by credit or debit card; or payable to the "Treasurer, State of Ohio," by certified check, cashier check, or money order mailed to the attention of the Compliance Unit, Ohio Board of Nursing, 17 South High Street, Suite 660, Columbus, OH 43215-3466.

### ***Educational Requirements***

6. Successfully complete and submit satisfactory documentation of successful completion of the following continuing education, or other comparable course(s) approved in advance by the Board or its designee: fifteen (15) hours Medication Administration, three (3) hours Stress Management, and two (2) hours Ohio Nursing Law and Rules. Continuing education required by this Order **does not meet the continuing education requirements for license renewal**.
7. Establish contact with a nursing educator, approved in advance by the Board or its designee, who has no less than a master's degree and who is affiliated with a nursing educational program.
  - a. Have the educator provide the Board with a written report of an assessment of **MR. JOHNSON**, which identifies **MR. JOHNSON's** knowledge/practice deficiencies and remedial educational needs.
  - b. Prior to the assessment, provide the nursing educator with a copy of this Order and the Notice of Automatic Suspension and

Opportunity for Hearing and submit to any nursing skills or knowledge assessments required by the educator. **MR. JOHNSON** shall also execute releases prior to the assessment to permit the educator to obtain any information deemed appropriate and necessary for the assessment including information from **MR. JOHNSON's** employer(s), former employers, and Board staff.

- c. Following the assessment, have the educator provide the Board with a copy of a learning plan developed by the educator for **MR. JOHNSON** and obtain approval of the learning plan by the Board or its designee. The learning plan shall identify specific remediation that **MR. JOHNSON** shall complete to address any knowledge/practice deficiencies and remedial educational needs identified by the educator and shall identify the time frame during which **MR. JOHNSON** shall complete such learning plan.
- d. Successfully complete and submit satisfactory documentation of successful completion of the learning plan within the time frame specified in the learning plan.
- e. Be responsible for all costs associated with meeting the requirements of the learning plan.
- f. **After MR. JOHNSON has successfully completed the learning plan**, have the educator provide the Board with:
  - i. An assessment and any recommendations for additional remedial education and/or restrictions that should be placed on **MR. JOHNSON's** license; and
  - ii. A written opinion stating whether **MR. JOHNSON** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
- g. The Board may utilize the educator's recommendations and conclusions from the assessment as a basis for additional terms and restrictions on **MR. JOHNSON's** license.
- h. If **MR. JOHNSON** has met all other conditions for reinstatement, in the event that the educator's recommendations include a clinical component, this requirement will be completed following reinstatement of **MR. JOHNSON's** nursing license and prior to **MR. JOHNSON** practicing as a nurse.

***Reporting Requirements for Suspension Period***

8. Report to the Board, in writing, any violation of this Order within thirty (30)

days of the occurrence of the violation.

9. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
10. Submit any and all information that the Board may request regarding **MR. JOHNSON's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
11. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board.
12. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: [monitoring@nursing.ohio.gov](mailto:monitoring@nursing.ohio.gov) or by mail to:

**Compliance Unit  
Ohio Board of Nursing  
17 South High Street, Suite 660  
Columbus, OH 43215-3466**

13. Verify that the reports and documentation required by this Order are received in the Board office.
14. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.

### **PROBATIONARY PERIOD**

Following reinstatement, the suspension shall be stayed and **MR. JOHNSON's** license shall be subject to Probationary Terms and Restrictions for a minimum period of one (1) year.

### **PROBATIONARY TERMS AND RESTRICTIONS**

**MR. JOHNSON shall:**

1. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
2. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.

***Employment Conditions***

3. **Upon the request of the Board or its designee, prior to working in a position where a license to practice nursing is required**, complete and submit satisfactory documentation of completion of a nurse refresher course or an extensive orientation approved in advance by the Board or its designee.
4. **Prior to accepting employment as a nurse**, each time with every employer, notify the Board, in writing. Any period during which **MR. JOHNSON** does not work in a position within the State of Ohio for which a license to practice nursing is required **shall not count** toward fulfilling the probationary period imposed by this Order.
5. Be under a continuing duty to provide a copy of this Order to any new employer **prior to accepting employment as a nurse**.
6. Have current employer(s), if working in a position where a license to practice nursing is required, submit written reports regarding job performance **on a quarterly basis beginning within thirty (30) days of the effective date of this Order or beginning within thirty (30) days of working in a position as a nurse**.
7. Have current employer(s) send documentation to the Board, along with the first employer report, of receipt of a copy of this Order, including the date this Order was received.

#### ***Reporting Requirements for Probationary Period***

8. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
9. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
10. Submit any and all information that the Board may request regarding **MR. JOHNSON's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
11. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.
12. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: [monitoring@nursing.ohio.gov](mailto:monitoring@nursing.ohio.gov) or by mail to:

**Ohio Board of Nursing  
17 South High Street, Suite 660  
Columbus, OH 43215-3466**

13. Verify that the reports and documentation required by this Order are received in the Board office.
14. Inform the Board **within five (5) business days**, in writing, of any change in employment status or of any change in residential or home address or telephone number.

**FAILURE TO COMPLY**

The stay of **MR. JOHNSON's** suspension shall be lifted and **MR. JOHNSON's** license to practice nursing as a licensed practical nurse will be automatically suspended if it appears to the Board that **MR. JOHNSON** has violated or breached any terms or conditions of this Order. Following the automatic suspension, the Board shall notify **MR. JOHNSON** via certified mail of the specific nature of the charges and automatic suspension of **MR. JOHNSON's** license. **MR. JOHNSON** may request a hearing regarding the charges.

**DURATION**

The Board may only alter the probationary period imposed by this Order if: (1) the Board determines that **MR. JOHNSON** has complied with all aspects of this Order; and (2) the Board determines that **MR. JOHNSON** is able to practice nursing according to acceptable and prevailing standards of safe nursing care without Board monitoring, based upon an interview with **MR. JOHNSON** and review of the reports as required herein.

As indicated above under Employment Conditions, any period during which **MR. JOHNSON** does not work in a position within the State of Ohio for which a license to practice nursing is required shall not count toward fulfilling the probationary period imposed by this Order.

Motion adopted by a majority vote of the Board members present with Barbara Douglas, Lisa Klenke and Sandra Ranck abstaining.

This Order shall become effective immediately and is hereby entered upon the Journal of the Board for the 25<sup>th</sup> day of January 2018.

Rill, Candice-Anne A., R.N. 369809 (CASE #17-0927)

**Action:** It was moved by Nancy Fellows, seconded by Matthew Carle, that upon consideration of the charges stated against **CANDICE-ANNE A. RILL** in the March 9, 2017 Notice of Immediate Suspension and Opportunity for Hearing and evidence supporting the charges, the Board find that **MS. RILL** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as

stated in the Notice of Immediate Suspension and Opportunity for Hearing, and that **MS. RILL's** license to practice nursing as a registered nurse be suspended for an indefinite period of time but not less than two (2) years with the conditions for reinstatement set forth below, and following reinstatement, **MS. RILL's** license to practice nursing as a registered nurse shall be subject to a stayed suspension under the probationary terms and restrictions set forth below for a minimum period of two (2) years including the **Temporary Narcotic and Temporary Practice Restrictions**, set forth below.

### **SUSPENSION OF LICENSE**

**MS. RILL's** license to practice as a registered nurse is suspended for an indefinite period of time but not less than two (2) years.

The Board may reinstate **MS. RILL's** license to practice as a registered nurse if **MS. RILL** submits a written request for reinstatement and is determined by the Board or its designee to have complied with the Conditions for Reinstatement.

### **CONDITIONS FOR REINSTATEMENT**

**MS. RILL shall:**

1. Be determined, by the Board or its designee, to be able to practice nursing according to acceptable and prevailing standards of safe nursing care based upon an interview and review of the documentation specified in this Order.
2. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
3. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
4. **Within ninety (90) days immediately prior to requesting reinstatement**, submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MS. RILL**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MS. RILL's** criminal records check to the Board. The Board will not consider a request for reinstatement until **MS. RILL's** completed criminal records check, including the FBI check, is received by the Board.

