

arizona STATE BOARD OF NURSING

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REGULATORY JOURNAL



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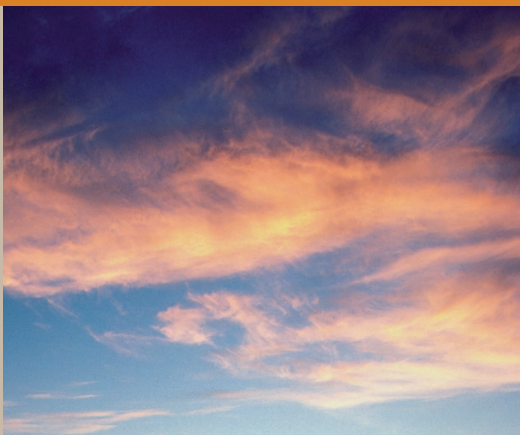
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This magazine is mailed quarterly to over 90,000 Arizona licensed nurses and reaches every nursing student, hospital administrator and nursing school administrator in the state.

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From the Executive Director
JOEY RIDENOUR, RN, MN, FAAN

Drug Deaths is Number One Killer in Many States

The number one issue the Board continues to find placing the public and nurses at risk has been the same for the past 30-40 years: Substance Use Disorders. According to recent data released by the Centers for Disease Control and Prevention (CDC) and the National Center for Health Statistics (NCHS), 16 states now see more deaths that are drug-related than driving-related. It is continuing to happen in one state after the other.

In a recent article by Khoi Nguyen (*Sober Living by the Sea*, 2009), 2006 data shows:

45,000 total deaths nationwide caused by traffic accidents versus 39,000 deaths that were drug-induced.

90% of drug induced deaths are both from overdoses and from deaths due to long-term organ damage.

Illegal drugs such as heroin and cocaine continue to be significant killers, but the key finding has to do with prescription opiates or pain medication drugs such as Vicodin, OxyContin, morphine, and codeine.

1999 to 2006, there was more than a tripling of prescription pain medication-induced deaths.

2006 alone, pain killers caused approximately 40% of the total number of poisoning deaths.

Greatest increase in deaths seen in the drug methadone—a sevenfold increase in deaths between 1999 and 2006.

Abuse of these drugs within the 35 to 54 year old age group is a major growing problem. It now represents the leading cause of death overall for that segment in the US.

Overdose of these drugs is the fastest increasing segment of overall deaths that are caused by poisonings.

Similar information has also been reported by The National Institute on Drug Abuse (NIDA):

Opioid pain relievers, such as Vicodin or OxyContin, can present similar health risks as do illicit opioids (e.g., heroin) depending on dose, route of administration, combination with other drugs, and other factors.

Increases in non-medical opioid use have been accompanied by increased emergency room visits, accidental poisonings, and treatment admissions for addiction.

Treatments for prescription drugs tend to be similar to those for illicit drugs that affect the same brain systems.

Trying to locate appropriate treatment for nurses, especially finding a program tailored to an individual's particular needs, can be a difficult process. However, there are some resources currently available to help with this process, including:

- The Substance Abuse and Mental Health Services Administration (SAMHSA) maintains a Web site (www.findtreatment.samhsa.gov) that shows the location of residential, outpatient, and hospital inpatient treatment programs for drug addiction and alcoholism throughout the country. This information is also accessible by calling 1-800-662-HELP.
- The National Suicide Prevention Lifeline (1-800-273-TALK) offers more than just suicide prevention—it can also help with a host of issues, including drug and alcohol abuse, and can connect individuals with a nearby professional.
- The National Alliance on Mental Illness (www.nami.org) and Mental Health America (www.mentalhealthamerica.net) are alliances of non-profit, self-help support organizations for patients and families dealing with a variety of mental disorders. Both have State and local affiliates throughout the country and may be especially helpful for patients with co-morbid conditions.
- The American Academy of Addiction Psychiatry and the American Academy of Child and Adolescent Psychiatry each have physician locator tools posted on their Web sites at www.aaap.org and www.aacap.org, respectively.
- For information about participating in a clinical trial testing promising substance abuse interventions, contact NIDA's National Drug Abuse Treatment Clinical Trials Network at www.drugabuse.gov/CTN/Index.htm, or visit NIH's Web site at www.clinicaltrials.gov.

Other resources for you in this edition of the Journal are articles by Dr. Kathy Scott regarding "The Nurse Executive Role in Managing Suspected Nurse Impairment." on page 9. Val Smith, RN MS FRE, Associate Director has also provided information on "Substance Abuse Disorders in Nursing" found on page 6. Please let us know if you have additional resources that nurses need to know about regarding this "number one killer."

Joey Ridenour RN MN FAAN

Joey Ridenour, RN, MN, FAAN
Executive Director



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BY VALERIE SMITH RN MS FRE
ASSOCIATE DIRECTOR OF INVESTIGATIONS & COMPLIANCE

Substance Use Disorders in Nursing

Addiction is an illness that follows a predictable and progressive course that may result in death if left untreated. Symptoms of addiction include compulsion, loss of control over the use of the drug/alcohol, continued use despite negative consequences or high potential for negative consequences, and changes in tolerance. The National Council on Alcoholism and Drug Dependence (www.ncadd.org) sites the following statistics:

Approximately 18 million Americans have alcohol problems.

Approximately 5 to 6 million Americans have drug problems.

There are more deaths and disabilities each year in the United States from substance abuse than from any other cause.

Almost half of all traffic fatalities are alcohol-related.

One-quarter of all emergency room admissions, one-third of all suicides, and more than half of all homicides and incidents of domestic violence are alcohol-related.

Untreated addiction is more expensive than heart disease, diabetes and cancer combined.

According to a recent national survey on drug use and health completed by the U.S. Department Of Health And Human Services, Substance Abuse and Mental Health Services Administration (SAMSHA), in 2008, an estimated 22.2 million persons (8.9 percent of the population aged 12 or older) were classified with substance dependence or abuse in the past year based on criteria specified in the Diagnostic and Statistical Manual of Mental Disorders, 4th edition (DSM-IV). Of these, 3.1 million were classified with dependence on or abuse of both alcohol and illicit drugs, 3.9 million were dependent on or abused illicit drugs but not alcohol, and 15.2 million were dependent on or abused alcohol but not illicit drugs. (SAMSHA)

Nurses are no more immune from developing substance use disorders and

addiction than the general population. Although the actual rate of addiction in nurses is unknown with estimates ranging from 6% to 20%, what is known is that one of the most common complaints received by Boards of Nursing and that forms the basis for licensure disciplinary action is substance misuse, abuse or addiction related. In the current Journal alone, approximately 50% or more of the disciplinary actions taken by the Board against nurse licensure (RN and LPN) was directly related to inappropriate substance use, abuse or addiction.

RECOGNIZING WORKPLACE INDICATORS OF SUBSTANCE USE DISORDER

Despite the prevalence of substance use disorders within society and, within the nursing profession, many co-workers, supervisors, employers and others have difficulty recognizing or assisting a nurse colleague with an apparent substance use disorder. This is alarming considering the inherent responsibilities nurses have for patient care and safety and the potential fatal nature of the disease of addiction. The last step on the downward spiral of addiction occurs at the professional worksite as nurses and other healthcare professionals take great effort to protect their professional and nursing identity. Evidence of the disease on the job usually indicates a late stage disease process. Their denial, shame and fear of consequences prevent many individuals, including nurses, from proactively seeking treatment. Denial and self-deception are the most difficult obstacles to overcome for both the nurse and their colleagues. It is not uncommon that they initially continue to often perform adequately while afflicted with a substance use disorder. When job performance deteriorates, managers and colleagues may accept or provide excuses like "stress" or "fatigue" rather than consider substance abuse. Managers and co-workers may unintentionally enable the disease to progress by ignoring or excusing poor performance, incomplete work, attendance issues and

other symptoms of a substance use disorder. Another way in which the disease is enabled is when an employer recognizing symptoms consistent with a possible substance use disorder and opts to terminate the nurse without addressing the concerns and/or reporting the nurse to the Board. When this happens, the nurse is allowed to continue with a potentially deadly disease and patient care with the next employer who is potentially negatively impacted.

Workplace indicators of a substance use disorder may include and is not limited to the following.

Attendance: progressive absences, both on the job (unexplained frequent or prolonged absences from the unit) and/or off the job (difficulty adhering to the work schedule); unusual explanations for absences; difficulty meeting deadlines;

Interpersonal: complaints from co-workers or patients or others; increased isolation from others; unpredictability; changes in mood and/or energy level (alert to appearing sedated); increased conflict with others; legal problems; family or social problems.

Job Performance: difficulty in organizing and prioritizing duties and responsibilities; deterioration in quality of work; poor judgment; forgetfulness; below standard practice; odor of alcohol on person or breath; inappropriate, inadequate or missing documentation; discrepancies with controlled drugs or the amount removed as compared to co-workers without a corresponding change in the patient condition that would explain the need for additional medications; discrepancies in the accounting for controlled medications signed out; unauthorized removal of controlled substances or other medications of abuse by accessing or use of another's password; missing medications

WHAT TO DO

One of the first steps is the awareness and recognition that substance use disorders does affect nurses. It is an equal opportunity disease that is often misun-

continued >>>



derstood by those with or impacted by the disease, including employers and co-workers. Nurses with an active substance use disorder have potential to not only harm patients but also cause harm or death to themselves. Be observant for indicators of substance abuse. Document your observations with objective data that includes date, time and description of the incident. Colleagues who work closely with a nurse struggling with a substance use disorder often recognize that something is wrong before the supervisor who may not have as frequent encounters. If you are a colleague, do not assume the supervisor is aware. Share your concerns with the supervisor. Anytime that there is reasonable concern that a nurse, for whatever reason, is currently unable to safely practice, they should immediately be removed from patient care until further assessment can be completed. If employer policies permit, and there is reasonable suspicion that the nurse may be under the influence of a substance, a drug test should be obtained and the panel of drugs tested should include the drug(s) that are of suspect. A nurse with a suspected substance use disorder should be referred for further evaluation for possible treatment and a report submitted to the Board for further review and investigation by the Board to determine safeness to practice. If the nurse acknowledges substance abuse, they may be eligible for the Board's non-public and non-disciplinary monitoring program for nurses with substance abuse disorders, CANDO. Information about CANDO can be found on the Board's website at www.azbn.gov.

WHAT NOT TO DO

Do not ignore your observations. Do not allow the nurse who is demonstrating active signs and symptoms of impairment to continue to provide patient care or make decisions impacting patient care until further expert

assessment can be completed and evidence of ability to safely perform. Do not allow the nurse to resign or be terminated without addressing identified concerns, providing resources for further evaluation and treatment and without notifying or causing the Board to be notified. Do not encourage the nurse to hide information from the Board. At times, and perhaps well meaning friends, colleagues, and others advising the nurse in how or what to share with the Board or assigned investigative staff, encourage the nurse to not disclose their substance abuse history or substance use disorder with the Board. Not disclosing can put patients at risk and can have deadly consequences for the nurse. Addiction is a chronic progressive disease that may and often does result in death if left untreated.

SUMMARY

Substance use disorders in nursing are not a modern day phenomenon. Florence Nightingale reportedly addressed in her writings the need to dismiss nurses for being "dead drunk." In a 1900 nursing ethics book, the author described "encountering members of our own profession who have lost their power of self control and have become victims to the abuse of some powerful drug or alcoholic stimulant with all of it's attending evils (O.M. Church 1985). Today we understand more about substance use disorders and evidence shows that a combination of treatment, involvement in 12-step meetings and licensure/practice monitoring requirements established by healthcare regulatory boards can have positive impact on facilitating remission of the disease and returning licensee's, when appropriate, to patient care. When you suspect a nurse has a substance abuse disorder, dare to do the right thing and make your concerns known to those who have the ability to intervene in behalf of the nurse and patients.

