



OHIO BOARD OF NURSING

MINUTES OF MEETING

REGULAR MEETING OF THE BOARD SEPTEMBER 26-27, 2018

The regular meeting of the Ohio Board of Nursing (Board) was held on September 26-27, 2018, at the Board office located at 17 South High Street, Suite 660, Columbus, Ohio 43215.

On Wednesday, September 26, 2018, at 8:30 a.m., President Patricia Sharpnack called the Board meeting to order, welcomed students and guests, and requested that Board Members introduce themselves. On Thursday, September 27, 2018, at 9:00 a.m., President Patricia Sharpnack called the Board meeting to order. Vice-President, Brenda Boggs, read the Board mission each day.

Patricia Sharpnack, RN, President
Brenda Boggs, LPN, Vice-President
Sandra Beidelschies, RN
Matthew Carle, Consumer Member (Absent Wednesday afternoon)
Barbara Douglas, RN, APRN-CRNA
Nancy Fellows, RN
Erin Keels, RN, APRN-CNP
Lisa Klenke, RN (Absent Wednesday and Thursday)
Deborah Knueve, LPN
Lauralee Krabill, RN (Absent Wednesday and Thursday)
Daniel Lehmann, LPN (Absent Wednesday afternoon)
Sandra Ranck, RN
Joanna Ridgeway, LPN

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

ADMINISTRATIVE MATTERS

Board Meeting Overview

On Wednesday, at 1:00 p.m., the following addressed the Board: Attorney Elizabeth Collis, Lindsay Kolanko, R.N., and AAG LaTawnda Moore; and Attorney Rachel Sindell on behalf of Diane Salak, R.N., who was not present at the meeting, and AAG James Wakley.

Approval of Minutes of the July 2018 Meeting

Action: It was moved by Matthew Carle, seconded by Joanna Ridgeway, that the Board approve the minutes from the July 2018 Board meeting, as submitted. Motion adopted by a majority vote of the Board members present with Nancy Fellows abstaining.

Executive Director Report

Betsy Houchen highlighted the following from the Executive Director Report:

- The Board welcomed new staff members: Aerrinn Hardin, Paralegal, and Danielle Fisher, Compliance Agent, and congratulated President Patricia Sharpnack on receiving the 2018 Annual QSEN Leadership Award. President Sharpnack was also recognized in the NCSBN *InFocus* magazine.
- Renewal for LPNs began July 1, 2018 and in August, the Board began sending weekly email reminders to renew. Approximately 4,000 LPNs have been renewing weekly.
- The Board recognized Lesleigh Robinson, Licensure Program Manager, upon her retirement. President Sharpnack presented Ms. Robinson a Resolution from the Ohio Senate. Board members and Director Houchen offered their appreciation for Ms. Robinson's dedicated service during her many years of working for the Board.
- The National Practitioner Data Bank (NPDB) designated the Board as "compliant" for the NPDB 2018 Compliance Project.

Fiscal – Biennial Audit Report

Director Houchen reviewed the Auditor's Management Letter and Board's response. Daniel Lehmann asked about the use of one code rather than separate account codes for renewal and late fee revenue. Director Houchen stated the Board can identify the total for each type of revenue, but since the implementation of the Ohio eLicense, numerous boards and commissions, including the Nursing Board, have used one code. In addition, the Office of Budget Management is aware that the single code is being used and they have not identified any discrepancies or unusual activity.

FY 2020-2021 Budget Proposal

Director Houchen reviewed the FY 2020-2021 budget request and provided a copy of the Director's Budget Summary Letter.

Legislative Report

Tom Dilling reviewed the legislative memorandum. He reported the Governor signed House Bill 34 on August 3, 2018, and the Governor vetoed SB 221. He provided an update on SB 255 and SB 293, and reported that two new bills were introduced, HB 716, Temporary Licensing-Military, and HB 726, APRN Practice-Convenience Clinics.