### ***Evaluations***

5. **Within ninety (90) days immediately prior to requesting reinstatement**, at **MS. RILL's** expense, obtain a mental health evaluation from a Board approved evaluator and provide the Board with complete

- documentation of such evaluation. Prior to the evaluation, **MS. RILL** shall provide the mental health evaluator with a copy of this Order and the Notice of Immediate Suspension and Opportunity for Hearing. **MS. RILL** shall execute releases to permit the mental health evaluator to obtain any information deemed appropriate and necessary for the evaluation. The mental health evaluator shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on **MS. RILL's** license, and a statement as to whether **MS. RILL** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
6. Provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the mental health evaluator described above until released. Further, the Board may utilize the mental health evaluator's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on **MS. RILL's** license.
  7. **Within ninety (90) days immediately prior to requesting reinstatement**, at **MS. RILL's** expense, obtain a chemical dependency evaluation by a chemical dependency professional approved by the Board or its designee and, prior to the evaluation, provide the chemical dependency professional with a copy of this Order and the Notice of Immediate Suspension and Opportunity for Hearing. **MS. RILL** shall execute releases to permit the chemical dependency professional to obtain any information deemed appropriate and necessary for the evaluation. The chemical dependency professional shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on **MS. RILL's** license, and a statement as to whether **MS. RILL** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
  8. Provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the chemical dependency professional described above until released. Further, the Board may utilize the professional's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on **MS. RILL's** license.

### ***Monitoring***

9. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. RILL's** history. **MS. RILL** shall self-administer the prescribed drugs only in the manner prescribed.

10. Abstain completely from the use of alcohol or any products containing alcohol.

11. **For a minimum, continuous period of one (1) year immediately prior to requesting reinstatement**, submit, at **MS. RILL's** expense and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Upon and after **MS. RILL's** initiation of drug screening, refusal to submit such specimen, or failure to submit such specimen on the day she is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MS. RILL** shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who has received a complete copy of this Order prior to prescribing for **MS. RILL**.

a. **Prior** to initiating drug screening:

- i. Provide a copy of this Order to all treating practitioners;
- ii. Provide to the Board a list of all treating practitioners, including addresses and telephone numbers; and
- iii. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. RILL**, **and** submit the report directly to the Board.

b. **After** initiating drug screening, be under a **continuing duty** to:

- i. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
- ii. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;
- iii. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and
- iv. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. RILL** **and** submit the report directly to the Board.

***Reporting Requirements for Suspension Period***

12. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
13. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
14. Submit any and all information that the Board may request regarding **MS. RILL's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
15. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board.
16. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: [monitoring@nursing.ohio.gov](mailto:monitoring@nursing.ohio.gov) or by mail to:

**Compliance Unit  
Ohio Board of Nursing  
17 South High Street, Suite 660  
Columbus, OH 43215-3466**

17. Verify that the reports and documentation required by this Order are received in the Board office.
18. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.

**PROBATIONARY PERIOD**

Following reinstatement, the suspension shall be stayed and **MS. RILL's** license shall be subject to Probationary Terms and Restrictions for a minimum period of two (2) years.

**PROBATIONARY TERMS AND RESTRICTIONS**

**MS. RILL shall:**

1. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
2. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.

### ***Monitoring***

3. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. RILL's** history. **MS. RILL** shall self-administer prescribed drugs only in the manner prescribed.
4. Abstain completely from the use of alcohol or any products containing alcohol.
5. Submit, at her expense, and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. **MS. RILL may request release from this requirement after one (1) year of the probationary period.** Refusal to submit such specimen, or failure to submit such specimen on the day she is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MS. RILL** shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. RILL's** history.

#### **MS. RILL shall:**

- a. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
- b. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;
- c. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and
- d. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. RILL** *and* submit the report directly to the Board.

### ***Employment Conditions***

6. **Upon the request of the Board or its designee, prior to working in a position where a license to practice nursing is required,** complete and submit satisfactory documentation of completion of a nurse refresher

course or an extensive orientation approved in advance by the Board or its designee.

7. **Prior to accepting employment as a nurse**, each time with every employer, notify the Board, in writing. Any period during which **MS. RILL** does not work in a position within the State of Ohio for which a license to practice nursing is required **shall not count** toward fulfilling the probationary period imposed by this Order.
8. Be under a continuing duty to provide a copy of this Order to any new employer **prior to accepting employment as a nurse**.
9. Have current employer(s), if working in a position where a license to practice nursing is required, submit written reports regarding job performance **on a quarterly basis beginning within thirty (30) days of the effective date of this Order or beginning within thirty (30) days of working in a position as a nurse**.
10. Have current employer(s) send documentation to the Board, along with the first employer report, of receipt of a copy of this Order, including the date this Order was received.

#### ***Reporting Requirements for Probationary Period***

11. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
12. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
13. Submit any and all information that the Board may request regarding **MS. RILL's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
14. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.
15. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: [monitoring@nursing.ohio.gov](mailto:monitoring@nursing.ohio.gov) or by mail to:

**Compliance Unit  
Ohio Board of Nursing  
17 South High Street, Suite 660  
Columbus, OH 43215-3466**

16. Verify that the reports and documentation required by this Order are received in the Board office.
17. Inform the Board **within five (5) business days**, in writing, of any change in employment status or of any change in residential or home address or telephone number.

## **LICENSE RESTRICTIONS**

**In addition to Probationary Terms and Restrictions, MS. RILL's license is subject to the following License Restrictions:**

### **Temporary Narcotic Restriction**

**Upon reinstatement, MS. RILL** shall not administer, have access to, or possess (except as prescribed for **MS. RILL's** use by another so authorized by law who has full knowledge of **MS. RILL's** history) any narcotics, other controlled substances, or mood altering drugs. In addition, **MS. RILL** shall not count narcotics or possess or carry any work keys for locked medication carts, cabinets, drawers, or containers. **MS. RILL** shall not call in or order prescriptions or prescription refills.

### **Temporary Practice Restrictions**

**Upon reinstatement, MS. RILL** shall not practice nursing as a registered nurse (1) in a patient's residence; (2) for staffing agencies or pools; (3) for an individual or group of individuals who directly engage **MS. RILL** to provide nursing services for fees, compensation, or other consideration or who engage **MS. RILL** as a volunteer; or (4) as an independent contractor or for *locum tenens* assignments.

**Upon reinstatement, MS. RILL** shall not function in a position or employment where the job duties or requirements involve management of nursing and nursing responsibilities, or supervising and evaluating nursing practice. Such positions include, but are not limited to, the following: Director of Nursing, Assistant Director of Nursing, Nurse Manager, Vice President of Nursing.

## **FAILURE TO COMPLY**

The stay of **MS. RILL's** suspension shall be lifted and **MS. RILL's** license to practice nursing as a registered nurse will be automatically suspended if it appears to the Board that **MS. RILL** has violated or breached any terms or conditions of this Order. Following the automatic suspension, the Board shall notify **MS. RILL** via certified mail of the specific nature of the charges and automatic suspension of **MS. RILL's** license. **MS. RILL** may request a hearing regarding the charges.

## **DURATION**

The Board may only alter the probationary period imposed by this Order if: (1) the Board determines that **MS. RILL** has complied with all aspects of this Order; and (2) the Board determines that **MS. RILL** is able to practice nursing according to acceptable and prevailing standards of safe nursing care without Board monitoring, based upon an interview with **MS. RILL** and review of the reports as required herein.

As indicated above under Employment Conditions, any period during which **MS. RILL** does not work in a position within the State of Ohio for which a license to practice nursing is required shall not count toward fulfilling the probationary period imposed by this Order.

Motion adopted by a majority vote of the Board members present with Barbara Douglas, Lisa Klenke and Sandra Ranck abstaining.