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The Nurse Executive's Role in Managing Suspected Nurse Impairment

By Kathy Scott, PhD, RN

Board Member

As a Board Member of the Arizona State Board of Nursing I have the advantage of observing the actions of multiple agencies/organizations across the state. As a nurse executive, I have personally been challenged to create a "fair and just" organizational culture that holds nurses accountable for their practice and protects both the organization's patients and the public.

The purpose of this article is to raise the collective awareness of nurse executives to potential pitfalls in safety as well as provide recommendations for organizational practices that protect patients and the public while offering opportunities for remediation of our nurses.

Protecting Patients and The Public At Large

When a nurse is terminated from an organization for documentation, practice and/or other performance issues, their practice can no longer be monitored by that organization. These practice concerns are commonly not shared with other employers to avoid the risk of litigation. This may protect the organization and its patients in the short term, but potentially puts the public and all healthcare organizations at risk.

If the nurse's performance and/or practice reaches the level of concern for patients' safety and the organization determines that termination of employment is needed, there may be a need for continued monitoring to protect the public. Organizational policies need to be in place that requires reporting of terminated nurses to the state board of nursing when they exhibit high-risk behavior and/or practice concerns that were not remediated and potentially impact the safety of patients. It is not uncommon to find nurses, both contracted and employed, who have been terminated and go from organization to organization with a pattern of practice and performance problems. Eventually they may be reported to the Board, but there is all too often a long history of high-risk performance that can and does harm patients.

Recommendation #1: If a nurse is terminated because of high-risk behavior and/or safe practice concerns, protect your patients and the public at large by reporting the individual to the Board of Nursing for follow up.

Ethical Codes of the Nursing Profession

The American Nurses Association Code of Ethics (3.6) states that "The nurse extends compassion and caring to colleagues who are in recovery from illness or when illness interferes with job performance. In a situation where a nurse suspects another's practice may be impaired, the nurse's duty is to take action designed both to protect patients and to assure that the impaired individual receives assistance in regaining optimal function."

The number one violation reported to the state board of nursing relates to nurses diverting drugs or practicing while impaired. Their impairment may result from a variety of underlying causes to include chronic disease and pain, cognitive and functional decline from the aging process, mental illness, prescribed medication management and mismanagement, alcohol abuse, and illegal drug use. It is difficult to determine the underlying causes and pathways to "assure that the impaired individual receives assistance in regaining optimal function." Ethically, however, the nurse executive has the responsibility of creating an environment where nurses feel safe reporting their concerns and where impaired nurses are offered options for getting appropriate help.

Assessment options include board-certified psychologist, addictionologists, and neurologists who provide psychological and/or neuro-psychological assessments to determine the underlying cause of impairment and identify treatment options. With the aging nurse comes an increase in chronic conditions in the workplace. There are also many nurses on multiple medications for pain management

and/or mental illnesses. While these nurses may be under the treatment of a physician, they still may exhibit diminished capacity at times due to medication changes or symptoms of an underlying disease. Having mechanisms in place for referrals to an appropriate third-party professional may get the nurse into appropriate treatment or back on track so that they can function effectively and safely.

Recommendation #2: Assure that mechanisms are in place for evaluation of the impaired nurse to give them the opportunity to gain optimal functioning.

Identification and Remediation of the Impaired Nurse

Practicing while impaired is often preceded and/or accompanied by many subtle symptoms that are easy to miss, such as an increase in absences, family and legal problems, sleeping on the job, an increase in errors and short cuts, documentation inaccuracies and personality changes. What we often see at the state board of nursing is a pattern of risky or reckless behavior that continues over a long period of time without consequences until a patient is harmed.

There is a tendency in many healthcare organizations to discipline individuals for human errors that lead to bad patient outcomes, rather than address high risk or reckless conduct whether or not there is a negative outcome. Reckless conduct goes beyond a failure to recognize a risk, and is defined as a conscious disregard of a visible, significant risk. We must be able to identify and address this performance regardless of outcome.

Recommendation #3: Have systems in place to identify and manage high risk or reckless behaviors before there is a negative patient outcome.

The Investigation Process

When impairment and/or drug diversion are suspected, the first responsibility is to protect the patients. Therefore,

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it is appropriate to suspend the nurse while conducting a thorough investigation. Only when the investigation is completed, should the appropriate actions be determined, including any recommendations to the nurse to self report to the Board. Even though a nurse may self report, also provide a written document to the board of nursing regarding the specifics of the investigative findings.

Utilize a systems approach (i.e. a root-cause analysis approach that looks at multiple contributors to the situation) during the investigation to identify contributing factors that may be overlooked at first glance. It is not uncommon, for example, for an organization to terminate an individual who has inaccurate documentation of controlled substances and is therefore suspected of diverting drugs for their own or other's use. While this may be the case, there may be more to the story. Before coming to this conclusion consider expanding the documentation review to determine if inaccurate/inadequate documentation goes beyond "controlled substances" to include other medications, interventions and/or treatments. If so, also assess the quality of the individual's orientation to the documentation system (particularly if there is a newly implemented electronic medical record (EMR)) to determine if this is a competency or diversion issue. Alternatives to termination may include additional EMR training, chart reviews, and even random drug testing.

Recommendation #4: Use a systems framework to investigate situations involving practice/performance concerns to identify contributing factors that include and go beyond the nurse.

The nurse executive has multiple responsibilities when it comes to determining the standards for managing situations of suspected nurse impairment. These responsibilities include protecting the patients within the organization in which they serve; as well as protecting the public at large. The nurse executive also has the responsibility of upholding and strengthening the ethical codes of the nursing profession throughout the process, assuring that the actions of the organization are fair and just with efforts to protect as well as remediate the nurse.

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LPN Advisory Committee



The Arizona Board of Nursing decided to appoint a special LPN Advisory Committee in early 2009 to assess the regulatory sufficiency of the LPN scope of practice. The committee was also charged with determining what regulatory barriers, if any, prevent long term care/ health delivery system from fully utilizing LPN's within their scope of practice.

Approximately 20 nurses and others from multiple disciplines and settings who have interaction with the LPN workforce were appointed to the committee. The diversified group included: nursing home administrators, LPN educators, Arizona Nurses Association, Arizona Department of Health Services representatives, and a number of LPN's working with clients in a variety of settings. Board staff working with the committee are Pam Randolph, Judy Bontrager and Joey Ridenour.

The purpose and progress on the goals of the LPN Advisory Committee are found at: www.azbn.gov/committee. Advisory Opinions (AO) that have been updated based on the collaborative work of the Scope of Practice and LPN Advisory Committees are:

- IV Therapy Advisory Opinion was revised to include the use of a PICC line in specific conditions.
- The Role of the LPN is now defined in the Determination of Death Advisory Opinion.

- A new Wound Care Advisory Opinion is currently under review to better define the role of the LPN in wound care.

Thanks to the members of the committee for their work in addressing

the evolving scope of practice of the LPN. As always, let us know your thoughts, questions, and suggestions.

Patricia Johnson LPN, Board Member/
Co-Chair LPN Advisory Committee



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web site. Please review it so you can be certain you have the most current information and you can avoid unnecessary and time-consuming delays in the processing. <http://pub.azdhs.gov/dcinfo/>.

Remember that ONLY Arizona licensed MD's and DO's along with Certified Registered Nurse Practitioners are allowed to sign a death certificate. Residents and Physician's Assistants ARE NOT allowed to sign death certificate.

If you have questions after review of the web site, email Douglas Leach, Death Registry Manager, at leachd@azdhs.gov.



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ADVENTURES OF A FIRST YEAR BOARD MEMBER AT 2010 NCSBN MID-YEAR MEETING

For a life-long St. Louis Cardinal Baseball fan any trip to the Windy City and into the heartland of our arch rivals, the Chicago Cubs, is a trip to be approached with some fear and trepidation. So it was as I boarded that Monday morning flight bound for Chicago and my first National Council State Board of Nursing (NCSBN) Mid-Year Meeting. Would Cub fans know I was walking among them? What nugget would I take home from the NCSBN meeting that would make me a better board member?

What I found was a gold mine. I learned that NCSBN is not just a national organization; it is an international organization with members traveling from as far away as Guam and American Samoa to attend the meeting - many more were present via webcast. I learned that nursing regulatory bodies from other countries around the world look to NCSBN for guidance. I learned there is a lot more to NCSBN than just overseeing the administration of the NCLEX-RN® and NCLEX-PN® exams.

On Tuesday morning members received updates and discussed a wide variety of issues impacting the Board with the main topic being the 2011-2013 Strategic Initiative Draft. The initiative, containing five key points that eventually will become NCSBN's primary focus for the next couple of years. Those being:

1. Develop and promote research and evidence-based regulatory solutions
2. Advance the leadership potential and engagement of all members through education, information and networking.
3. Provide state-of-the-art competence assessments.
4. Collaborate to advance the evolution of nursing regulation worldwide.
5. Optimize nursing regulation through the efficient use of technology.

Through the work of the Leadership Succession Committee (LSC) NCSBN is actively looking at how it develops leaders to assure the future progression and viability of the organization. The LSC

presented a draft of its "Advancing Potential – Discovering the Leader Within" program designed to identify and equip potential office-holders with the tools necessary to serve in leadership roles.

The remainder of the morning we heard from the Transition to Practice Committee (TPC) and a report on uniform licensure requirements. The TPC reported on their review on the Board's position regarding transition-to-work over the past several decades and current literature. Recent literature is unanimous in calling for a one (1) year residency program for new graduates as part of the transition-to-practice process. This will take a concerted and collabora-

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rated effort between all stakeholders to design and implement such programs especially given the data provided that 90% of all academics feel their students are prepared to practice at time of graduation compared to only 10% of health system nurse leaders who say new graduates are prepared to practice.

The final presentation of the morning centered on uniform licensure requirements with the goal being to set consistent standards so the trust and responsibility of the nurse is the same through all states. To complete this task will take breaking down the responsibilities of both the applicant and the involved regulatory bodies at the time of initial application and subsequent renewals. Strong emphasis is placed on the self-disclosure of substance abuse behavior and the involvement in criminal activity. Future applicants and renewals may also

be required to disclose if action has ever been taken against professional certification or occupational licensure outside of the nursing profession.

Tuesday afternoon we spent in our specific area meetings where we further discussed the items of the morning and provided feedback. The main topic of this meeting was the five items on the Strategic Initiative draft. The level of discussion and varying opinions from board members from across the western United States was interesting to hear along with their rationale for supporting or suggesting changes to the initiatives.

Wednesday morning and early afternoon were really interesting as continued competence and regulatory authority were the main themes of the day. Continued competence seems to be the buzzword of the day with everyone attempting to determine how to measure competence in a manner that is fair and equitable to the new grad and the experienced nurse at various stages of his/her career while protecting the public. Several methods for determining competence were put forward including continuing education, peer review/performance appraisal, certification exams, patient surveys, diagnostic assessments, portfolio's, and simulation. The pros and cons of each were discussed with the only agreement being no method is going to assure 100% competence.

I still believe and tell my students the first duty of any nurse is to advocate on behalf of their patient especially when that patient cannot speak, ask questions or advocate for themselves. What I witnessed at this conference is that I am not the only nurse who still believes that. Through the work of the NCSBN and its member boards the patient and the public are still our primary focus.

As I boarded the plane for my flight home I realized I had forgotten how beautiful the City of Chicago is especially along Lake Shore Drive plus not once did I encounter a Cubs fan. Then it hit me, they were all out in Arizona watching spring training.