NEW BUSINESS

Administrative Rule Review

Holly Fischer provided an update on the rules regarding chronic/sub-acute pain, youth concussions, and dialysis technician training. The Rules Hearing was held on September 21, 2018. One commentator testified in support of the chronic/sub-

acute pain rule and had practice questions that Ms. Fischer stated could be addressed by staff, as FAQs and/or in *Momentum*. These rules have a proposed effective date of November 5, 2018.

Ms. Fischer discussed the five-year review rules, rules being revised for technical changes, and the Medication-Assisted Treatment (MAT) rule. The proposed Rules Hearing is scheduled in conjunction with November Board meeting on November 28, 2018, and the anticipated effective date is January 7, 2019.

Regarding the MAT rule, H. Fischer reported that HB 49 mandated the rule language be consistent with the Medical Board rule language. Because the Medical Board made revisions based on public comments, H. Fischer stated that similar changes were made to Rule 4723-9-13, and she reviewed the revisions.

EXECUTIVE SESSION

On Thursday, September 27, 2018:

Action: It was moved by Brenda Boggs, seconded by Patricia Sharpnack, that the Board go into Executive Session to discuss pending or imminent court action with legal counsel, and to consider the appointment, employment, dismissal, discipline, promotion, demotion, or compensation of a public employee or official, or the investigation of charges or complaints against a public employee. A roll call vote was taken and the Board unanimously voted to go into Executive Session, with the following members present and voting: B. Boggs, S. Beidelschies, E. Keels, S. Ranck, D. Lehmann, J. Ridgeway, N. Fellows, B. Douglas, D. Knueve, M. Carle, P. Sharpnack. The Board entered Executive Session at 10:45 a.m. and reported out of Executive Session at 11:14 a.m.

APPROVALS

New Nursing Education Program

University of Cincinnati Accelerated Direct Entry MSN Program

Action: It was moved by Brenda Boggs, seconded by Sandra Ranck, that the Board grant Conditional approval, in accordance with Rule 4723-5-08, OAC, to the University of Cincinnati Accelerated Direct Entry MSN Program. It was further moved that the Program submit progress reports to the Board on or before February 6, 2019, June 12, 2019, November 6, 2019 and March 10, 2020. Motion adopted by a majority vote of the Board members present with Sandra Beidelschies and Patricia Sharpnack abstaining.

Nursing Education Programs – Approval Status

Ashland University Dwight Schar College of Nursing and Health Sciences

Action: It was moved by Erin Keels, seconded by Brenda Boggs, that the Board grant Full approval, in accordance with 4723-5-04, OAC, to Ashland University Dwight Schar College of Nursing and Health Sciences for a period of five years. Motion adopted by a majority vote of the Board members present with Sandra Beidelschies and Patricia Sharpnack abstaining.

Belmont College Associate Degree Nursing Program

No Action: The Program will continue on Provisional approval by operation of Rule 4723-5-23(C), OAC.

Belmont College Practical Nursing Program

Action: It was moved by Sandra Ranck, seconded by Barbara Douglas, that the Board grant Full approval, in accordance with Rule 4723-5-04, OAC, to Belmont College Practical Nursing Program for a period of five years. Motion adopted by a majority vote of the Board members present with Sandra Beidelschies and Patricia Sharpnack abstaining.

Bryant & Stratton College Licensed Practical Nursing Program

Action: It was moved by Daniel Lehmann, seconded by Nancy Fellows, that the Board grant Full approval, in accordance with Rule 4723-5-04, OAC, to Bryant & Stratton College Licensed Practical Nursing Program for a period of five years. Motion adopted by a majority vote of the Board members present with Sandra Beidelschies, Sandra Ranck and Patricia Sharpnack abstaining.

Ohio Institute of Allied Health Practical Nursing Program

Action: It was moved by Joanna Ridgeway, seconded by Erin Keels, that the Board grant Full approval, in accordance with Rule 4723-5-04, OAC, to Ohio Institute of Allied Health Practical Nursing Program for a period of five years. Motion adopted by a majority vote of the Board members present with Sandra Beidelschies and Patricia Sharpnack abstaining.