This Order shall become effective immediately and is hereby entered upon the Journal of the Board for the 25<sup>th</sup> day of January 2018.

## **MISCELLANEOUS COMPLIANCE MOTIONS**

Miller, Amanda Geneva, P.N. 110819 (CASE #15-4375)

**Action:** It was moved by Barbara Douglas, seconded by Nancy Fellows, that the Board dismiss the July 27, 2017 Notice of Opportunity for Hearing that was issued to **MS. MILLER** in CASE #2015-4375, as **MS. MILLER** is deceased.

Motion adopted by a majority vote of the Board members present with Sandra Ranck abstaining.

Dunn, John Michael, P.N. 124814 (CASE #15-8402)

**Action:** It was moved by Barbara Douglas, seconded by Lisa Klenke, that the Board rescind its ratification of the March 9, 2017 Consent Agreement in Case No. 2015-8402, as the Board has been advised that the ratified version of the agreement was not the version agreed upon by **MR. DUNN**.

Motion adopted by a majority vote of the Board members present with Sandra Ranck abstaining.

## **DEFAULT ORDERS**

Thom, Kathryn Ann, P.N. 102485 (CASE #17-3653)

**Action:** It was moved by Patricia Sharpnack, seconded by J. Jane McFee, that upon consideration of the allegations contained in the July 27, 2017 examination order and the findings contained in the November 2017 Default Order, the Board find that **MS. THOM** has committed acts in violation of the Nurse Practice Act, as set forth in the November 2017 Default Order. It was further moved that **MS. THOM's** license to practice nursing as a licensed practical nurse in the State of

Ohio be suspended, as of November 16, 2017, with conditions for reinstatement set forth in the November 2017 Default Order.

Motion adopted by a majority vote of the Board members present with Sandra Ranck abstaining.

This Order shall become effective immediately and is hereby entered upon the Journal of the Board for the 25<sup>th</sup> day of January 2018.

Sellman, Lee Ann, R.N. 326267 (CASE #16-3081)

**Action:** It was moved by J. Jane McFee, seconded by Patricia Sharpnack, that upon consideration of the allegations contained in the January 13, 2017 examination order and the findings contained in the November 2017 Default Order, the Board find that **MS. SELLMAN** has committed acts in violation of the Nurse Practice Act, as set forth in the November 2017 Default Order. It was further moved that **MS. SELLMAN's** license to practice nursing as a registered nurse in the State of Ohio be suspended, as of November 16, 2017, with conditions for reinstatement set forth in the November 2017 Default Order.

Motion adopted by a majority vote of the Board members present with Sandra Ranck abstaining.

This Order shall become effective immediately and is hereby entered upon the Journal of the Board for the 25<sup>th</sup> day of January 2018.

Scroggs, Zachary Ture, P.N. 129831 (CASE #14-2666)

**Action:** It was moved by Lauralee Krabill, seconded by Matthew Carle, that the Board find that **MR. SCROGGS** has failed to submit to an examination when directed, that the failure was not due to circumstances beyond his control, and in accordance with Section 4723.28(G) ORC, **MR. SCROGGS** has admitted the truth of the allegations set forth in the September 12, 2017 Examination Order issued to **MR. SCROGGS** and that **MR. SCROGGS** has an impairment affecting his ability to provide safe nursing care. It was further moved that **MR. SCROGGS's** license to practice nursing as a licensed practical nurse in the State of Ohio be suspended for an indefinite period of time with conditions for reinstatement set forth below:

#### **CONDITIONS FOR REINSTATEMENT**

1. **MR. SCROGGS** shall obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
2. **MR. SCROGGS** shall appear in person for interviews before the full Board or its designated representative as requested by the Board and prior to reinstatement.

3. **MR. SCROGGS** shall, at his own expense, submit to a chemical dependency evaluation specifically addressing his ability to safely function in a clinical nursing capacity, by Summa Physicians, 444 N. Main Street, 6<sup>th</sup> Floor, Akron, Ohio 44310, or another examiner approved in advance, in writing, by the Board or its designee (hereinafter "Examiner"). Prior to the evaluation, **MR. SCROGGS** shall notify the Board Monitoring Agent of the appointment date, so that the Monitoring Agent can send the necessary records to the Examiner. **MR. SCROGGS** shall execute releases to permit the Examiner to obtain any information deemed appropriate and necessary for the evaluation. The Examiner shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, and any restrictions that should be placed on **MR. SCROGGS's** practice. The Examiner shall provide an opinion to the Board regarding whether **MR. SCROGGS** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
4. **MR. SCROGGS** shall enter into a Consent Agreement with the Board for probationary terms, conditions, limitations, and restrictions determined by the Board for a minimum period of time determined by the Board. The probationary terms, conditions, limitations, and restrictions determined by the Board shall include, but not be limited to, completion or continuation of mental health and/or chemical dependency treatment, or other treatment recommended, and/or restrictions specified by the Examiner, as set forth in paragraph 3., above. If the Board and **MR. SCROGGS** are unable to agree to terms, conditions, limitations, and restrictions in a Consent Agreement, the terms, conditions, limitations, and restrictions shall be determined after a hearing is held.

#### **Reporting Requirements of Licensee**

5. **MR. SCROGGS** shall sign release of information forms allowing health professionals and other organizations to submit requested documentation or information directly to the Board.
6. **MR. SCROGGS** shall submit any and all information that the Board may request regarding his ability to practice according to acceptable and prevailing standards of safe nursing practice.
7. **MR. SCROGGS** shall not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.
8. **MR. SCROGGS** shall submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be made to the Monitoring Unit of the Board.

9. **MR. SCROGGS** shall submit the reports and documentation required by this Order to the attention of the Compliance Unit, Ohio Board of Nursing, 17 South High Street, Suite 660, Columbus, OH 43215-3466.
10. **MR. SCROGGS** shall verify that the reports and documentation required by this Order are received in the Board office.
11. **MR. SCROGGS** shall inform the Board within three (3) business days, in writing, of any change in address and/or telephone number.

Motion adopted by a majority vote of the Board members present with Sandra Ranck abstaining.

This Order shall become effective immediately and is hereby entered upon the Journal of the Board for the 25<sup>th</sup> day of January 2018.

Tait, Linda Ellen, R.N. 421907 (CASE #16-3363)

**Action:** It was moved by Erin Keels, seconded by Joanna Ridgeway, that the Board find that **MS. TAIT** has failed to submit to an examination when directed, that the failure was not due to circumstances beyond her control, and that in accordance with Section 4723.28(G) ORC, **MS. TAIT** has admitted the truth of the allegations set forth in the July 10, 2017 Examination Order issued to **MS. TAIT** and that **MS. TAIT** has an impairment affecting her ability to provide safe nursing care. It was further moved that **MS. TAIT's** license to practice nursing as a registered nurse in the State of Ohio be suspended for an indefinite period of time with conditions for reinstatement set forth below:

#### **CONDITIONS FOR REINSTATEMENT**

1. **MS. TAIT** shall obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
2. **MS. TAIT** shall appear in person for interviews before the full Board or its designated representative as requested by the Board and prior to reinstatement.
3. **MS. TAIT** shall, at her own expense, submit to a chemical dependency evaluation specifically addressing her ability to safely function in a clinical nursing capacity, by Dr. Michael A. Gureasko, located at the Christ Hospital Medical Office Building, 2123 Auburn Ave., Suite 310, Cincinnati, Ohio 45219, or another examiner approved in advance, in writing, by the Board or its designee (hereinafter "Examiner"). Prior to the evaluation, **MS. TAIT** shall notify the Board Monitoring Agent of the appointment date, so that the Monitoring Agent can send the necessary records to the Examiner. **MS. TAIT** shall execute releases to permit the Examiner to obtain any information deemed appropriate and necessary for the evaluation. The Examiner shall submit a written opinion to the Board that

includes diagnoses, recommendations for treatment and monitoring, and any restrictions that should be placed on **MS. TAIT's** practice. The Examiner shall provide an opinion to the Board regarding whether **MS. TAIT** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.