VOLUNTEERS NEEDED

The Arizona State Board of Nursing is seeking volunteer RNs to participate in "Measuring Competency with Simulation," a study funded by National Council of State Boards of Nursing (NCSBN) in partnership with Arizona State University, College of Nursing and Health Innovation, and Scottsdale Community College Nursing Program. The study partners are seeking recently licensed RNs (initial license in last 3 years) to engage in high-fidelity simulated care of medical-surgical patients. The Board is also seeking subject matter experts who possess a BSN or higher, 3 years experience in medical-surgical nursing, and experience evaluating the nursing care of others. If you are interested in either of these unique opportunities to participate in this landmark study, please contact Carol Frazier at 480-425-6909. For additional information visit the Board website www.azbn.gov under education/simulation study.



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The University of Arizona, College of Nursing is seeking candidates to support our educational mission. Faculty will provide nursing instruction in clinical and classroom settings to nursing students.

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Please visit the NAU recruitment website at <http://hr.nau.edu> to view a full description of the positions and the application

EDUCATION CORNER

BY PAMELA RANDOLPH RN, MS
ASSOCIATE DIRECTOR EDUCATION
AND EVIDENCE BASED REGULATION



the past year (April 1, 2009-April 1, 2010). Of those, 2450 had valid e-mail addresses and received an invitation to participate in the survey. Respondents were informed that responses were anonymous and would be recorded as aggregate data only. The survey consisted of 10 or fewer questions using "Survey Monkey". The first question was about practice then the survey asked different questions of practicing and not-practicing RNs. We chose to use the term practice instead of employment because of the Board's interest in continuing and maintaining competency through practice, whether employed

This issue's column includes excerpts from the article *Arizona State Board of Nursing Report of Newly Licensed RN's (Randolph, 2010)* available in its entirety on the Board's website www.azbn.gov. The Board initiated the survey to ascertain the extent of unemployment in nursing among newly graduated RNs.

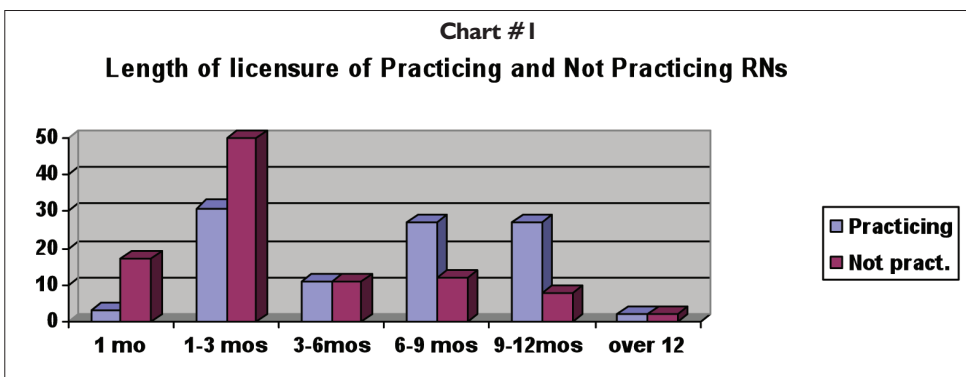
their perception of why they were not practicing, their efforts to obtain work, and what would be acceptable working conditions for them.

Results

There were 2810 RNs who took and passed the NCLEX-RN exam within

EMPLOYMENT OF NEWLY LICENSED RN'S 2010

The Arizona State Board of Nursing surveyed all persons licensed by exam (e.g. new graduates) in AZ between April 1, 2009 and April 1, 2010. The Board wanted to know how many were practicing as nurses, and where they were practicing. From those who were not practicing, the Board wanted to know



continued >>>



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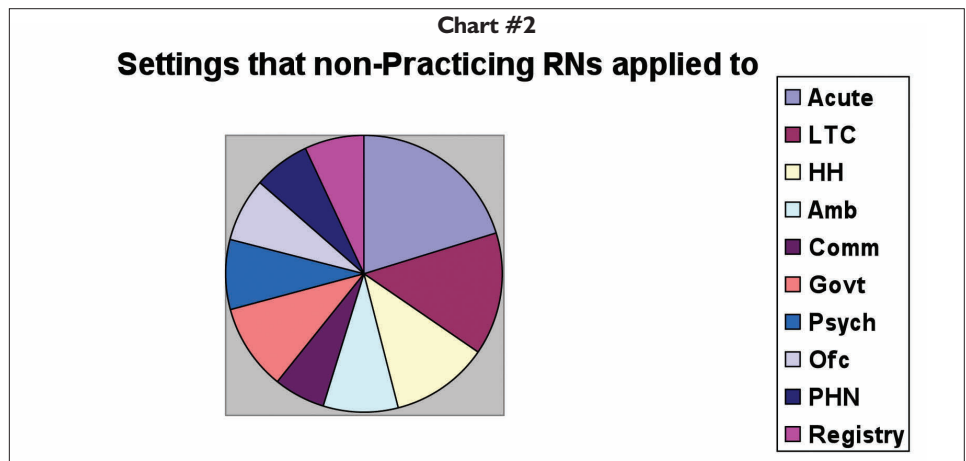
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or not. We specifically want to know how many nurses were not practicing, and therefore in danger of losing competencies gained in initial nursing education.

There were a total of 703 responses to the survey indicating a return rate of 29%. Of those responded 79.1% indicated they were practicing as an RN with 20.9% not currently practicing. This result is considered representative of the population as schools of nursing are reporting similar numbers.

Length of Licensure

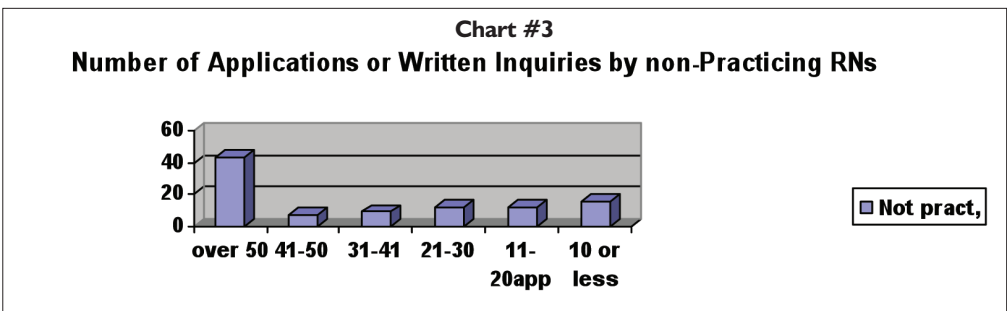
Length of licensure was different between the practicing and non-practicing groups with 67% of the non practicing nurses licensed less than 3 months versus 34% of practicing nurses.



Approximately 54% of practicing RNs have been licensed for 6 months or more compared with 20% of non-practicing RNs. Chart #1 compares percents of RNs in each category with length of licensure.

Practice Characteristics

In response to a question about practice characteristics, practicing nurses overwhelmingly have full time nursing jobs with benefits (83%). Approximately 5% have a part time job with no benefits and 4% have more than one job with at least one having benefits. Nineteen (3%) persons reported "other" conditions with 14 of those reporting a full time job without benefits. Only one nurse (0.2%) respondent reported working as a volunteer. The overwhelming majority of working new RNs have jobs in acute care (74%) with the next largest category long-term care (12%). Seven percent are working in home health. Other types of settings account for 4% or less (federal facility, academic medical center,



ambulatory care, community health, physician office).

Reasons for Not Practicing

The most often cited reason for not practicing was "not enough jobs for new RN grads in the area" (85%). One person responded that they did not choose to work and another that their

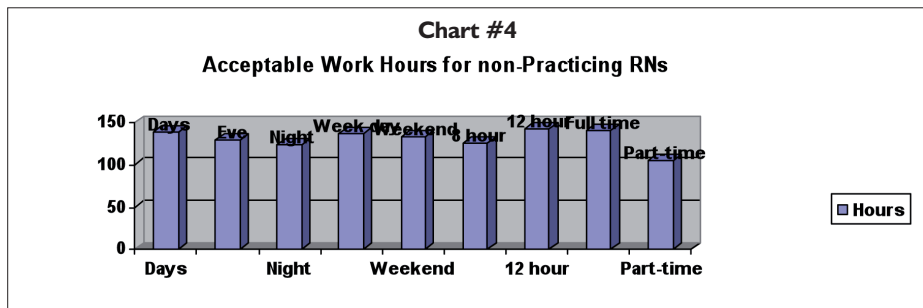
lamented the lack of jobs for new nurses in the area.

Efforts of Non-Practicing RNs to Seek Employment

Forty-three percent of non-practicing RNs have made over 50 applications or written inquiries for employment Chart #3 contains results of the query by percent of RNs.

A common misperception is that the non-working RNs are not seeking varied employment; however the Board's study revealed that they are applying to a variety of settings. When asked to select all settings that they had applied to 90% applied to acute care, 62% to long term care, 53% to home health, 44% to state and federal facilities. Six percent reported not applying for an RN position. The top 10 settings are acute care, long term care, home health, ambulatory care (not a traditional office), community health center, state or federal facility, psychiatric care, private physician or other office, public health and registry. There were 14 "other" responses. Two applied at correctional facilities and several listed all the units they applied to. One nurse reported applying for LPN and CNA jobs and one reported applying for a volunteer position. One

options for working were limited due to other obligations. There were 20 (14%) written responses in the "other" category. Seven respondents reported having a job but have not started yet. Four respondents are seeking advanced



education including medical school. One respondent is interviewing in Alaska and one is on maternity leave. One respondent wrote, "I think that being a nurse is a HORRIBLE job & do not want to work as one..EVER". Other responses

person reported being turned down by the hospital where he/she worked for the last 12 years.

Acceptable Working Conditions

Some in the industry opine that the newly licensed cannot get jobs because

continued >>>

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they are “too picky” and only will work certain units or shifts. Non-practicing nurses were asked, “If you were offered an RN job, which shifts/working hours would you accept?”. Overwhelmingly, this population would accept any shift including nights (84.5%) and weekends (91%). The lowest response for acceptable hours was part-time (72%). The highest was for 12 hour shifts (97%). Five responses to the “other” category indicated that these nurses would work anywhere, anytime.

As far as acceptable salary 53% said they would only accept the same beginning salary as other RNs in the facility. Thirty-seven percent would accept a lower salary during orientation/preceptorship for up to 6 months. Only 5.5% would work up to 6 months unpaid with a gradual increase in salary over a year. Seven comments were received to this query with four wanting a higher salary based on LPN or nurse practitioner experience. Three would take less and one stated “you could not pay me enough to work as an RN”.

Comments

All survey participants were invited to comment on the situation with 395 persons offering comment. Analysis of the first 50 responses, 30 expressed frustration with the job market and search for new RN jobs.

Conclusions

While most experts agree that the nursing shortage is not really over, there is a serious gap between the number of new RNs prepared and the number of jobs available for them. Approximately 21% of newly graduated RNs licensed in Arizona between April 1, 2009 and April 1, 2010 are not able to obtain employment in nursing. Data from this report suggests that this is not due to lack of effort or undue “selectivity” in the type of job sought. Citizens of this state invested tens of thousands of dollars into the education of each of these nurses through funding of public colleges and universities and government grants and loans. Industry invested millions in supporting the education and training of an adequate RN workforce. It is inevitable that aging nurses will eventually retire leaving the state with an unprecedented nursing shortage. If these newly licensed RNs do not obtain practice opportunities, the skills they

learned in school become lost over time. The Board of Nursing is concerned with the potential lost competencies of these non-practicing nurses and is encouraging service to craft positions so these highly valuable and educated individuals do not leave the field and are poised to meet health care needs of the future (Nurse Executive Center, 2008). It takes roughly 3-5 years to produce an RN if one counts prerequisites. We cannot afford to wait that long for care when the next wave of shortage hits.