Owens Community College Practical Nurse Program

Action: It was moved by Nancy Fellows, seconded by Matthew Carle, that the Board grant Full approval, in accordance with Rule 4723-5-04, OAC, to Owens Community College Practical Nurse Program for a period of five years. Motion adopted by a majority vote of the Board members present with Sandra Beidelschies and Patricia Sharpnack abstaining.

Practical Nursing – Fortis College Centerville

Action: It was moved by Barbara Douglas, seconded by Nancy Fellows, that the Board grant Full approval, in accordance with Rule 4723-5-04, OAC, to Practical Nursing-Fortis College Centerville for a period of five years. Motion adopted by a majority vote of the Board members present with Sandra Beidelschies, Daniel Lehmann and Patricia Sharpnack abstaining.

Willoughby-Eastlake School of Practical Nursing-Adult Division

Action: It was moved by Deborah Knueve, seconded by Matthew Carle, that the Board grant Full approval, in accordance with Rule 4723-5-04, OAC, to Willoughby-Eastlake School of Practical Nursing-Adult Division for a period of five years. It was further moved that the Program submit a progress report to the Board on or before December 13, 2018. Motion adopted by a majority vote of the Board members present with Sandra Beidelschies, Sandra Ranck and Patricia Sharpnack abstaining.

Willoughby-Eastlake School of Practical Nursing-High School Division

No action: The Program will remain on Provisional approval by operation of Rule 4723-5-23(C), OAC.

Nurse Education Programs Program Requests

Cuyahoga Community College, Associate Degree Nursing Program

Action: It was moved by Matthew Carle, seconded by Deborah Knueve, that the Board approve the curriculum revision request submitted by Cuyahoga Community College, Associate Degree Nursing Program in accordance with Rule 4723-5-16, OAC. Motion adopted by a majority vote of the Board members present with Sandra Beidelschies and Patricia Sharpnack abstaining.

Cuyahoga Community College Division of Nursing Education Practical Nursing Program

Action: It was moved by Brenda Boggs, seconded by Erin Keels, that the Board approve the curriculum revision request submitted by Cuyahoga Community College Division of Nursing Education Practical Nursing Program in accordance with Rule 4723-5-16, OAC. Motion adopted by a majority vote of the Board members present with Sandra Beidelschies and Patricia Sharpnack abstaining.

Training Programs

Companions Certified Medication Aide Program

Action: It was moved by Sandra Beidelschies, seconded by Brenda Boggs, that the Board re-approve, in accordance with Rule 4723-27-07, OAC, Companions Certified Medication Aide Program for a period of two years. Motion adopted by unanimous vote of the Board members present.

Cuyahoga Community College's Community Health Worker Program

Action: It was moved by Erin Keels, seconded by Sandra Ranck, that the Board re-approve, in accordance with Rule 4723-26-14, OAC, Cuyahoga Community College's Community Health Worker Program for a period of two years. Motion adopted by unanimous vote of the Board members present.

Davita Ohio Hemodialysis Technician Training Program (Northwood)

Action: It was moved by Sandra Ranck, seconded by Barbara Douglas, that the Board re-approve, in accordance with Rule 4723-23-07, OAC, Davita Ohio Hemodialysis Technician Training Program (Northwood) for a period of two years. Motion adopted by unanimous vote of the Board members present.

Davita Ohio Hemodialysis Technician Training Program (Akron)

Action: It was moved by Daniel Lehmann, seconded by Joanna Ridgeway, that the Board re-approve, in accordance with Rule 4723-23-07, OAC, Davita Ohio Hemodialysis Technician Training Program (Akron) for a period of two years. Motion adopted by unanimous vote of the Board members present.