4. **MS. TAIT** shall enter into a Consent Agreement with the Board for probationary terms, conditions, limitations, and restrictions determined by the Board for a minimum period of time determined by the Board. The probationary terms, conditions, limitations, and restrictions determined by the Board shall include, but not be limited to, completion or continuation of mental health and/or chemical dependency treatment, or other treatment recommended, and/or restrictions specified by the Examiner, as set forth in paragraph 3., above. If the Board and **MS. TAIT** are unable to agree to terms, conditions, limitations, and restrictions in a Consent Agreement, the terms, conditions, limitations, and restrictions shall be determined after a hearing is held.

#### **Reporting Requirements of Licensee**

5. **MS. TAIT** shall sign release of information forms allowing health professionals and other organizations to submit requested documentation or information directly to the Board.
6. **MS. TAIT** shall submit any and all information that the Board may request regarding her ability to practice according to acceptable and prevailing standards of safe nursing practice.
7. **MS. TAIT** shall not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.
8. **MS. TAIT** shall submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be made to the Monitoring Unit of the Board.
9. **MS. TAIT** shall submit the reports and documentation required by this Order to the attention of the Compliance Unit, Ohio Board of Nursing, 17 South High Street, Suite 660, Columbus, OH 43215-3466.
10. **MS. TAIT** shall verify that the reports and documentation required by this Order are received in the Board office.
11. **MS. TAIT** shall inform the Board within three (3) business days, in writing, of any change in address and/or telephone number.

Motion adopted by a majority vote of the Board members present with Sandra Ranck abstaining.

This Order shall become effective immediately and is hereby entered upon the Journal of the Board for the 25<sup>th</sup> day of January 2018.

Williams, Jaleesa Michelle, P.N. Applicant (CASE #17-2715)

**Action:** It was moved by Joanna Ridgeway, seconded by Barbara Douglas, that the Board find that **MS. WILLIAMS** has failed to submit to an examination when directed, that the failure was not due to circumstances beyond her control and in accordance Section 4723.28(G) ORC, **MS. WILLIAMS** has admitted the truth of the allegations set forth in the June 20, 2017 Examination Order issued to **MS. WILLIAMS** and that **MS. WILLIAMS** has an impairment affecting her ability to provide safe nursing care. It was further moved that **MS. WILLIAMS's** Application for Licensure by Endorsement to practice nursing as a licensed practical nurse be denied, with conditions for reapplication for initial licensure set forth below:

#### **CONDITIONS FOR REAPPLICATION FOR LICENSURE**

1. **MS. WILLIAMS** shall obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
2. **MS. WILLIAMS** shall appear in person for interviews before the full Board or its designated representative as requested by the Board and prior to reapplication.
3. **MS. WILLIAMS** shall, at her own expense, submit to a psychiatric examination, specifically addressing her capacity to function in a clinical nursing capacity, by Comprehensive Psychiatric Services, Inc., located at 24400 Highpoint Road, Suite 6, Beachwood, Ohio 44122, or another examiner approved in advance, in writing, by the Board or its designee (hereinafter "Examiner"). Prior to the evaluation, **MS. WILLIAMS** shall notify the Board Monitoring Agent of the appointment date, so that the Monitoring Agent can send necessary records to the Examiner. **MS. WILLIAMS** shall execute releases to permit the Examiner to obtain any information deemed appropriate and necessary for the evaluation. The Examiner shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, and any restrictions that should be placed on **MS. WILLIAMS's** practice. The Examiner shall provide an opinion to the Board regarding whether **MS. WILLIAMS** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
4. **MS. WILLIAMS** may submit a new application for licensure to practice nursing as a licensed practical nurse by endorsement following the Board's receipt of the Examiner's written opinion. Prior

to receiving a license, **MS. WILLIAMS** shall enter into a Consent Agreement with the Board for probationary terms, conditions, limitations, and restrictions determined by the Board for a minimum period of time determined by the Board. The probationary terms, conditions, limitations, and restrictions determined by the Board shall include, but not be limited to, completion or continuation of treatment recommended and/or restrictions specified by the Examiner, as set forth in paragraph 3., above. If the Board and **MS. WILLIAMS** are unable to agree to terms, conditions, limitations, and restrictions in a Consent Agreement, the terms, conditions, limitations, and restrictions shall be determined after a hearing is held.

### **Reporting Requirements of MS. WILLIAMS**

5. **MS. WILLIAMS** shall sign release of information forms allowing health professionals and other organizations to submit requested documentation or information directly to the Board.
6. **MS. WILLIAMS** shall submit any and all information that the Board may request regarding her ability to practice according to acceptable and prevailing standards of safe nursing practice.
7. **MS. WILLIAMS** shall not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.
8. **MS. WILLIAMS** shall submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be made to the Monitoring Unit of the Board.
9. **MS. WILLIAMS** shall submit the reports and documentation required by this Order to the attention of the Compliance Unit, Ohio Board of Nursing, 17 South High Street, Suite 660, Columbus, OH 43215-3466.
10. **MS. WILLIAMS** shall verify that the reports and documentation required by this Order are received in the Board office.
11. **MS. WILLIAMS** shall inform the Board within three (3) business days, in writing, of any change in address and/or telephone number.

Motion adopted by a majority vote of the Board members present with Sandra Ranck abstaining.

This Order shall become effective immediately and is hereby entered upon the Journal of the Board for the 25<sup>th</sup> day of January 2018.

Martin, Kristine Michelle, P.N. 122003 (CASE #17-3148; #17-2838)

**Action:** It was moved by Nancy Fellows, seconded by Barbara Douglas, that the Board find that **MS. MARTIN** has failed to submit to an examination when directed, that the failure was not due to circumstances beyond her control, and that in accordance with Section 4723.28(G) ORC, **MS. MARTIN** has admitted the truth of the allegations set forth in the August 23, 2017 Examination Order issued to **MS. MARTIN** and that **MS. MARTIN** has an impairment affecting her ability to provide safe nursing care. It was further moved that **MS. MARTIN's** license to practice nursing as a licensed practical nurse in the State of Ohio be suspended for an indefinite period of time with conditions for reinstatement set forth below:

### **CONDITIONS FOR REINSTATEMENT**

1. **MS. MARTIN** shall obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
2. **MS. MARTIN** shall appear in person for interviews before the full Board or its designated representative as requested by the Board and prior to reinstatement.
3. **MS. MARTIN** shall, at her own expense, submit to a professional evaluation specifically addressing her ability to safely function in a clinical nursing capacity, by The University of Cincinnati Physicians Company, 260 Stetson Street, Suite 3200, Cincinnati, Ohio 45219, or another examiner approved in advance, in writing, by the Board or its designee (hereinafter "Examiner"). Prior to the evaluation, **MS. MARTIN** shall notify the Board Monitoring Agent of the appointment date, so that the Monitoring Agent can send the necessary records to the Examiner. **MS. MARTIN** shall execute releases to permit the Examiner to obtain any information deemed appropriate and necessary for the evaluation. The Examiner shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, and any restrictions that should be placed on **MS. MARTIN's** practice. The Examiner shall provide an opinion to the Board regarding whether **MS. MARTIN** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
4. **MS. MARTIN** shall enter into a Consent Agreement with the Board for probationary terms, conditions, limitations, and restrictions determined by the Board for a minimum period of time determined by the Board. The probationary terms, conditions, limitations, and restrictions determined by the Board shall include, but not be limited to, completion or continuation of mental health and/or chemical dependency treatment, or other treatment recommended, and/or restrictions specified by the Examiner, as set forth in paragraph 3., above. If the Board and **MS. MARTIN** are unable to agree to terms, conditions, limitations, and restrictions in a Consent

Agreement, the terms, conditions, limitations, and restrictions shall be determined after a hearing is held.