REFERENCES

Nurse Executive Center (2008). Bridging the Preparation Practice Gap. Washington, DC: Advisory Board Company

Board Actions—Educational Programs March 2010

- Approved proposal for LPN program at Brown-Mackie College—Tucson
- Approved changes in RN program at Arizona Western College
- Approved changes in Accelerated BSN program at Northern Arizona University



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- Renewed the approval of Consolidated Learning Systems Refresher Program
- Determined that previous deficiencies were resolved at East Valley Institute of Technology and continued investigation on current complaint
- Dismissed complaint against University of Phoenix FNP program
- Reviewed changes in leadership at Everest College, Maricopa Skill Center, Apollo College and Glendale Community College
- Dismissed complaint against Mesa Community College
- Determined that previous deficiencies are resolved at Central Arizona College
- Extended approval of GateWay Fast Track LPN program

May 2010

- Approved nursing programs at Scottsdale Community College, Chandler-Gilbert Community College, and Paradise Valley Community College with a report in 6 months
- Granted provisional approval to Brookline College for an Accelerated BSN program
- Approved FNP program at University of Phoenix
- Approved LPN to BSN program at University of Phoenix with a report in 6 months
- Issued letter of concern to Mohave Community College
- Approved RN program at Mohave Community College with a report in 2 months and site visit in October 2010
- Approved program change Fortis College LPN program
- Issued Notice of Deficiency to SEVEN Academy Refresher Program
- Issued Letter of Concern to Phoenix College Nursing Assistant Program
- Issued Notice of Deficiency to Scottsdale Community College Nursing Assistant Program
- Issued Order of Probation to East Valley Institute of Technology for any future nursing program
- Dismissed complaint against Phoenix Job Corps CNA program
- Approved University of Arizona application for a site in Yuma with a report in 12 months
- Reviewed changes in administration at Apollo College and Everest College and nursing program closure report from Rio Salado College

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CNA CORNER

BY LILA VAN CUYK, RN, BSN
NURSE PRACTICE CONSULTANT/
CNA PROGRAMS

The Board has found that over the last year and a half there has been a downward trend in the first time pass rates for Nursing Assistant certification. Candidates are required to score a minimum of 75% on the written exam which consists of 72 multiple questions. For the skills exam, candidates are required to score a minimum of 80% on each task without missing any key steps. (see Table 1)

A Notice of Low Pass Rates was sent to the 48 programs that had at least 10 first time testers and who were at least 10 points below the 2009 State average. The Board also sent out a Request for Plan of Remediation to the 8 programs that had either a Written or Skills testing average below 50%.

The programs developed Plans of Remediation and did a great job in evaluating the reasons for their low pass rate and making suggestions for remediation. Wanted to share these so that all of the NA Training programs may benefit.

WRITTEN:

1. Long classroom sessions

- break up the classroom time with concurrent skill practice.
- do not have didactic over 4 hours per day.

2. Not utilizing the Candidate Handbook Vocabulary list

- learn definitions for each word.
- teach words that have high rate of being missed on written exam.

3. English is a second language

- have student take English as a second language course prior to starting NA training.
- have the student prepare the vocabulary list in English and a translation of their primary language. If this list is only the direct translation, e.g. house = casa, not the definition, the list can be taken into the State written test.

4. Cultural differences of students

- sensitivity to cultural needs and difference in learning style.

5. Low reading and/or math skill

- provide tutorial in reading and math skills prior to starting training.

- provide textbook at student reading level.

6. Students have low motivation

- interview students prior to entrance to determine if they understand the role and expectations to complete the program.

7. High turnover of instructors

- determine primary causes and strate-

gies to address.

8. Inexperienced instructors

- provide orientation, encourage enrollment in courses related to methods of teaching classroom and clinical training
- encourage enrollment for D&S Technologies Instructor Training.
- provide other appropriate teaching tools and resources.

Table 1			
2008	3895 first time testers	Written exam: 92% average	Skills exam: 78%
2009	4709 first time testers	Written exam: 86% average	Skills exam: 76%
2010 (Jan-May)	1581 first time testers	Written exam: 87% average	Skills exam: 71%



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With more than 200 beds, Flagstaff Medical Center is the only state-designated Level I Trauma Center in Northern Arizona. FMC provides state-of-the-art healthcare that includes open heart surgeries, bariatric services, the only PICU in Northern Arizona and a wide variety of out-patient services.

Verde Valley Medical Center is a 99-bed hospital with 3 satellite locations in the Verde Valley. VVMC is the only location in the Verde Valley to provide patients with on-site angioplasty and stent placement services.

We currently have opportunities for:

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Director, Cardiology (FMC)
Director, Critical Care (FMC)
Director, Emergency Services (FMC & VMC)

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9. Inconsistent teaching by instructors

- develop lesson plans for each didactic class used by all instructors.
- provide opportunities for mentoring/communication between instructors.
- hold regularly schedule faculty meetings to discuss new teaching developments.
- develop policies and procedures for conducting classroom and clinical training.

10. Written exams are of lower difficulty than the State written exam

- use instructor handbook for test questions to write initial and make-up exams that have valid, reliable questions.
- purchase practice exams at the D&S website, www.hdmaster.com for use as teaching tool or for students to practice test taking.

SKILLS:

11. Inconsistent teaching by instructors

- use Candidate Handbook and mock skills step by step testing forms when teaching skills.

12. Clinical training sight did not have the opportunity to perform required skills

- need blocks of clinical time, preferably 8 hours.
- vary the clinical training schedule to include days, evenings and weekends.
- ensure that students perform direct care activities and do not just observe instructor or staff do tasks.

13. Students learned “shortcuts” from the facility staff and no longer provided care based on classroom learning

- educate staff regarding requirement; ie students are to perform tasks as they learned in class.

14. The program has insufficient lab practice time or does not utilize the lab practice time well

- intersperse skills practice with didactic learning.
- have multiple beds/ skills stations so that all students are actively engaged.

15. Not utilizing the Candidate Handbook

- give current Handbook to each student at the start of class.
- handbooks are revised annually(April) and are available for free from D&S Technologies or it can be printed at D&S Technologies website.
- have students create study cards for each skill.

16. Instructors are not thorough in assessing skill competency

- be precise when assessing skill competency.
- give a skills final exam in addition to the final theoretical exam.
- do not rely on facility preceptors to verify competency in skills.

17. Delays in taking the certification test

- schedule test to be given at training site as soon as possible after the end of class.
- if test cost is paid by outside source request payment at start of class.
- assist students to complete the test ap-

plication to D&S Technologies and submit application.

18. Concerns related to the D&S test observers

- email concerns to D&S Technologies at hdmastereast@hdmaster.com and lvancuyk@azbn.gov.

A more in depth guideline in program assessment with more suggestions for improvement is available at the Board of Nursing website, www.azbn.gov/Education/EducationResources in the updated Suggestions for Improving NA Training Program Pass Rate.

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EFFECTIVE DATE	NAME	CERTIFICATE	DISCIPLINE	VIOLATION(S)
4/23/2010	Allen, Maya L.	CNA999994585	Stayed Suspension	Disruptive Conduct; Abusive Conduct Toward Staff
3/24/2010	Ami, Clarissa D.	CNA Applicant	Certificate Denied	Criminal Conviction; Alcohol or Other Substance Abuse; Failure to Cooperate With Board Investigation
2/18/2010	Anaya, Audriana A.	CNA1000015078	Civil Penalty	Breach of Confidentiality; Other Unprofessional Conduct; Failure to Comply with Health & Safety Requirements
3/5/2010	Arballo, Argel	CNA1000012878	Stayed Suspension	Criminal Conviction
3/17/2010	Arthur, Amy S.	CNA Applicant	Certificate Denied	Deferred Adjudication; Narcotics Violation or Other Violation of Drug Statutes; Failure to Cooperate With Board Investigation
2/11/2010	Atkinson, Jessica A.	CNA Applicant	Civil Penalty	Breach of Confidentiality; Other Unprofessional Conduct; Failure to Comply with Health & Safety Requirements
5/26/2010	Ault, Debbr E.	CNA1000024360	Civil Penalty	Criminal Conviction; Failure to Cooperate With Board Investigation
4/23/2010	Bahe, Carol L.	CNA1000002879	Revoked	Violation Of or Failure to Comply With Licensing Board Order
5/10/2010	Baldwin, Leona A.	CNA175142803	Revoked	Criminal Conviction; Violation of Federal or State Statutes, Regulation or Rules
3/15/2010	Berumen, Leandra L.	CNA1000001602	Revoked	Criminal Conviction; Violation of Federal or State Statutes, Regulation or Rules
5/10/2010	Bigler, Linda K.	CNA233089103	Revoked	Violation Of or Failure to Comply With Licensing Board Order
4/22/2010	Blanton Pierce, Kimberly	CNA542091803	Revoked	Violation Of or Failure to Comply With Licensing Board Order; Drug Screening Violation
2/24/2010	Block, Daniel R.	CNA Applicant	Certificate Denied	Criminal Conviction; Failure to Cooperate With Board Investigation; Substandard or Inadequate Care
2/22/2010	Boone, Lorraine L.	CNA1000023338	Civil Penalty	Criminal Conviction; Narcotics Violation or Other Violation of Drug Statutes
5/10/2010	Bradley, Roxanne K.	CNA999991976	Decree of Censure	Patient Abuse; Failure to Cooperate with Health & Safety Requirements; Substandard or Inadequate Care
3/18/2010	Brimhall, Courtney E.	CNA Applicant	Certificate Denied	Narcotics Violation or Other Violation of Drug Statutes; Failure to Cooperate With Board Investigation
3/15/2010	Campos, Daniel T.	CNA1000004232	Revoked	Criminal Conviction; Violation of Federal or State Statutes, Regulation or Rules
5/10/2010	Cantrell, Tammy L.	CNA1000007956	Revoked	Criminal Conviction; Non-Sexual Dual Relationship or Boundary Violation; Disruptive Conduct
5/10/2010	Castillo, Arturo R.	CNA999951391	Revoked	Patient Neglect; Patient Abuse; Fraud
3/18/2010	Chavez, Joshua A.	CNA Applicant	Certificate Denied	Criminal Conviction; Failure to Cooperate With Board Investigation
1/19/2010*	Chavez, Malinda M.	CNA Applicant	Certificate Denied	Narcotics Violation or Other Violation of Drug Statutes
3/15/2010	Connors, Monica R.	CNA214441116	Revoked	Criminal Conviction; Violation of Federal or State Statutes, Regulation or Rules
4/16/2010	Cooper, Laura L.	CNA Applicant	Civil Penalty	Nolo Contendere Plea; Patient Abandonment
5/10/2010	Cooper, Veronica	CNA999993477	Revoked	Violation Of or Failure to Comply With Licensing Board Order
3/19/2010	Cornelius, Raelee	CNA Applicant	Certificate Denied	Criminal Conviction; Narcotics Violation or Other Violation of Drug Statutes; Failure to Cooperate With Board Investigation
3/15/2010	Costa, Michael S.	CNA999995785	Revoked	Criminal Conviction; Violation of Federal or State Statutes, Regulation or Rules
3/15/2010	Cuen, Carla M.	CNA1000002062	Revoked	Unable to Practice Safely; Substandard or Inadequate Care; Negligence
4/14/2010	Dazen, Cheryl A.	CNA1000016008	Decree of Censure	Failure to Comply with Health & Safety Requirements
3/18/2010	Deaver, Deborah D.	CNA Applicant	Certificate Denied	Criminal Conviction; Fraud/Deceit or Material Omission in Obtaining License or Credentials; Failure to Cooperate With Board Investigation
5/26/2010	Dickinson, Robert R.	CNA1000014044	Revoked	Violation Of or Failure to Comply With Licensing Board Order
3/15/2010	Didenko, Nataliya V.	CNA1000003283	Revoked	Criminal Conviction; Practicing Beyond the Scope of Practice; Violation of Federal or State Statutes, Regulation or Rules
3/15/2010	Dorame, Jessica R.	CNA999999661	Revoked	Criminal Conviction; Violation of Federal or State Statutes, Regulation or Rules
3/15/2010	Elturk, Abdulrahman M.	CNA1000016690	Revoked	Non-Sexual Dual Relationship or Boundary Violation; Other Unprofessional Conduct
5/3/2010	Estrada, Cynthia	CNA Applicant	Certificate Denied	Failure to Meet the Initial Requirements of Certification
5/19/2010	Forshee, Elyse A.	CNA1000024266	Stayed Revocation	Criminal Conviction; Fraud/Deceit or Material Omission in Obtaining License or Credentials
2/25/2010	Fraiberg, Alexandria J.	CNA1000023340	Stayed Revocation w/Civil Penalty	Fraud/Deceit or Material Omission in Obtaining License or Credentials; Criminal Conviction
3/1/2010	Frieszell, Reihanna L.	CNA Applicant	Certificate Denied	Misappropriation of Patient Property or Other Property
5/10/2010	Funez, Riccy V.	CNA701889441	Revoked	Negligence; Patient Abuse; Patient Neglect
3/15/2010	Garcia, Maria C.	CNA1000016256	Revoked	Patient Abuse; Violation of Federal or State Statutes, Regulation or Rules
5/13/2010	Gary, Lisa R.	CNA Applicant	Certificate Denied	Criminal Conviction; Failure to Cooperate With Board Investigation
3/15/2010	Gilbert, Carolyn S.	CNA999951215	Revoked	Criminal Conviction; Violation of Federal or State Statutes, Regulation or Rules
12/4/2009*	Gonzalez, Cassandra E.	CNA1000001197	Civil Penalty	Failure to Meet Licensing Board Reporting Requirements; Substandard or Inadequate Care
12/30/2009*	Gonzalez, Tania M.	CNA Applicant	Certificate Denied	Unable to Practice Safely by Reason of Psychological Impairment or Mental Disorder; Failure to Cooperate With Board Investigation
4/22/2010	Grange, Cynthia S.	CNA1000023330	Revoked	Violation Of or Failure to Comply With Licensing Board Order
5/14/2010	Hall, Kelly L.	CNA Applicant	Certificate Denied	Violation of Federal or State Statutes, Regulation or Rules; Failure to Cooperate With Board Investigation
11/24/2009*	Hall, Thad D.	CNA Applicant	Certificate Denied	Narcotics Violation or Other Violation of Drug Statutes; Criminal Conviction; Failure to Cooperate With Board Investigation
4/28/2010	Hamm, Mary L.	CNA181877500	Stayed Revocation w/Civil Penalty	Patient Abuse
3/11/2010	Harms, Christine E.	CNA Applicant	Certificate Denied	Fraud/Deceit or Material Omission in Obtaining License or Credentials; Failure to Cooperate With Board Investigation; Criminal Conviction
4/17/2010	Henriquez, Dionne L.	CNA1000023962	Civil Penalty	Criminal Conviction
2/10/2010	Hernandez, Rojelio	CNA1000014696	Voluntary Surrender	Sexual Misconduct; Conduct Evidencing Moral Unfitness; Violation of or Failure to Comply with Licensing Board Order
3/8/2010	Herrera, Trashunda N.	CNA1000024155	Civil Penalty	Failure to Cooperate With Board Investigation; Criminal Conviction; Narcotics Violation or Other Violation of Drug Statutes
3/24/2010	Horvatch, Sherilyn E.	CNA Applicant	Certificate Denied	Criminal Conviction; Failure to Cooperate With Board Investigation; Alcohol or Other Substance Abuse
3/15/2010	Hoskins, Chichi N.	CNA999994104	Revoked	Criminal Conviction; Violation of Federal or State Statutes, Regulation or Rules
5/10/2010	Howard, Carey G.	CNA1000016118	Revoked	Patient Abuse