Davita Ohio Hemodialysis Technician Training Program (Middleburg Heights)

Action: It was moved by Joanna Ridgeway, seconded by Nancy Fellows, that the Board re-approve, in accordance with Rule 4723-23-07, OAC, Davita Ohio Hemodialysis Technician Training Program (Middleburg Heights) for a period of two years. Motion adopted by unanimous vote of the Board members present.

Diamond Pharmacy Certified Medication Aide Training Program

Action: It was moved by Nancy Fellows, seconded by Deborah Knueve, that the Board re-approve, in accordance with 4723-27-07, OAC, Diamond Pharmacy Certified Medication Aide Training Program for a period of two years. Motion adopted by unanimous vote of the Board members present.

Health Care Access Now Community Health Worker Certification Program

Action: It was moved by Barbara Douglas, seconded by Matthew Carle, that the Board approve in accordance with Rule 4723-26-14, OAC, Health Care Access Now Community Health Worker Certification Program for a period of two years. Motion adopted by unanimous vote of the Board members present.

Retroactive Approvals for Licensees and Certificate Holders

Action: It was moved by Deborah Knueve, seconded by Matthew Carle, that the Board retroactively ratify, as submitted, the licenses and certificates, including temporary permits, initially issued by the Board July 1, 2018 through August 31, 2018 to the following: registered nurses; licensed practical nurses; APRN-CRNAs; APRN-CNPs; APRN-CNSs; APRN-CNMs; Ohio certified dialysis technicians; dialysis technician interns; community health workers; and medication aides, taking into account those licenses and certificates subject to discipline, surrender or non-renewal. Motion adopted by unanimous vote of the Board members present.

ADJUDICATION AND COMPLIANCE

On Thursday, September 27, 2018, President Patricia Sharpnack requested that each voting Board member verify that they reviewed in depth all materials pertaining to these matters by saying “yes” or “no” and that any Board member who did not review the materials abstain from voting on the matters.

Board Actions

NOTICES OF OPPORTUNITY FOR HEARING

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

Dykes, Michelle, R.N. 384217 (CASE #18-3139); Noll, Brittany, P.N. 114431 (CASE #18-2320); Doniver, James, P.N. 140679 (CASE #17-7470); Viju, Mariamma, R.N. 436526 (CASE #17-7015); Durham, Crystal, R.N. 207663 (CASE #18-3902); DiLeonardo, Darlene, P.N. 122459 (CASE #18-1119); Murphy, Sade, R.N. 387224 (CASE #17-4732); Zientek, Karen, R.N. 227062 (CASE #18-1214);