### **Reporting Requirements of Licensee**

5. **MS. MARTIN** shall sign release of information forms allowing health professionals and other organizations to submit requested documentation or information directly to the Board.
6. **MS. MARTIN** shall submit any and all information that the Board may request regarding her ability to practice according to acceptable and prevailing standards of safe nursing practice.
7. **MS. MARTIN** shall not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.
8. **MS. MARTIN** shall submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be made to the Monitoring Unit of the Board.
9. **MS. MARTIN** shall submit the reports and documentation required by this Order to the attention of the Compliance Unit, Ohio Board of Nursing, 17 South High Street, Suite 660, Columbus, OH 43215-3466.
10. **MS. MARTIN** shall verify that the reports and documentation required by this Order are received in the Board office.
11. **MS. MARTIN** shall inform the Board within three (3) business days, in writing, of any change in address and/or telephone number.

Motion adopted by a majority vote of the Board members present with Sandra Ranck abstaining.

This Order shall become effective immediately and is hereby entered upon the Journal of the Board for the 25<sup>th</sup> day of January 2018.

Dalrymple, Rebekah Margaret, R.N. 366604 (CASE #15-7620)

**Action:** It was moved by Lisa Klenke, seconded by Matthew Carle, that the Board find that **MS. DALRYMPLE** has failed to submit to an examination when directed, that the failure was not due to circumstances beyond her control, and that in accordance with Section 4723.28(G) ORC, **MS. DALRYMPLE** has admitted the truth of the allegations set forth in the August 8, 2017 Examination Order issued to **MS. DALRYMPLE** and that **MS. DALRYMPLE** has an impairment affecting her ability to provide safe nursing care. It was further moved that **MS. DALRYMPLE's** license to practice nursing as a registered nurse

in the State of Ohio be suspended for an indefinite period of time with conditions for reinstatement set forth below:

### **CONDITIONS FOR REINSTATEMENT**

1. **MS. DALRYMPLE** shall obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
2. **MS. DALRYMPLE** shall appear in person for interviews before the full Board or its designated representative as requested by the Board and prior to reinstatement.
3. **MS. DALRYMPLE** shall, at her own expense, submit to a chemical dependency evaluation specifically addressing her ability to safely function in a clinical nursing capacity, by Dr. Michael A. Gureasko, located at the Christ Hospital Medical Office Building, 2123 Auburn Ave., Suite 310, Cincinnati, Ohio 45219, or another examiner approved in advance, in writing, by the Board or its designee (hereinafter "Examiner"). Prior to the evaluation, **MS. DALRYMPLE** shall notify the Board Monitoring Agent of the appointment date, so that the Monitoring Agent can send the necessary records to the Examiner. **MS. DALRYMPLE** shall execute releases to permit the Examiner to obtain any information deemed appropriate and necessary for the evaluation. The Examiner shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, and any restrictions that should be placed on **MS. DALRYMPLE's** practice. The Examiner shall provide an opinion to the Board regarding whether **MS. DALRYMPLE** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
4. **MS. DALRYMPLE** shall enter into a Consent Agreement with the Board for probationary terms, conditions, limitations, and restrictions determined by the Board for a minimum period of time determined by the Board. The probationary terms, conditions, limitations, and restrictions determined by the Board shall include, but not be limited to, completion or continuation of mental health and/or chemical dependency treatment, or other treatment recommended, and/or restrictions specified by the Examiner, as set forth in paragraph 3., above. If the Board and **MS. DALRYMPLE** are unable to agree to terms, conditions, limitations, and restrictions in a Consent Agreement, the terms, conditions, limitations, and restrictions shall be determined after a hearing is held.

### **Reporting Requirements of Licensee**

5. **MS. DALRYMPLE** shall sign release of information forms allowing health professionals and other organizations to submit requested documentation or information directly to the Board.

6. **MS. DALRYMPLE** shall submit any and all information that the Board may request regarding her ability to practice according to acceptable and prevailing standards of safe nursing practice.
7. **MS. DALRYMPLE** shall not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.
8. **MS. DALRYMPLE** shall submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be made to the Monitoring Unit of the Board.
9. **MS. DALRYMPLE** shall submit the reports and documentation required by this Order to the attention of the Compliance Unit, Ohio Board of Nursing, 17 South High Street, Suite 660, Columbus, OH 43215-3466.
10. **MS. DALRYMPLE** shall verify that the reports and documentation required by this Order are received in the Board office.
11. **MS. DALRYMPLE** shall inform the Board within three (3) business days, in writing, of any change in address and/or telephone number.

Motion adopted by a majority vote of the Board members present with Sandra Ranck abstaining.

This Order shall become effective immediately and is hereby entered upon the Journal of the Board for the 25<sup>th</sup> day of January 2018.

Rook, Joshua J., P.N. 151163 (CASE #16-2651; #16-0690)

**Action:** It was moved by Matthew Carle, seconded by Lisa Klenke, that the Board find that **MR. ROOK** has failed to submit to an examination when directed, that the failure was not due to circumstances beyond **MR. ROOK's** control, and that in accordance with Section 4723.28(G) ORC, **MR. ROOK** has admitted the truth of the allegations set forth in the July 27, 2017 Examination Order issued to **MR. ROOK** and that **MR. ROOK** has an impairment affecting his ability to provide safe nursing care. It was further moved that **MR. ROOK's** license to practice nursing as a licensed practical nurse in the State of Ohio be suspended for an indefinite period of time with conditions for reinstatement set forth below:

#### **CONDITIONS FOR REINSTATEMENT**

1. **MR. ROOK** shall obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.

2. **MR. ROOK** shall appear in person for interviews before the full Board or its designated representative as requested by the Board and prior to reinstatement.
3. **MR. ROOK** shall, at his own expense, submit to a chemical dependency evaluation specifically addressing his ability to safely function in a clinical nursing capacity, by Dr. Michael A. Gureasko, located at the Christ Hospital Medical Office Building, 2123 Auburn Ave., Suite 310, Cincinnati, Ohio 45219, or another examiner approved in advance, in writing, by the Board or its designee (hereinafter "Examiner"). Prior to the evaluation, **MR. ROOK** shall notify the Board Monitoring Agent of the appointment date, so that the Monitoring Agent can send the necessary records to the Examiner. **MR. ROOK** shall execute releases to permit the Examiner to obtain any information deemed appropriate and necessary for the evaluation. The Examiner shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, and any restrictions that should be placed on **MR. ROOK's** practice. The Examiner shall provide an opinion to the Board regarding whether **MR. ROOK** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
4. **MR. ROOK** shall enter into a Consent Agreement with the Board for probationary terms, conditions, limitations, and restrictions determined by the Board for a minimum period of time determined by the Board. The probationary terms, conditions, limitations, and restrictions determined by the Board shall include, but not be limited to, completion or continuation of mental health and/or chemical dependency treatment, or other treatment recommended, and/or restrictions specified by the Examiner, as set forth in paragraph 3., above. If the Board and **MR. ROOK** are unable to agree to terms, conditions, limitations, and restrictions in a Consent Agreement, the terms, conditions, limitations, and restrictions shall be determined after a hearing is held.

#### **Reporting Requirements of Licensee**

5. **MR. ROOK** shall sign release of information forms allowing health professionals and other organizations to submit requested documentation or information directly to the Board.
6. **MR. ROOK** shall submit any and all information that the Board may request regarding his ability to practice according to acceptable and prevailing standards of safe nursing practice.
7. **MR. ROOK** shall not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.

8. **MR. ROOK** shall submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be made to the Monitoring Unit of the Board.
9. **MR. ROOK** shall submit the reports and documentation required by this Order to the attention of the Compliance Unit, Ohio Board of Nursing, 17 South High Street, Suite 660, Columbus, OH 43215-3466.
10. **MR. ROOK** shall verify that the reports and documentation required by this Order are received in the Board office.
11. **MR. ROOK** shall inform the Board within three (3) business days, in writing, of any change in address and/or telephone number.