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EDUCATION AND TRAINING:

- Current AZ RN License (required).
- CPR/BLS certification (required).
- ACLS certification (required).
- PALS certification (required).
- S.T.A.B.L.E. certification (required).
- NRP certification (required).
- Minimum 1 years RN experience in an acute care setting (required).

Contact:

Lola Gray 928-532-6367 ph 928-532-8995 fax
lgray@summithealthcare.net
2200 E. Show Low Lake Road
Show Low AZ 85901
www.summithealthcare.net



EFFECTIVE DATE	NAME	CERTIFICATE	DISCIPLINE	VIOLATION(S)
5/10/2010	Ingram, Verlyn R.	CNA837249266	Revoked	Criminal Conviction; Violation of Federal or State Statutes, Regulation or Rules
5/21/2010	James, Sherry A.	CNA1000006859	Stayed Suspension	Criminal Conviction; Violation of Federal or State Statutes, Regulation or Rules; Alcohol or Other Substance Abuse
5/14/2010	Johnson, Gregory D.	CNA Applicant	Certificate Denied	Failure to Meet Licensing Board Reporting Requirements; Failure to Cooperate With Board Investigation
3/9/2010	Jordan, Cher A.	CNA Applicant	Certificate Denied	Criminal Conviction; Failure to Cooperate With Board Investigation
3/24/2010	Jose, Gary J.	CNA Applicant	Certificate Denied	Failure to Cooperate With Board Investigation; Violation of Federal or State Statutes, Regulation or Rules
5/10/2010	July, Markisha A.	CNA1000001559	Revoked	Criminal Conviction
5/10/2010	Kearns, Katrina	CNA999947666	Revoked	Patient Abuse
2/16/2010	Keller, Jacqueline	CNA1000014787	Revoked	Violation Of or Failure to Comply With Licensing Board Order; Drug Screening Violation
2/21/2010	King, Amber J.	CNA1000023435	Civil Penalty	Criminal Conviction; Failure to Cooperate With Board Investigation
3/15/2010	Kouri, Natasha L.	CNA1000013394	Revoked	Failure to Comply with Health & Safety Requirements; Violation Of or Failure to Comply With Licensing Board Order; Violation of Federal or State Statutes, Regulation or Rules
2/4/2010	Kuku, Maria A.	CNA1000012567	Civil Penalty	Fraud/Deceit or Material Omission in Obtaining License or Credentials
3/9/2010	Labranche, Theresa A.	CNA Applicant	Certificate Denied	Patient Neglect; Failure to Cooperate With Board Investigation
12/15/2009*	Lamas, Paul C.	CNA1000023284	Civil Penalty	Failure to Cooperate With Board Investigation; Criminal Conviction
2/4/2010	Laos, Jessica A.	CNA Applicant	Certificate Denied	Criminal Conviction; Alcohol or Other Substance Abuse
2/18/2010	Lee, Wendy J.	CNA1000013334	Revoked	Violation Of or Failure to Comply With Licensing Board Order
3/18/2010	Lent, Marion A.	CNA Applicant	Certificate Denied	Violation of Federal or State Statutes, Regulation or Rules; Failure to Cooperate With Board Investigation
11/10/2009*	Lewis, Luamart R.	CNA Applicant	Certificate Denied	Criminal Conviction; Failure to Cooperate With Board Investigation
3/18/2010	Loya, Homero C.	CNA Applicant	Certificate Denied	Failure to Cooperate With Board Investigation; Criminal Conviction
5/10/2010	Macdonald, Elizabeth A.	CNA1000003581	Revoked	Violation Of or Failure to Comply With Licensing Board Order
4/15/2010	Madril, Denise C.	CNA1000007821	Revoked	Violation Of or Failure to Comply With Licensing Board Order
2/8/2010	Mailboy, Vivian	CNA1000011881	Stayed Revocation	Patient Abuse
5/10/2010	Maples, Brandi D.	CNA1000002219	Revoked	Criminal Conviction; Violation of Federal or State Statutes, Regulation or Rules
12/28/2009*	Martinez, Veronica L.	CNA384999817	Civil Penalty	Failure to Meet Licensing Board Reporting Requirements; Criminal Conviction
3/9/2010	Mcculler, Marla M.	CNA Applicant	Civil Penalty	Criminal Conviction
3/15/2010	Mcguire, Shannon M.	CNA999996770	Revoked	Criminal Conviction; Violation of Federal or State Statutes, Regulation or Rules; Failure to Cooperate With Board Investigation
4/23/2010	Mendoza, Maria T.	CNA1000006872	Stayed Revocation	Substandard or Inadequate Care; Disruptive Conduct
3/24/2010	Miller, Kimberly A.	CNA Applicant	Certificate Denied	Criminal Conviction; Failure to Cooperate With Board Investigation
3/15/2010	Mills, David A.	CNA1000000641	Revoked	Patient Abuse; Failure to Maintain Adequate or Accurate Records; Violation of Federal or State Statutes, Regulation or Rules

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- Clinical Nurse Specialist, Pain Management
- ED RNs, Experienced
- Home Health RN, Pediatrics
- NP, CT Surgery
- NP, Neurosurgery
- NP, Trauma
- OR RNs, Experienced