Husske, Julie, R.N. 385900 (CASE #18-3360); Prather, Michelle, R.N. 345830 (CASE #18-4872); Sakian, Cynthia, P.N. 156056 (CASE #18-3365); Thornton, Shelby, R.N. 225222 (CASE #18-3551); Sone, Martin, R.N. 387535 (CASE #18-3253); Marolf, Heidi, P.N. 163426 (CASE #18-2940); Morris, Ashley, R.N. 407944 (CASE #18-3639); Estavillo, Brian, R.N. 287120 (CASE #18-2391); Moreno, Jessica, R.N. 445391 (CASE #18-4332); Manning, Krystal, R.N. 340268 (CASE #18-2973); Metz, Bobbie, R.N. 355960 (CASE #18-1201); Adams, David, R.N. 276320 (CASE #18-3333); Bennett, Eric, R.N. 314669 (CASE #18-1637); Chiody, Christina, P.N. 123398 (CASE #18-2374); Brewer, Paul, R.N. 401733 (CASE #18-2215); Weber, Delores, P.N. 145278 (CASE #17-6041); Tarantino, Frank, R.N. 376286 (CASE #18-2782); Martin, Kristi, P.N. 147901 (CASE #17-6938); Anderson, Sandy, R.N. 254376, APRN-APRN-CNP 07003 (CASE #17-6453); Hambleton, Thomas, R.N. 231352 (CASE #18-4159); Goss, Shawn, R.N. 375963 (CASE #18-0474); Murphy, Thuy, R.N. 416141 (CASE #18-1391); Duncil, Melissa, P.N. 147241 (CASE #18-1372); Haynes, Jasmine, P.N. 146607 (CASE #18-3259); Hand, Katie, P.N. 166285 (CASE #18-3676); Clark, Nancy, P.N. 156040 (CASE #18-1567); Sterling, Brittany, R.N. 405125 (CASE #18-3065); Shade, Sarah, R.N. 354856, P.N. 112584 (CASE #18-2976); Moreno, Lindsay, P.N. 131966 (CASE #18-1865); Sim, Phyllis, R.N. 214125, APRN-APRN-CNP 10316 (CASE #16-6537); Kallai, Ambra, P.N. 143574 (CASE #18-2131); Threatt, Jamsaina, P.N. NCLEX (CASE #18-4220); Burga, Tracy, R.N. 316982 (CASE #18-5306); Hameed, Sybil, P.N. 136935 (CASE #18-0375); Collins, Gloria, P.N. NCLEX (CASE #17-7264); Wood, David, R.N. 205123, P.N. 076307 (CASE #18-4565); Mann, Andrea, CHW applicant (CASE #18-1945); Ford, Windell, P.N. NCLEX (CASE #17-6693); Braham, Ginny, P.N. 134908 (CASE #18-5100); Hastings, Aubrey, R.N. 285780 (CASE #18-4819); Morley, Erin, P.N. 137703 (CASE #18-3953); Saghafi, Jaleh, R.N. 234512 (CASE #18-2677).

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

IMMEDIATE SUSPENSIONS AND NOTICES OF OPPORTUNITY FOR HEARING

Action: It was moved by Sandra Beidelschies, seconded by Brenda Boggs, that the Board issue a Notice of Immediate Suspension and Opportunity for Hearing for violations of Chapter 4723, ORC for the following case(s):

Lee, Sheena, R.N. 380597, P.N. 133447, APRN-CNP 020753 (CASE #18-1839); Dudsak, Jamee, R.N. 335825 (CASE #17-3273); Ryerson, Michelle, P.N. 126049 (CASE #18-2184); Rhoads, Colleen, R.N. 282936 (CASE #17-2781); Morse, Melani, R.N. 411320 (CASE #18-1515); Nincevic-Omeragic, Maria, P.N. 154702 (CASE #18-4859); Cowden, Sara, R.N. 396316, P.N. 139489 (CASE #18-2531); Havens, Holly, P.N. 155590 (CASE #18-0374); Paugh, Gina, P.N. 110685 (CASE #18-2127); Jenkins, Joshua, P.N. 113542 (CASE #17-7064); Carrico, Timothy, P.N. 128082 (CASE #18-5360); Wagner, Debra, R.N. 259145 (CASE #18-4123); Dupoint, Dawn, P.N. 145697 (CASE #18-0679); Romanini, Robin, P.N. 089993 (CASE #18-0388); Clark, Melissa, R.N. 455492 (CASE #18-4918); Smalcer,

Nanette, P.N. 136484 (CASE #18-3833); Walker, Bobbie, R.N. 356537 (CASE #16-8522); Cahal, Karen, R.N. 219535 (CASE #17-5727).

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

AUTOMATIC SUSPENSIONS AND NOTICES OF OPPORTUNITY FOR HEARING

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

Keith, Jennifer, P.N. 116175 (CASE #18-4901); Howard, Toni, R.N. 418245 (CASE #18-4919); Smith, Sherita, P.N. 130628 (CASE #18-3144); Carnes, Christopher, R.N. 246881 (CASE #18-5211); Girts, Ruth, R.N. 198460 (CASE #18-4832); Dock, Amy, R.N. 344179 (CASE #18-4672); Painter, Tara, R.N. 312190 (CASE #18-3022); Russell, Kimberly, P.N. 151259 (CASE #18-4203); Clark, Amanda, R.N. 349436 (CASE #18-3880); Johnson, Toya, P.N. 160985 (CASE #18-4760); Boggs, Cheryl, R.N. 312260 (CASE #18-5228); Porter, Pamela, P.N. 089708 (CASE #18-4681); Maxwell, Margaret, R.N. 270927, P.N. 063902 (CASE #18-3546); Esquivel-Rodriguez, Amanda, R.N. 445637, P.N. 114304 (CASE #18-4308).