Motion adopted by a majority vote of the Board members present with Sandra Ranck abstaining.

This Order shall become effective immediately and is hereby entered upon the Journal of the Board for the 25<sup>th</sup> day of January 2018.

Smith, Erica Marie, R.N. 411500 (CASE #15-7049; #16-7833; #16-7940)

**Action:** It was moved by Patricia Sharpnack, seconded by J. Jane McFee, that the Board find that **MS. SMITH** has failed to submit to an examination when directed, that the failure was not due to circumstances beyond her control, and that in accordance with Section 4723.28(G) ORC, **MS. SMITH** has admitted the truth of the allegations set forth in the June 14, 2017 Examination Order issued to **MS. SMITH** and that **MS. SMITH** has an impairment affecting her ability to provide safe nursing care. It was further moved that **MS. SMITH's** license to practice nursing as a registered nurse in the State of Ohio be suspended for an indefinite period of time with conditions for reinstatement set forth below:

#### **CONDITIONS FOR REINSTATEMENT**

1. **MS. SMITH** shall obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
2. **MS. SMITH** shall appear in person for interviews before the full Board or its designated representative as requested by the Board and prior to reinstatement.
3. **MS. SMITH** shall, at her own expense, submit to a chemical dependency evaluation specifically addressing her ability to safely function in a clinical nursing capacity, by Dr. Michael A. Gureasko, located at the Christ Hospital Medical Office Building, 2123 Auburn Ave., Suite 310, Cincinnati, Ohio 45219, or another examiner approved in advance, in writing, by the Board or its designee (hereinafter "Examiner"). Prior to the evaluation, **MS. SMITH** shall notify the Board Monitoring Agent of the appointment date, so

- that the Monitoring Agent can send the necessary records to the Examiner. **MS. SMITH** shall execute releases to permit the Examiner to obtain any information deemed appropriate and necessary for the evaluation. The Examiner shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, and any restrictions that should be placed on **MS. SMITH's** practice. The Examiner shall provide an opinion to the Board regarding whether **MS. SMITH** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
4. **MS. SMITH** shall enter into a Consent Agreement with the Board for probationary terms, conditions, limitations, and restrictions determined by the Board for a minimum period of time determined by the Board. The probationary terms, conditions, limitations, and restrictions determined by the Board shall include, but not be limited to, completion or continuation of mental health and/or chemical dependency treatment, or other treatment recommended, and/or restrictions specified by the Examiner, as set forth in paragraph 3., above. If the Board and **MS. SMITH** are unable to agree to terms, conditions, limitations, and restrictions in a Consent Agreement, the terms, conditions, limitations, and restrictions shall be determined after a hearing is held.

#### **Reporting Requirements of Licensee**

5. **MS. SMITH** shall sign release of information forms allowing health professionals and other organizations to submit requested documentation or information directly to the Board.
6. **MS. SMITH** shall submit any and all information that the Board may request regarding her ability to practice according to acceptable and prevailing standards of safe nursing practice.
7. **MS. SMITH** shall not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.
8. **MS. SMITH** shall submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be made to the Monitoring Unit of the Board.
9. **MS. SMITH** shall submit the reports and documentation required by this Order to the attention of the Compliance Unit, Ohio Board of Nursing, 17 South High Street, Suite 660, Columbus, OH 43215-3466.
10. **MS. SMITH** shall verify that the reports and documentation required by this Order are received in the Board office.

11. **MS. SMITH** shall inform the Board within three (3) business days, in writing, of any change in address and/or telephone number.

Motion adopted by a majority vote of the Board members present with Sandra Ranck abstaining.

This Order shall become effective immediately and is hereby entered upon the Journal of the Board for the 25<sup>th</sup> day of January 2018.

Matthews, Kimberly Marie (aka "Kimerly Bramhill"), P.N. 119531 (CASE #16-7285; #16-7246; #16-6903; #15-8276)

**Action:** It was moved by J. Jane McFee, seconded by Patricia Sharpnack, that the Board find that **MS. MATTHEWS** has failed to submit to an examination when directed, that the failure was not due to circumstances beyond **MS. MATTHEWS's** control, and that in accordance with Section 4723.28(G) ORC, **MS. MATTHEWS** has admitted the truth of the allegations set forth in the March 15, 2017 Examination Order issued to **MS. MATTHEWS** and that **MS. MATTHEWS** has an impairment affecting her ability to provide safe nursing care. It was further moved that **MS. MATTHEWS's** license to practice nursing as a licensed practical nurse in the State of Ohio be suspended for an indefinite period of time with conditions for reinstatement set forth below:

#### **CONDITIONS FOR REINSTATEMENT**

1. **MS. MATTHEWS** shall obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
2. **MS. MATTHEWS** shall appear in person for interviews before the full Board or its designated representative as requested by the Board and prior to reinstatement.
3. **MS. MATTHEWS** shall, at her own expense, submit to a chemical dependency evaluation specifically addressing her ability to safely function in a clinical nursing capacity, by Summa Physicians, 444 N. Main Street, 6<sup>th</sup> floor, Akron, Ohio 44310, or another examiner approved in advance, in writing, by the Board or its designee (hereinafter "Examiner"). Prior to the evaluation, **MS. MATTHEWS** shall notify the Board Monitoring Agent of the appointment date, so that the Monitoring Agent can send the necessary records to the Examiner. **MS. MATTHEWS** shall execute releases to permit the Examiner to obtain any information deemed appropriate and necessary for the evaluation. The Examiner shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, and any restrictions that should be placed on **MS. MATTHEWS's** practice. The Examiner shall provide an opinion to the Board regarding whether **MS. MATTHEWS** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.

4. **MS. MATTHEWS** shall enter into a Consent Agreement with the Board for probationary terms, conditions, limitations, and restrictions determined by the Board for a minimum period of time determined by the Board. The probationary terms, conditions, limitations, and restrictions determined by the Board shall include, but not be limited to, completion or continuation of mental health and/or chemical dependency treatment, or other treatment recommended, and/or restrictions specified by the Examiner, as set forth in paragraph 3., above. If the Board and **MS. MATTHEWS** are unable to agree to terms, conditions, limitations, and restrictions in a Consent Agreement, the terms, conditions, limitations, and restrictions shall be determined after a hearing is held.

#### **Reporting Requirements of Licensee**

5. **MS. MATTHEWS** shall sign release of information forms allowing health professionals and other organizations to submit requested documentation or information directly to the Board.
6. **MS. MATTHEWS** shall submit any and all information that the Board may request regarding her ability to practice according to acceptable and prevailing standards of safe nursing practice.
7. **MS. MATTHEWS** shall not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.
8. **MS. MATTHEWS** shall submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be made to the Monitoring Unit of the Board.
9. **MS. MATTHEWS** shall submit the reports and documentation required by this Order to the attention of the Compliance Unit, Ohio Board of Nursing, 17 South High Street, Suite 660, Columbus, OH 43215-3466.
10. **MS. MATTHEWS** shall verify that the reports and documentation required by this Order are received in the Board office.
11. **MS. MATTHEWS** shall inform the Board within three (3) business days, in writing, of any change in address and/or telephone number.

Motion adopted by a majority vote of the Board members present with Sandra Ranck abstaining.

This Order shall become effective immediately and is hereby entered upon the Journal of the Board for the 25<sup>th</sup> day of January 2018.

### **VOLUNTARY RETIREMENTS**

**Action:** It was moved by Lauralee Krabill, seconded by Matthew Carle, that the Board accept the Permanent Voluntary Retirement from the practice of nursing for the following case(s):

Lieder, Mary, R.N. 154205, CNP 07002, CTP 07002 (CASE #14-5796); Garcia, Taylor, DTI 005234 (CASE #17-2976); Finsel, Alesia, R.N. 211846 (CASE #17-5773); Frazier, Jeanne, R.N. 344632, P.N. 041215 (CASE #16-5143); Rader, David, R.N. 171063 (CASE #17-7393); Jones, Shelly, P.N. 053855 (CASE #17-7289); Noble, Darlene, R.N. 254817 (CASE #17-4816); Short, Lisa, R.N. 291700 (CASE #17-0568).