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EFFECTIVE DATE	NAME	CERTIFICATE	DISCIPLINE	VIOLATION(S)
3/23/2010	Molina, Virginia	CNA999993439	Decree of Censure	Criminal Conviction; Failure to Cooperate With Board Investigation; Violation of Federal or State Statutes, Regulation or Rules
5/10/2010	Moody, Roddrick	CNA1000001233	Revoked	Patient Abuse; Disruptive Conduct
4/15/2010	Moore, Christine E.	CNA1000000656	Revoked	Violation of or Failure to Comply with Licensing Board Order; Drug Screening Violation
2/26/2010	Mundell, Laura J.	CNA1000023431	Civil Penalty	Fraud/Deceit or Material Omission in Obtaining License or Credentials; Criminal Conviction
4/28/2010	Muraya, Joyce W.	CNA1000013605	Civil Penalty	Patient Abuse; Substandard or Inadequate Care
4/21/2010	Muro, Kristine M.	CNA999993192	Stayed Revocation w/Civil Penalty	Patient Abuse
5/10/2010	Myers, Katherine A.	CNA1000012510	Revoked	Filing False Reports or Falsifying Records; Failure to Cooperate With Board Investigation
3/18/2010	Ondimu, Erin E.	CNA Applicant	Certificate Denied	Criminal Conviction
4/8/2010	Opitz, Laverne A.	CNA Applicant	Certificate Denied	Failure to Meet the Initial Requirements of Certification; Criminal Conviction; Fraud/Deceit or Material Omission in Obtaining License or Credentials
3/15/2010	Ortiz, Jose L.	CNA183496953	Revoked	Criminal Conviction; Violation of Federal or State Statutes, Regulation or Rules
3/31/2010	Parisi, Aileen M.	CNA375213514	Decree of Censure	Patient Abuse
5/14/2010	Payne, Charn M.	CNA Applicant	Certificate Denied	Alcohol or Other Substance Abuse; Narcotics Violation or Other Violation of Drug Statutes
2/12/2010	Peper, John S.	CNA1000023331	Civil Penalty	Criminal Conviction; Narcotics Violation or Other Violation of Drug Statutes
3/25/2010	Perry, Sara A.	CNA1000003157	Voluntary Surrender	Diversion of Controlled Substance; Alcohol or Other Substance Abuse; Immediate Threat to Health or Safety
5/10/2010	Pierce, Stephanie A.	CNA1000010472	Revoked	Patient Abandonment; Failure to Cooperate With Board Investigation; Fraud
4/28/2010	Reade, Todd A.	CNA1000024051	Stayed Revocation	Alcohol or Other Substance Abuse; Criminal Conviction
2/17/2010	Regan, Eric M.	CNA1000000086	Voluntary Surrender	Sexual Misconduct; Disruptive Conduct; Violation Of or Failure to Comply With Licensing Board Order
5/20/2010	Riddle, Sara E.	CNA1000004288	Civil Penalty	Criminal Conviction; Violation of Federal or State Statutes, Regulation or Rules; Failure to Comply with Health & Safety Requirements
4/19/2010	Roberson, Liesl E.	CNA803787203	Revoked	Violation Of or Failure to Comply With Licensing Board Order
5/20/2010	Saint Angelo, Ramey	CNA028023803	Decree of Censure	Unprofessional Conduct
4/10/2010	Sam, Sahr	CNA1000023899	Civil Penalty	Disruptive Conduct
3/19/2010	Savage, Rhett S.	CNA Applicant	Certificate Denied	Violation of Federal or State Statutes, Regulation or Rules; Failure to Cooperate With Board Investigation
3/15/2010	Schulz, Virginia E.	CNA1000000062	Revoked	Violation of Federal or State Statutes, Regulation or Rules; Failure to Cooperate With Board Investigation
3/15/2010	Seng, Raksmev C.	CNA1000011512	Revoked	Criminal Conviction; Violation of Federal or State Statutes, Regulation or Rules
5/10/2010	Shannon, Arnold D.	CNA790158819	Revoked	Sexual Misconduct; Abusive Conduct Toward Staff; Fraud
3/15/2010	Simpson, Angela M.	CNA999990236	Revoked	Violation of Federal or State Statutes, Regulation or Rules; Criminal Conviction
5/19/2010	Singleton, Heather A.	CNA Applicant	Certificate Denied	Failure to Meet the Initial Requirements of Certification; Violation Of or Failure to Comply With Licensing Board Order
5/3/2010	Smith, Wendy A.	CNA1000024128	Civil Penalty	Criminal Conviction; Narcotics Violation or Other Violation of Drug Statutes
4/23/2010	Sosa Nunez, Angela	CNA1000015171	Revoked	Violation Of or Failure to Comply With Licensing Board Order
4/19/2010	Sova, Paul J.	CNA105208627	Revoked	Violation Of or Failure to Comply With Licensing Board Order
3/23/2010	Stevens, Joan P.	CNA1000017801	Decree of Censure	Other Unprofessional Conduct; Patient Abuse; Disruptive Conduct
11/4/2009*	Stevens, Lydia L.	CNA Applicant	Certificate Denied	Criminal Conviction; Failure to Meet the Initial Requirements of Certification; Fraud
5/12/2010	Suppo, Courtney A.	CNA Applicant	Certificate Denied	Failure to Cooperate With Board Investigation
3/15/2010	Tomlin, Clifford O.	CNA999998119	Revoked	Violation Of or Failure to Comply With Licensing Board Order; Sexual Misconduct; Patient Neglect
3/15/2010	Toolooze, Amanda M.	CNA999951506	Stayed Revocation	Criminal Conviction; Substandard or Inadequate Care
4/26/2010	Tornquist, Nicholas A.	CNA1000013226	Civil Penalty	Criminal Conviction; Substandard or Inadequate Care
3/15/2010	Villalobos, Meagan D.	CNA1000016338	Revoked	Criminal Conviction; Violation of Federal or State Statutes, Regulation or Rules
3/10/2010	Vitollo, Roseann S.	CNA Applicant	Certificate Denied	Criminal Conviction; Fraud/Deceit or Material Omission in Obtaining License or Credentials; Unable to Practice Safely
4/12/2010	Walker, Fred C.	CNA1000004597	Revoked	Violation Of or Failure to Comply With Licensing Board Order; Drug Screening Violation
4/20/2010	Wooten, Celeste P.	CNA999950504	Stayed Revocation w/Civil Penalty	Patient Abuse
5/10/2010	Wright, Davina Y.	CNA1000019373	Revoked	Patient Neglect

CNA Discipline - ACTION CLEARED FEBRUARY- MAY 2010

EFFECTIVE DATE	NAME	LICENSE	EFFECTIVE DATE	NAME	LICENSE
3/29/2010	Almada, Ana R.	CNA1000010715	3/25/2010	Vazquez, Martha M.	CNA1000010048
2/5/2010	Rascon, Stephanie A.	CNA999991015	4/20/2010	Verdugo, Micaela	CNA1000006420
3/30/2010	Renteria, Pamela A.	CNA1000018011	3/24/2010	Waddell, Andrea L.	CNA753238803
			3/23/2010	Waller, Lisa D.	CNA1000011792

RN/LPN DISCIPLINARY ACTION

FEBRUARY-MARCH-APRIL-MAY 2010

EFFECTIVE DATE	NAME	CERTIFICATE	DISCIPLINE	VIOLATION(S)
4/28/2010	Albro, Traci L.	LPN Endorsement	Probation	License Revocation, Suspension or Other Disciplinary Action Taken by a Federal, State or Local Licensing Authority
5/20/2010	Allen, Bryan K.	RN081433/LP016930	Probation	Criminal Conviction
3/29/2010	Amaya, Renee E.	RN133880	Stayed Revocation with Suspension	Unable to Practice Safely by Reason of Alcohol or Other Substance Abuse, Diversion of Controlled Substance
5/10/2010	Anderson, Kristian K.	RN082958	Revocation	Failure to Comply With Licensing Board Order

continued >>>

EFFECTIVE DATE	NAME	CERTIFICATE	DISCIPLINE	VIOLATION(S)
5/10/2010	Andrews Jr, Vernon	LP022843	Revocation	License Revocation, Suspension or Other Disciplinary Action Taken by a Federal, State or Local Licensing Authority
2/26/2010	Arens, Rebekah S.	LP042446	Decree of Censure	Non-Sexual Dual Relationship or Boundary Violation
3/10/2010	Baker, Pamela	RN137030	Voluntary Surrender	License Revocation, Suspension or Other Disciplinary Action Taken by a Federal, State or Local Licensing Authority, Fraud, Deceit or Material Omission in Obtaining License or Credentials, Unable to Practice Safely by Reason of Alcohol or Other Substance Abuse
5/10/2010	Balmer, Brienna L.	RN141825	Revocation	Failure to Comply With Licensing Board Order
2/5/2010	Barger, Kathy L.	RN090512/LP029269/ CNA533158990	Decree of Censure	Substandard or Inadequate Care, Practicing Beyond the Scope of Practice
2/23/2010	Bartram, Elizabeth M.	RN057874	Decree of Censure	Non-Sexual Dual Relationship or Boundary Violation
5/10/2010	Baxter, Thomas A.	RN071722	Revocation	Failure to Comply With Licensing Board Order
4/22/2010	Beaumont, Julie	RN086492/LP028393	Stayed Revocation with Suspension	Unable to Practice Safely by Reason of Alcohol or Other Substance Abuse
2/5/2010	Bell, Janice K.	RN054213/AP0046	Voluntary Surrender	Unable to Practice Safely by Reason of Alcohol or Other Substance Abuse
2/8/2010	Bender, Carey J.	LP022599	Decree of Censure	Substandard or Inadequate Care
4/2/2010	Berens, Barbara A.	RN022527	Decree of Censure	Inappropriate or Inadequate Supervision or Delegation
3/5/2010	Bethea, Vivian D.	LPN Endorsement	License Denied	Failure to Cooperate With Board Investigation
3/8/2010	Beyerlein, Ellen J.	RN122412	Stayed Revocation with Suspension	Unable to Practice Safely by Reason of Alcohol or Other Substance Abuse
3/31/2010	Blakney, Jeffrey L.	RN131380	Probation	Narcotics Violation or Other Violation of Drug Statutes, Drug Screening Violation, Positive Drug Screen Without a Valid Prescription
3/23/2010	Blucker, Mark D.	RN130134	Probation	Substandard or Inadequate Care
5/10/2010	Bluestein, Marla N.	RN000099181	Revocation	Failure to Comply With Licensing Board Order
4/9/2010	Booth, Colleen	LP036438	Probation	Criminal Conviction, Substance Abuse
2/10/2010	Bounds, Jo A.	RN097382/LP031052/ CNA598910641	Probation	Violation of Federal or State Statutes, Regulation or Rules, Narcotics Violation or Other Violation of Drug Statutes
2/11/2010	Branham, Erik C.	RN128741	Decree of Censure	Practicing Beyond the Scope of Practice
4/12/2010	Brent, Catherine D.	LP037622/ CNA159162103	Revocation	Failure to Comply With Licensing Board Order, Drug Screening Violation, Unable to Practice Safely by Reason of Alcohol or Other Substance Abuse
2/22/2010	Brown, Donna M.	LP043959	Probation	Substandard or Inadequate Care, Negligence, Narcotics Violation or Other Violation of Drug Statutes
4/29/2010	Brown, Donna M.	LP043959	Voluntary Surrender	Failure to Comply With Licensing Board Order
5/19/2010	Brown, Kelly L.	RN145183	Voluntary Surrender	License Revocation, Suspension or Other Disciplinary Action Taken by a Federal, State or Local Licensing Authority
3/18/2010	Bruce, Julie A.	LPN Endorsement	License Denied	Misappropriation of Patient Property or Other Property
5/10/2010	Bryant-Deconcini, Sara W.	RN053547	Revocation	Unable to Practice Safely by Reason of Alcohol or Other Substance Abuse
5/20/2010	Burkhalter, Travis L.	RN112921/ CNA999949638	Probation	Criminal Conviction
3/11/2010	Calhoun, Joann	RN133530	Probation	Substance Abuse
2/2/2010	Carroll, Jewell M.	LP030059	Decree of Censure	Failure to Maintain Records or Provide Medical, Financial or Other Required Information, Failure to Comply With Health & Safety Requirements
5/10/2010	Carter, Jennifer R.	RN120243	Revocation	Failure to Comply With Licensing Board Order
3/23/2010	Casey, Antonia	RN121235	Voluntary Surrender	Unable to Practice Safely by Reason of Alcohol or Other Substance Abuse
3/5/2010	Cash, Mary A.	RN146825/AP2769	Summary/ Emergency Suspension	Immediate Threat to Health or Safety, Narcotics Violation or Other Violation of Drug Statutes, Unauthorized Prescribing Medicine (APRN)
3/15/2010	Chapman, Marcia L.	RN046798	Revocation	Failure to Comply With Licensing Board Order
4/22/2010	Chaprnka, Lynda E.	RN114563	Revocation	Failure to Comply With Licensing Board Order, Drug Screening Violation
4/15/2010	Clark Hentz, Zarifa W.	LP045862	Civil Penalty	Criminal Conviction
2/10/2010	Clinit-Echeveste, Cecilia	RN023026	Voluntary Surrender	Failure to Comply With Licensing Board Order
4/22/2010	Clouse, Susan A.	RN076271	Revocation	Failure to Comply With Licensing Board Order, Drug Screening Violation
3/15/2010	Cohagen, Jennie S.	RN052003	Revocation	Unable to Practice Safely by Reason of Alcohol or Other Substance Abuse, Diversion of Controlled Substance, Failure to Cooperate With Board Investigation
5/20/2010	Collins, Roberta E.	RN102179	Stayed Revocation with Probation	Substance Abuse, Failure to Cooperate With Board Investigation, Criminal Conviction
5/10/2010	Cooper, Karen R.	RN040746	Revocation	Failure to Comply With Licensing Board Order
4/26/2010	Costello, Gina M.	Compact - RN, CO	Voluntary Surrender Privilege to Practice	Unable to Practice Safely by Reason of Alcohol or Other Substance Abuse
2/18/2010	Cota, David M.	RN114848/ LP034555/	Probation	Violation Of or Failure to Comply With Licensing Board Order
3/17/2010	Curry, Gayle M.	RN Endorsement	License Denied	Violation of Federal or State Statutes, Regulation or Rules, Failure to Cooperate With Board Investigation
3/15/2010	Dagenet, Andrew P.	LP043330/ CNA1000005034	Revocation	Failure to Maintain Records or Provide Medical, Financial or Other Required Information, Violation of Federal or State Statutes, Regulation or Rules
4/14/2010	Dare, Susan E.	RN125777	Stayed Revocation with Probation	Failure to Comply With Licensing Board Order, Unable to Practice Safely by Reason of Alcohol or Other Substance Abuse
3/15/2010	Dartt, Raquel L.	RN126959	Civil Penalty	Violation of Federal or State Statutes, Regulation or Rules
3/16/2010	Dawson, Lynette M.	LPN Endorsement	License Denied	Unable to Practice Safely by Reason of Alcohol or Other Substance Abuse
2/24/2010	DeElena, Barbara A.	RN162243	Civil Penalty	Violation of Federal or State Statutes, Regulation or Rules, Narcotics Violation or Other Violation of Drug Statutes
3/15/2010	Demlong, Bonnie M.	RN101123	Revocation	Unable to Practice Safely, Error in Prescribing, Dispensing or Administering Medication, Failure to Maintain Records or Provide Medical, Financial or Other Required Information
4/22/2010	Di Cola, Allison M.	RN162914	Probation	Criminal Conviction, Failure to Cooperate With Board Investigation
2/14/2010	Dillingham, Amy M.	RN128060/	Decree of Censure	Practicing Beyond the Scope of Practice
5/5/2010	Dobbs, Peggy A.	LP030414	Voluntary Surrender	Failure to Comply With Licensing Board Order
2/12/2010	Dority, Dena M.	RN113431	Voluntary Surrender	Failure to Comply With Health & Safety Requirements
3/15/2010	Dunn, Gary	RN143011	Revocation	Unable to Practice Safely, Failure to Maintain Adequate or Accurate Records, Failure to Cooperate With Board Investigation
3/25/2010	Ebuen, Sylvia R.	RN088219	Probation	Unable to Practice Safely
2/22/2010	Erdman, Shawn S.	RN143958	Stayed Revocation with Probation	Substance Abuse
5/14/2010	Fincher, Cassandra A.	RN149717	Probation	Unprofessional Conduct
3/23/2010	Foley, Laura G.	LP036769	Decree of Censure	Unable to Practice Safely
3/8/2010	From, Barbara A.	RN141138	Stayed Revocation with Probation	Substance Abuse
4/12/2010	From, Barbara A.	RN141138	Revocation	Failure to Comply With Licensing Board Order, Unable to Practice Safely by Reason of Alcohol or Other Substance Abuse