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

POST IMMEDIATE SUSPENSION AND NOTICE OF OPPORTUNITY FOR HEARING

Action: It was moved by Daniel Lehmann, seconded by Erin Keels, that the Board issue a Post Immediate Suspension and Notice of Opportunity for Hearing for violations of Chapter 4723, ORC for the following case(s):

Poling, Jennifer, R.N. 283384 (CASE #18-0570); Workman, Julia, R.N. 414239 (CASE #18-2120); Malone, Leslie, P.N. 083339 (CASE #18-1561); Sierra, Genevieve, P.N. 139485 (CASE #18-1157); Ives, Angela, R.N. NCLEX, P.N. 155155 (CASE #18-2579).

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

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

SURRENDERS/WITHDRAWALS

Permanent Voluntary Surrender

Action: It was moved by Joanna Ridgeway, seconded by Daniel Lehmann, that the Board accept the Permanent Voluntary Surrender of License for the following case(s):

Hammond, Eric, P.N. 139430 (CASE #18-2102); Holland, Amy, P.N. 130842 (CASE #17-2647); Wilson, Steven, R.N. 327272 (CASE #17-7502); Daria, Jeanette, R.N. 413759 (CASE #18-4180); Palmer, Karen, R.N. 424388 (CASE #18-0516).

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

CONSENT AGREEMENTS

Action: It was moved by Nancy Fellows, seconded by Matthew Carle, that the Board approve the Consent Agreements for violations of Chapter 4723, ORC entered into by and between the Board in the following case(s):

Cooper, Jessica, R.N. 432591 (CASE #18-0780); Goins, Lisa, R.N. 324772, APRN-CNP 13621 (CASE #17-6729); Hildebrand, Joell, R.N. endorse (CASE #17-6917); Picciano, Barbie, R.N. 276162 (CASE #18-1139); Jurovcik, Carrie, R.N. 363249 (CASE #18-1704); Provitt, Teletha, P.N. 148847 (CASE #17-0042); Luedemann, Shelley, R.N. NCLEX (CASE #18-1646); Alexander, Lori, R.N. 301880 (CASE #18-2191); Fry, Melissa, R.N. 357423 (CASE #17-3599); Muetzel, Megan, P.N. 167366 (CASE #18-2470); Bailey, Jeffery, R.N. 165192, CRNA 02885 (CASE #17-6883); Bowman, Beth, R.N. 204356 (CASE #16-2991); Mangol, Rebecca, R.N. 430791, P.N. 103910 (CASE #18-0039); Ferguson, Richard, P.N. NCLEX (CASE #17-6914); Reiter, Stephanie, R.N. 396047 (CASE #17-5359); Faulkner, Michael, R.N. 379920, P.N. 141915 (CASE #18-0969); Balogh, Dina, P.N. 122620 (CASE #18-3695); Middleton, Kerri, R.N. 281266, P.N. 095852 (CASE #18-2961); Soltwedel, Mackenzie, R.N. 401295 (CASE #18-0921); Gulich, Mark, R.N. 176961 (CASE #16-7233); Buchinger, Nathan, R.N. 437386, CRNA 019478 (CASE #17-2800); Davis, Alisa, R.N. 279196 (CASE #17-0964); Friend, Leada, P.N. 143191 (CASE #17-6973); Jones, Jolisha, P.N. NCLEX (CASE #18-3749); Bryant, Timothy, DTI applicant (CASE #18-0595); Hobbs, Elizabeth, P.N. 121847 (CASE #17-2828); Tanner, Gregory, R.N. 270002 (CASE #18-4176); Maddox, Laura, R.N. 400710, APRN-CNP 019958 (CASE #17-7165); Muntean, Jade, R.N. 439206, P.N. 088930 (CASE #17-2452); Carroll, Alyssa, R.N. 406374 (CASE #17-7368); Buescher, Lysa, R.N. 243517 (CASE #17-4858); Anderson, Laura, R.N. 286413 (CASE #18-2606); Griffin, Kaveo, P.N. 164600 (CASE #18-1483); Haggerty, Nicholl, R.N. 316678 (CASE #18-2431); Lynch, Kenya, R.N. 422153, P.N. 123408 (CASE #18-4542); Azbell, Jennifer, R.N. 383923 (CASE #18-4225); Noall, Kelly, R.N. 396397, APRN-CRNA 15247 (CASE #18-0459); Chandler-Arthur, Jillian, R.N. 345188, P.N. 125732 (CASE #17-6368); Knight, Natalie, R.N. 266691 (CASE #18-1055); Siebert, Michelle, P.N. 113026 (CASE #18-0561); Dekoning, Angie, P.N. 122857 (CASE #17-0499); Stover, Lori, R.N.