Motion adopted by a majority vote of the Board members present with Sandra Ranck abstaining.

### **SUMMARY SUSPENSION AND NOTICE OF OPPORTUNITY FOR HEARING**

Whelan, Emily J., R.N. 358005 (CASE #17-6736)

**Action:** It was moved by Erin Keels, seconded by Joanna Ridgeway, that there is clear and convincing evidence that continued practice by **EMILY J. WHELAN, R.N. 358005** (CASE #17-6736), presents a danger of immediate and serious harm to the public. It was further moved that the Board Summarily Suspend the license of **EMILY J. WHELAN, R.N. 358005**, and issue a Notice of Opportunity for Hearing for violations of Chapter 4723, ORC, retroactive to the date it was issued on December 4, 2017.

Motion adopted by a majority vote of the Board members present with Sandra Ranck abstaining.

Shrewsbury, Douglas L., R.N. 398788, CNP 15504, CTP 15504 (CASE #17-3367)

**Action:** It was moved by Joanna Ridgeway, seconded by Erin Keels, that there is clear and convincing evidence that continued practice by **DOUGLAS L. SHREWSBURY, R.N. 398788, CNP 15504, CTP 15504**, presents a danger of immediate and serious harm to the public. It was further moved that the Board Summarily Suspend the licenses of **DOUGLAS L. SHREWSBURY, R.N. 398788, CNP 15504, CTP 15504**, and issue a Notice of Opportunity for Hearing for violations of Chapter 4723 ORC, retroactive to the date it was issued on December 7, 2017.

Motion adopted by a majority vote of the Board members present with Sandra Ranck abstaining.

## **MONITORING**

### **RELEASE FROM SUSPENSION/PROBATION**

**Action:** It was moved by Nancy Fellows, seconded by Barbara Douglas, that the following, with the recommendation by Sandra Ranck, Supervising Member for Disciplinary Matters, be released from their Consent Agreement(s):

Johnson, Mary, R.N. 372304 (CASE #16-5293); Hinton, Jennifer, R.N. 271347 (CASE #14-0737); Kennard, Taryn, P.N. 156396 (CASE #14-0782); Jones, Tawana, P.N. 127521 (CASE #16-4045); Neeley, Meghan, R.N. 387232 (CASE #13-3847); Hightower, Deshannon, R.N. 344932, P.N. 102779 (CASE #16-4300); Rodgers, Ann, R.N. 280168 (CASE #15-0375); Burns, Jr., Bernard, P.N. 161237 (CASE #15-5654); McDaniel, Elizabeth, R.N. 361083 (CASE #15-3124); Hall, Leah, P.N. 102021 (CASE #14-0427); Musani, Margaret, P.N. 158916 (CASE #16-2381); Ray, Chelsea, R.N. 401304, P.N. 150571 (CASE #14-6548).

Motion adopted by a majority vote of the Board members present with Sandra Ranck abstaining.

### **RELEASE OF SUSPENSION/PROBATION – EARLY RELEASE**

**Action:** It was moved by Barbara Douglas, seconded by Nancy Fellows, that the following, with the recommendation by Sandra Ranck, Supervising Member for Disciplinary Matters, be released early from their Consent Agreement(s):

Osborn, Renita, R.N. 392894, P.N. 142972 (CASE #15-5653); Baughman, Amber, R.N. 307973 (CASE #15-5237); Kornmiller, Diana, R.N. 384372, P.N. 139610 (CASE #15-8673).

Motion adopted by a majority vote of the Board members present with Sandra Ranck abstaining.

### **RELEASE FROM SUSPENSION/PROBATION - PERMANENT PRACTICE RESTRICTIONS REMAIN**

**Action:** It was moved by Lisa Klenke, seconded by Matthew Carle, that the following, with the recommendation by Sandra Ranck, Supervising Member for Disciplinary Matters, be released from her Consent Agreement with the exception of the permanent practice restrictions that will remain in effect:

Abbott, Amanda, R.N. 353314 (CASE #14-5314).

Motion adopted by a majority vote of the Board members present with Sandra Ranck abstaining.

### **RELEASE FROM SUSPENSION/PROBATION – EARLY RELEASE – PERMANENT PRACTICE RESTRICTIONS REMAIN**

**Action:** It was moved by Matthew Carle, seconded by Lisa Klenke, that the following, with the recommendation by Sandra Ranck, Supervising Member for

Disciplinary Matters, be released early from their Consent Agreements with the exception of the permanent practice restrictions that will remain in effect:

Pawlowicz, Erin, R.N. 296978 (CASE #14-4685); Lunney, Melody, R.N. 332867 (CASE #13-0674).

Motion adopted by a majority vote of the Board members present with Sandra Ranck abstaining.

#### **RELEASE FROM TEMPORARY NARCOTIC RESTRICTION**

**Action:** It was moved by Patricia Sharpnack, seconded by J. Jane McFee, that the following, with the recommendation by Sandra Ranck, Supervising Member for Disciplinary Matters, be released from the temporary narcotic restriction within their Consent Agreement(s):

Barosky, April, R.N. 359562, P.N. 131352 (CASE #16-1486); Savage, John, R.N. 410747 (CASE #13-7095); Callahan, Jill, R.N. 371258 (CASE #16-2563); Krajacic, Lindsay, R.N. 326037 (CASE #15-2416).

Motion adopted by a majority vote of the Board members present with Sandra Ranck abstaining.

#### **REINSTATEMENT REQUEST PER CONDITIONS OF CONSENT AGREEMENT**

**Action:** It was moved by J. Jane McFee, seconded by Patricia Sharpnack, that the following, with the recommendation by Sandra Ranck, Supervising Member for Disciplinary Matters, be reinstated subject to the probationary terms and restrictions of her Consent Agreement:

Wilson, Emilee, R.N. 405176 (CASE #16-3353).

Motion adopted by a majority vote of the Board members present with Sandra Ranck abstaining.

#### **REINSTATEMENT REQUEST PER CONDITIONS OF ADJUDICATION ORDER**

**Action:** It was moved by Lauralee Krabill, seconded by Matthew Carle, that the following, with the recommendation by Sandra Ranck, Supervising Member for Disciplinary Matters, be reinstated subject to the probationary terms and restrictions of their Adjudication Order(s):

Bliss, Brandon, R.N. 317369 (CASE #15-2002) (Mr. Bliss does not have probationary terms and restrictions); Van Der Voort, Dustin, R.N. 339581 (CASE #15-2351); Williams, Lori, R.N. 328322 (CASE #16-5519).

Motion adopted by a majority vote of the Board members present with Sandra Ranck abstaining.

**MOTION TO APPROVE**

**Action:** It was moved by Erin Keels, seconded by Joanna Ridgeway, that the Board accept the following approvals made by Sandra Ranck, Supervising Member for Disciplinary Matters:

Robinson, Keena, P.N. 155256 (CASE #14-6920) – Carolyn McCune, RN, MSN to complete the Education Needs Assessment and Learning Plan.

Hice, Jeffrey, R.N. 308432 (CASE #15-6282) – To perform blood product related procedures offsite while working for Hoxworth Blood Center.

Rucker, Edla, R.N. 268770, CNP 10100 (CASE #13-4199) – The Standard Care Arrangement with collaborating physician, Dr. Todd Klausner, dated November 9, 2017.

Matusiak, Alicja, R.N. 359101, CNP 16032 (CASE #15-7924) – The Standard Care Arrangement with collaborating physician Dr. Lisa M. Werner, dated December 1, 2017.

Legler, Bailey, R.N. 410466 (CASE #16-2298) – Columbus Springs Dublin, in Dublin, Ohio as the treatment provider.