EFFECTIVE DATE	NAME	CERTIFICATE	DISCIPLINE	VIOLATION(S)
3/15/2010	Garcia, Amy M.	RN139882/ LP041195	Revocation	Unable to Practice Safely by Reason of Alcohol or Other Substance Abuse, Diversion of Controlled Substance, Failure to Comply With Licensing Board Order
5/10/2010	Garrett, Lisa K.	RN093124	Revocation	Unable to Practice Safely by Reason of Alcohol or Other Substance Abuse, Failure to Comply With Licensing Board Order
4/22/2010	Gaul, Jessica L.	LP045043/ CNA999948145	Revocation	Failure to Comply With Licensing Board Order
4/7/2010	Gleaves, Mary E.	RN109091	Civil Penalty	Filing False Reports or Falsifying Records
4/19/2010	Gloria, Joseph M.	RN151540	Voluntary Surrender	Unable to Practice Safely by Reason of Alcohol or Other Substance Abuse, Diversion of Controlled Substance
3/15/2010	Gonzalez, Tamara	LP031633	Revocation	Criminal Conviction, Violation of Federal or State Statutes, Regulation or Rules
4/14/2010	Gordon, Carlene J.	LP015052	Voluntary Surrender	Unable to Practice Safely by Reason of Physical Illness or Impairment, Unable to Practice Safely by Reason of Psychological Impairment or Mental Disorder
3/15/2010	Graveske, Mary	RN142741	Suspension	Unable to Practice Safely
4/2/2010	Greenlee, Deborah A.	RN130021	Voluntary Surrender	Practicing Beyond the Scope of Practice, Substandard or Inadequate Care, Unauthorized Administration of Medication
3/25/2010	Greer, Geraldine A.	RN132404	Civil Penalty	Violation of Federal or State Statutes, Regulation or Rules, Criminal Conviction
5/18/2010	Greer, Jillian L.	RN152545/ CNA999999543	Voluntary Surrender	Failure to Comply With Licensing Board Order, Drug Screening Violation, Unable to Practice Safely by Reason of Alcohol or Other Substance Abuse
5/20/2010	Hall, Cherise L.	LP043265/ CNA1000001638	Civil Penalty	Criminal Conviction, Failure to Cooperate With Board Investigation
3/3/2010	Hamilton, Brittani K.	RN137760/AP3220	Probation	Practicing Beyond the Scope of Practice, Failure to Maintain Records or Provide Medical, Financial or Other Required Information, Substandard or Inadequate Care
1/7/2010*	Hansen, Robin L.	RN132403/LP038227	Decree of Censure	Substandard or Inadequate Care
2/22/2010	Harris, Victoria A.	RN037477	Suspension	Unable to Practice Safely
3/26/2010	Hayden, Denise M.	RN137173	Voluntary Surrender	Failure to Comply With Licensing Board Order, Unable to Practice Safely, Error in Prescribing, Dispensing or Administering Medication
3/15/2010	Hayes, Emma M.	LP030036	Revocation	Substandard or Inadequate Care, Patient Neglect, Failure to Cooperate With Board Investigation
2/18/2010	Hill, Kamara A.	LP046290/ CNA1000018544	Civil Penalty	Violation of Federal or State Statutes, Regulation or Rules, Criminal Conviction
2/8/2010	Howard, Curt B.	RN112908	Probation	Narcotics Violation or Other Violation of Drug Statutes, Unauthorized Dispensing of Medication
4/2/2010	Hughes, Jane L.	RN087419	Stayed Suspension with Probation	Violation of Federal or State Statutes, Regulation or Rules, Unprofessional Conduct
5/10/2010	Hyman, Marlene R.	RN086981	Probation	Failure to Meet Licensing Board Reporting Requirements, Failure to Maintain Adequate or Accurate Records, Substance Abuse
5/10/2010	Ibeabuchi, Patricia N.	RN102251	Revocation	Unable to Practice Safely
5/10/2010	Inman, Phyllis A.	RN126093	Revocation	License Revocation, Suspension or Other Disciplinary Action Taken by a Federal, State or Local Licensing Authority, Fraud, Deceit or Material Omission in Obtaining License or Credentials, Substandard or Inadequate Care
2/23/2010	Iwuajoku, Andrew	RN139004/ LP037511/ CNA546264441	Decree of Censure	Failure to Comply With Health & Safety Requirements, Substandard or Inadequate Care
5/21/2010	James, Nicholas F.	RN103708	Reissuance with Stayed Suspension Probation	License Revocation, Suspension or Other Disciplinary Action Taken by a Federal, State or Local Licensing Authority
3/15/2010	Jesmer, Karen A.	RN101521	Revocation	Criminal Conviction, Violation of Federal or State Statutes, Regulation or Rules
3/15/2010	Johnson, Danette L.	RN154190	Revocation	Failure to Comply With Licensing Board Order
4/19/2010	Johnson, Rebecca W.	RN057760	Revocation	Failure to Comply With Licensing Board Order
4/29/2010	Jorgensen, Karen	RN131691	Voluntary Surrender	Failure to Comply With Licensing Board Order
5/10/2010	Kastigar, Belinda D.	RN112850	Revocation	Narcotics Violation or Other Violation of Drug Statutes, Failure to Cooperate With Board Investigation, Violation of Federal or State Statutes, Regulation or Rules
3/11/2010	Kinder, Michael C.	RN106172	Voluntary Surrender	Failure to Comply With Licensing Board Order
5/20/2010	Klemmer, Jane R.	RN125191/AP1989	Decree of Censure	Inappropriate or Inadequate Supervision or Delegation
3/9/2010	Krukowski, Theresa A.	RN113574	Civil Penalty	Violation of Federal or State Statutes, Regulation or Rules
3/3/2010	Laabs, Cynthia H.	RN057704/AP2172	Decree of Censure	Substandard or Inadequate Care
2/15/2010	Lacambra, Norman N.	LP030186/	Probation	Diversion of Controlled Substance, Substance Abuse
5/10/2010	Lage, Judith A.	RN129454	Revocation	Substandard or Inadequate Care, Failure to Maintain Records or Provide Medical, Financial or Other Required Information, Narcotics Violation or Other Violation of Drug Statutes
5/21/2010	Leader, Julie A.	RN137139/AP2660	Decree of Censure	Misrepresentation of Credentials
2/8/2010	Leckrone, Julie A.	RN092413	Probation	Substance Abuse
5/5/2010	Leckrone, Julie A.	RN092413	Stayed Revocation Suspension	Failure to Comply With Licensing Board Order, Drug Screening Violation; Unable to Practice Safely by Reason of Alcohol or Other Substance Abuse
4/28/2010	Linder, Daniel W.	RN122070	Probation	Failure to Maintain Adequate or Accurate Records, Drug Screening Violation
5/11/2010	Lively, Elizabeth D.	RN126055	Civil Penalty	Violation of Federal or State Statutes, Regulation or Rules, Criminal Conviction
3/25/2010	Lopez, Mary F.	RN119733	Stayed Revocation with Probation	Error in Prescribing, Dispensing or Administering Medication
3/5/2010	Maas, Shauna L.	RN138226	Probation	Substandard or Inadequate Care
5/25/2010	Mahn, Deborah H.	RN075227/ LP024211/ CNA722693803	Decree of Censure	Failure to Maintain Adequate or Accurate Records
5/12/2010	Maloney, Violet S.	RN150824	Probation	Deferred Adjudication; Substance Abuse
4/1/2010	Manning, Lisa M.	LP046415	Probation	License Revocation, Suspension or Other Disciplinary Action Taken by a Federal, State or Local Licensing Authority
2/11/2010	Mayo, Yvette M.	RN117146/ CNA567971614	Probation	Substance Abuse
5/10/2010	McCullum, Jennifer A.	RN133341	Revocation	Unable to Practice Safely by Reason of Alcohol or Other Substance Abuse, Diversion of Controlled Substance
4/29/2010	McGee, Michelle E.	RN123587	Decree of Censure	Practicing Beyond the Scope of Practice
5/10/2010	McGraw, Jason K.	RN156778	Revocation	Unable to Practice Safely by Reason of Alcohol or Other Substance Abuse, Violation of Federal or State Statutes, Regulation or Rules
3/9/2010	Mckee, Theresa A.	LPN Endorsement	License Denied	Failure to Comply With Licensing Board Order; Unable to Practice Safely by Reason of Alcohol or Other Substance Abuse
4/13/2010	McPheron, Kristi L.	LP044186	Revocation	Failure to Comply With Licensing Board Order; Drug Screening Violation

EFFECTIVE DATE	NAME	CERTIFICATE	DISCIPLINE	VIOLATION(S)
4/10/2010	McPherson, Cyndi J.	RN075808	Stayed Suspension with Probation	Failure to Comply With Licensing Board Order; Substance Abuse
3/16/2010	Meyer, Andy M.	RN162425	Civil Penalty	Violation of Federal or State Statutes, Regulation or Rules
3/24/2010	Michael, Leasa M.	RN156154	Suspension	Disruptive Conduct, Conduct Evidencing Ethical Unfitness, Unable to Practice Safely by Reason of Alcohol or Other Substance Abuse
3/9/2010	Millsap-smith, Carolyn L.	LP033934	Probation	Criminal Conviction, Substance Abuse
4/21/2010	Modlin, Tanja	RN00099318	Decree of Censure	Substandard or Inadequate Care
5/10/2010	Monson, Samantha V.	LP038946/ CNA999987997	Revocation	Unable to Practice Safely by Reason of Alcohol or Other Substance Abuse, Failure to Comply With Licensing Board Order
2/18/2010	Mostafa, Barbara A.	LPN Endorsement	Civil Penalty	Criminal Conviction, License Revocation, Suspension or Other Disciplinary Action Taken by a Federal, State or Local Licensing Authority
4/23/2010	Nixon, Sara M.	RN144240	Probation	Failure to Maintain Adequate or Accurate Records, Narcotics Violation or Other Violation of Drug Statutes, Failure to Comply With Health & Safety Requirements
3/15/2010	Norton, Gilsomena M.	RN104729	Decree of Censure	Fraud, Violation of Federal or State Statutes, Regulation or Rules
5/10/2010	Nunes, Debbie	LP031808	Revocation	Unable to Practice Safely by Reason of Alcohol or Other Substance Abuse, Violation of Federal or State Statutes, Regulation or Rules
2/18/2010	Omoth, Beverly B.	LP040471	Decree of Censure	Practicing Beyond the Scope of Practice
2/5/2010	Opuroku, Ezekiel T.	TRN162082	Stayed Revocation Probation	License Revocation, Suspension or Other Disciplinary Action Taken by a Federal, State or Local Licensing Authority, Criminal Conviction
4/4/2010	Owens, M Susan	RN148401	Decree of Censure	Substandard or Inadequate Care
4/21/2010	Paret, Jacquelyn S.	RN152917	Civil Penalty	Criminal Conviction
4/13/2010	Parker, Les P.	RN103137	Revocation	Failure to Comply With Licensing Board Order, Drug Screening Violation
3/4/2010	Parsons, Lori A.	Compact, RN - MD (R180221)	Voluntary Surrender Privilege to Practice	Diversion of Controlled Substance, Unable to Practice Safely by Reason of Alcohol or Other Substance Abuse, Immediate Threat to Health or Safety
4/29/2010	Peguero, Natalie M.	RN139267	Probation	Violation of Federal or State Statutes, Regulation or Rules, Failure to Cooperate With Board Investigation, Criminal Conviction
5/14/2010	Pelletier, Michael E.	RN104316	Decree of Censure	Failure to Maintain Records or Provide Medical, Financial or Other Required Information, Substandard or Inadequate Care
3/26/2010	Porter, S R.	Reissuance Applicant (RN047044)	Reissuance Denied	Criminal Conviction, Fraud/Deceit or Material Omission in Obtaining License or Credentials
3/15/2010	Pringle, Julie	RN078420/ LP023383	Revocation	Failure to Comply With Licensing Board Order, Unable to Practice Safely by Reason of Alcohol or Other Substance Abuse
4/16/2010	Quinn, Delora J.	LP042649	Voluntary Surrender	Failure to Comply With Licensing Board Order
3/2/2010	Quinones, Mary E.	RN095540	Stayed Revocation with Probation	Reissuance
2/12/2010	Ramers, Samantha J.	RN133834	Stayed Revocation with Suspension	Unable to Practice Safely by Reason of Alcohol or Other Substance Abuse, Diversion of Controlled Substance
2/25/2010	Reed, Shalisaand L.	RN144081	Decree of Censure	Substandard or Inadequate Care
3/26/2010	Reeves, Dawn M.	LP042368	Revocation	Criminal Conviction, Violation of Federal or State Statutes, Regulation or Rules
4/14/2010	Riggs, Nancy J.	RN110618	Probation	Failure to Maintain Records or Provide Medical, Financial or Other Required Information, Practicing Beyond the Scope of Practice, Narcotics Violation or Other Violation of Drug Statutes
5/10/2010	Riggs, Randall W.	LP036326	Revocation	Sexual Misconduct, Failure to Disclose, Criminal Conviction
4/26/2010	Riley, Michelle R.	RN079703	Decree of Censure	Practicing Beyond the Scope of Practice
3/18/2010	Rivera, Enrique C.	RN Endorsement	License Denied	Criminal Conviction
5/10/2010	Robinson, Sarah R.	LP043702	Revocation	Unable to Practice Safely by Reason of Psychological Impairment or Mental Disorder, Failure to Maintain Records or Provide Medical, Financial or Other Required Information, Violation of Federal or State Statutes, Regulation or Rules
5/12/2010	Schnorr, Amie L.	RN123257	Voluntary Surrender	Narcotics Violation or Other Violation of Drug Statutes, Violation of Federal or State Statutes, Regulation or Rules, Criminal Conviction
2/22/2010	Scott, Amy E.	RN091418	Decree of Censure	Practicing Beyond the Scope of Practice
4/9/2010	Siminski, Irene P.	RN062451/ LP020645	Civil Penalty	Criminal Conviction
4/9/2010	Smith, Terry M.	RN129935	Probation	Substance Abuse, Criminal Conviction, Violation of Federal or State Statutes, Regulation or Rules
4/8/2010	Solomon, Briana C.	RN162750	Civil Penalty	Criminal Conviction
5/10/2010	Spirk, Katherine	LP033501	Revocation	Failure to Maintain Records or Provide Medical, Financial or Other Required Information, Drug Screening Violation, Failure to Cooperate With Board Investigation
5/21/2010	Stanford, Mary B.	RN076792	Probation	Unable to Practice Safely by Reason of Physical Illness or Impairment
3/5/2010	Stevenson, Tammy J.	LP041980	Decree of Censure	Drug Screening Violation
3/31/2010	Stevenson, Wendy K.	RN066792/ LP021938	Voluntary Surrender	Unable to Practice Safely by Reason of Alcohol or Other Substance Abuse, Diversion of Controlled Substance
2/15/2010	Stillwell, Joy L.	RN046480	Stayed Revocation with Suspension	Unable to Practice Safely by Reason of Alcohol or Other Substance Abuse
3/15/2010	Straus, Anna E.	RN115969	Revocation	Unable to Practice Safely by Reason of Alcohol or Other Substance Abuse, Failure to Comply With Licensing Board Order
3/5/2010	Strege, Kim	Reissuance Applicant (LP036821)	Reissuance Denied	Drug Screening Violation, Unable to Practice Safely by Reason of Alcohol or Other Substance Abuse
3/9/2010	Tanner, Michael E.	RN093151	Stayed Revocation Probation	License Revocation, Suspension or Other Disciplinary Action Taken by a Federal, State or Local Licensing Authority, Unprofessional Conduct, Fraud, Deceit or Material Omission in Obtaining License or Credentials
5/14/2010	Thompson, Stephen E.	RN147998	Voluntary Surrender	Unable to Practice Safely by Reason of Alcohol or Other Substance Abuse
4/30/2010	Thornton (McIlrath), Julia D.	RN132970	Voluntary Surrender	License Revocation, Suspension or Other Disciplinary Action Taken by a Federal, State or Local Licensing Authority
4/13/2010	Uribe, Amy L.	RN150278	Revocation	Failure to Comply With Licensing Board Order
3/15/2010	Wacker, Terica C.	LP038028	Revocation	Narcotics Violation or Other Violation of Drug Statutes, Violation of Federal or State Statutes, Regulation or Rules, Failure to Cooperate With Board Investigation
3/15/2010	Waldo, Teresa L.	RN131096	Revocation	Unable to Practice Safely by Reason of Alcohol or Other Substance Abuse, Substandard or Inadequate Care, Failure to Comply With Licensing Board Order
5/4/2010	Wall, Taylor L.	RN113053	Stayed Revocation with Probation	Diversion of Controlled Substance, Substance Abuse
3/15/2010	Weichbrodt, Ann M.	LP043173	Revocation	Criminal Conviction, Violation of Federal or State Statutes, Regulation or Rules, Failure to Comply With Licensing Board Order
2/9/2010	Whetstone, Jill M.	RN120035	Decree of Censure	Breach of Confidentiality

EFFECTIVE DATE	NAME	CERTIFICATE	DISCIPLINE	VIOLATION(S)
3/15/2010	Wilson, David W.	RN147929	Revocation	Failure to Maintain Adequate or Accurate Records, Error in Prescribing, Dispensing or Administering Medication, Sexual Misconduct
2/26/2010	Wilson, Rita M.	RN113509	Voluntary Surrender	Unable to Practice Safely by Reason of Physical Illness or Impairment, Criminal Conviction
3/15/2010	Wilson, Sandra K.	RN124309	Revocation	Failure to Comply With Licensing Board Order, Violation of Federal or State Statutes, Regulation or Rules, Failure to Maintain Adequate or Accurate Records
5/3/2010	Woolley, Dawn S.	RN Endorsement	License Denied	Substandard or Inadequate Care, Failure to Maintain Records or Provide Medical, Financial or Other Required Information
3/15/2010	Zowa, Pleasure J.	RN081826	Revocation	Substandard or Inadequate Care, Failure to Maintain Records or Provide Medical, Financial or Other Required Information, Unable to Practice Safely by Reason of Psychological Impairment of Mental Disorder

RN-LPN - UPDATED LICENSURE STATUS FEBRUARY – MAY 2010

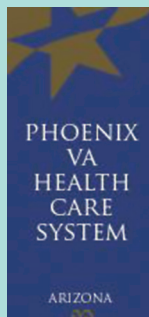
EFFECTIVE DATE	NAME	LICENSE	DISCIPLINE
4/1/2010	Bergin, Bernadette M.	RN090633/LP029045	Stayed Suspension with Probation Completed terms of Suspension, and signed a Consent Agreement for a Stayed Suspension Probation with terms and conditions
2/26/2010	Corey, Lynn J.	RN047873	Stayed Revocation with Probation Completed terms of Stayed Revocation Suspension, converted license to Stayed Revocation Probation
4/2/2010	Saimo, Cybele E.	LP034051	Probation Completed terms of terms of Stayed Revocation Probation, license converted to Probation

RN-LPN - ACTION CLEARED FEBRUARY – MAY 2010

EFFECTIVE DATE	NAME	LICENSE	EFFECTIVE DATE	NAME	LICENSE
3/10/2010	Bahe, Lita S.	RN063487	5/21/2010	Mancuso, Diane B.	RN075229
3/23/2010	Bateman, Julie D.	RN122091	5/21/2010	Ornelas, Colleen A.	LP036676
5/15/2010	Cooper, Gena R.	RN094888	4/18/2010	Raetz, Barbara J. B.	LP022736
3/24/2010	Frank, Steven B.	RN147014	5/21/2010	Sanders, Ruth D.	RN063927/AP1151/AP328/ LP011147
4/20/2010	Isambert, Connie F.	RN090746/LP022596	4/4/2010	Shearer, Sandra D.	RN152005
4/2/2010	Jezewski, Antoinette L.	RN122766	3/23/2010	Simich, Tomislav	RN118323
4/1/2010	Johns, Kenneth C.	RN060577/LP019501	5/21/2010	Sweet, Erich C.	RN142676
3/12/2010	Kelly, Colleen F.	RN059428	5/24/2010	Wagner, Todd M.	RN145082
3/30/2010	Latam, Kari K.	LP031500			

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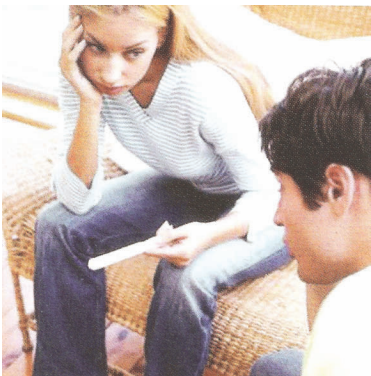
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