Delsignore, Sandra, R.N. 336945 (CASE #15-6511) – Marlene Hanisko, LPCC-S and Dr. Pradeep Mathur of the Comprehensive Psychiatry Group to complete the Mental Health Evaluation.

Caston, Cherice, P.N. 165040 (CASE #16-7033) – To work as a nurse.

Holman, Tonesia, R.N. 421617 (CASE #15-3592) – The Director of Nursing position with Broadway Care Center (Embassy Healthcare), in Maple Heights, Ohio.

Allen, Angela, R.N. 393913, P.N. 115234 (CASE #15-1830) – Release from the Temporary Narcotic Restriction in the March 2016 Consent Agreement.

Hockman, Rhonda, P.N. 112166 (CASE #06-0465) – To work as a nurse at Prestine Senior Living and Post-Acute Care of Englewood, in Englewood, Ohio.

Melton, Jennifer, R.N. 341254, P.N. 100756 (CASE #15-8200) – Accept the learning plan submitted by Jane Zachrich, M.S.N., R.N.

Binion, LaWanda, R.N. 424815 (CASE #15-8768) – To accept charge nurse position at University Hospitals Rehabilitation Hospital in Beechwood, Ohio effective January 11, 2018.

James, Miranda, P.N. 159650 (CASE #17-2688) – James Conkle, DNP, MSN, NP-C, to complete the Chemical Dependency Evaluation and Cindy Hammond,

APRN-Psychiatric Nurse Practitioner to complete the Mental Health Evaluation.

Moodie-Adams, Claudia, R.N. 316369 (CASE #17-2349) – Mary Hicks and Gayle Bates as additional work place monitors.

Dunn, Kristen (Sharpley), P.N. 134779 (CASE #10-3649) – Dr. Adrienne Saxton (Cleveland, Ohio) to complete the Psychiatric Examination.

Williams, Taneesha, P.N. 158638 (CASE #16-2568) – Dr. Carol S. Gee to complete the Mental Health Evaluation.

Ballenger, Catherine, R.N. 376909 (CASE #17-2826) – Jeffrey Koenig, LISW, with New Horizons Mental Health Services to complete the Mental Health Evaluation.

Lauralee Krabill abstained on Caston, Cherice, P.N. 165040 (CASE #16-7033). Motion adopted by a majority vote of the Board members present with Sandra Ranck abstaining.

#### **MISCELLANEOUS MONITORING MOTIONS**

**Action:** It was moved by Joanna Ridgeway, seconded by Erin Keels, that the Board approve the following, as recommended by Sandra Ranck, Supervising Member for Disciplinary Matters:

Etgen, Michelle, P.N. 130371 (CASE #07-2252) - To be released from probation in the May 16, 2008 Consent Agreement with the Temporary Practice Restrictions remaining in effect.

Horton, Jessica, R.N. 350433 (CASE #16-0259) - Approval to administer, have access to, and possess narcotics, other controlled substances, or mood altering drugs in the current position at Daymont Behavior Health in Dayton, Ohio and for weekly peer sessions with Steven Mates, to count toward her weekly meeting requirement.

Bricker, Shelley, R.N. 251181 (CASE #15-0118) - Approve prior completion of the July 2017 Reprimand Consent Agreement terms and restrictions with the Permanent Practice Restriction remaining in effect.

MacGregor, Lynnette, P.N. 056812 (CASE #16-6397) - To be released from probation in the January 26, 2017 Consent Agreement effective January 26, 2018.

Bennett (Fenderbosch), Jessica, R.N. 340844 (CASE #12-5168) - To be released from drug/alcohol screening set forth in the January 23, 2015 Adjudication Order effective January 26, 2018.

Hanson (Davis), Jennifer, R.N. 328478 (CASE #17-3758) - Approval for "extensive orientation" offered at Cambridge Behavioral Hospital in Cambridge, Ohio.

Clemons, Mary, R.N. 188649, CRNA 00171 (CASE #13-1916) - To be released from probation in the January 26, 2017 Consent Agreement effective January 26, 2018.

Barbara Douglas abstained on Clemons, Mary, R.N. 188649, CRNA 00171 (CASE #13-1916). Motion adopted by a majority vote of the Board members present with Sandra Ranck abstaining.

### **COMPLETION OF REQUIREMENTS**

**Action:** It was moved by J. Jane McFee, seconded by Patricia Sharpnack, that the Board approve prior completion of the Reprimand Consent Agreement(s) terms and restrictions for the following:

Archbold, Cassidy, P.N. 134078 (CASE #16-1659); Mbodj, Mohamed, R.N. 400812, P.N. 128027 (CASE #17-0137); Robinson, Sharita, P.N. 128963 (CASE #14-6529); Goble, James, P.N. 092280 (CASE #16-6542); Clemmons, Ebony, R.N. 227549, P.N. 077010 (CASE #16-4598); Tingelstad, Kimberly, P.N. 121238 (CASE #16-4294); Woods, Heather, P.N. 140747 (CASE #17-1125); Jacobsen, Bethany, R.N. 350460, P.N. 126754 (CASE #16-5668); Daniel, Jennifer, P.N. 102631 (CASE #17-3773); King, Laura, P.N. 139441 (CASE #16-4153); Moss, Jessica, P.N. 126682 (CASE #15-4130); Seamster, Latoya, P.N. 149242 (CASE #15-0279); Hannah, Debra, R.N. 241446, CNP 04889 (CASE #17-1359); Wolf, Patricia, R.N. 302489, CNP 07017 (CASE #16-1727); Mason, Tammy, R.N. 299518 (CASE #16-7247); Sims, Brittny, DT 004006 (CASE #17-1151); Butler, Bobbi, R.N. 327213 (CASE #16-4546); Silva, Elizabet, P.N. 110113 (CASE #15-8031); Greene, Angela, R.N. 394685, P.N. 110879 (CASE #17-0084); Thomas, Tanisha, P.N. 156032 (CASE #17-0206).

Motion adopted by a majority vote of the Board members present with Sandra Ranck abstaining.

### **REPORTS TO THE BOARD**

#### **Open Forum – Thursday, January 25, 2018 at 10:30 a.m.**

There were no participants for Open Forum.

#### **Other Reports**

##### **Nurse Education Grant Program (NEGP) Report – Final Report for Grant Cycle 2015-2017**

L. Emrich provided the final report for the NEGP grant cycle for 2015-2017. President Sharpnack noted that education programs have increased enrollment, which is the purpose of NEGP funding.

**GENERAL INFORMATION (FYI)**

The Board reviewed the general information items.

**BOARD GOVERNANCE**

**Review of Board Policies**

Director Houchen reviewed proposed changes to the Board Policies for 2018.

**Action:** It was moved by Lauralee Krabill, seconded by Erin Keels, that the Board approve the Board Policies as submitted. Motion adopted by unanimous vote of the Board members present.

**Board Retreat**

The Board reviewed the proposed topics for the Board Retreat on April 18-19, 2018.

**Advisory Group on Nursing Education – Appointment**

**Action:** It was moved by Sandra Ranck, seconded by Joanna Ridgeway, that the Board reappoint Melissa Bennett to the Advisory Group on Nursing Education for a two-year term that begins January 2018. Motion adopted by unanimous vote of the Board members present.

**BOARD MEMBER TRAINING**

Board members Matthew Carle, Barbara Douglas, Nancy Fellows, Lisa Klenke, Lauralee Krabill, J. Jane McFee, Erin Keels, Sandra Ranck, Joanna Ridgeway, and Patricia Sharpnack completed two required State trainings, Sexual Harassment Awareness and Active Aggressor Training.

**EVALUATION OF MEETING AND ADJOURNMENT**

On Wednesday, January 24, 2018 the meeting adjourned at 2:29 p.m. On Thursday, January 25, 2018, the meeting adjourned at 11:55 a.m.

Patricia A. Sharpnack, DNP, RN  
President



Attest:

Betsy Houchen, RN, MS, JD  
Executive Director