332470 (CASE #17-6802); Bricker, Brandi, R.N. 341483 (CASE #17-0933); Abramovich, Caitlin, R.N. 311914 (CASE #18-3760); Opoku-Gyamfi, Gloria, R.N. 288898 (CASE #18-1003); Bivens, Christopher, R.N. 358371 (CASE #16-4321); Norwood, Shareese, P.N. NCLEX (CASE #18-2344); Smith, Ronda, P.N. 159677 (CASE #17-0340); Graber, Kathleen, R.N. 326472, APRN-CNP 11036 (CASE #18-5168); Staton, Amanda, R.N. 334135 (CASE #17-5924); Jarosz, Jennifer, R.N. 248050 (CASE #17-4076); Lisec, Dawn, R.N. 241039 (CASE #17-6404); Krensavage, David, R.N. 270163 (CASE #17-3640); Strohm, Shane, DTI applicant (CASE #18-3921); Ouedraogo, Zama, R.N. 446288 (CASE #18-3151); Shackelford, Hollyn, R.N. 396081 (CASE #17-5932); Byer, Stephanie, R.N. 323337 (CASE #18-0835); Hans, Nicole, R.N. 272801 (CASE #18-1103); Newman, Leslie, R.N. 437668 (CASE #18-4761); Cox, Miriam, R.N. 259077 (CASE #17-5710); Glambin, Angela, P.N. NCLEX (CASE #18-2457); Holbrook, Jaime, R.N. 364526 (CASE #18-1985); Gory, Judith, R.N. 258156 (CASE #17-7118); Cadwell, Jason, R.N. 369622 (CASE #17-4261); Mayerchak, Mason, R.N. 409322, P.N. 151968 (CASE #18-2915); Sullivan, Olivia, R.N. 441081 (CASE #18-3229); Kerns, Ryan, R.N. NCLEX (CASE #18-3121); Cittadino, Mary, R.N. NCLEX (CASE #18-3145); McDonald, Kristen, R.N. 385753 (CASE #18-2793); Folliett-Vranic, Kimberly, R.N. 326335 (CASE #18-3039); Forward-Evans, Aneisha, P.N. 165676 (CASE #18-4120); Sichina, Annette, R.N. 240797 (CASE #18-4870); Keith, Eileen, R.N. 364056, P.N. 118457 (CASE #18-4067); Ward, Kelly, R.N. 376604 (CASE #18-5129); Brenner, Cynthia, R.N. 369789 (CASE #18-1674); Fouts, Abbie, P.N. 128565 (CASE #17-7082); Chevraux, Angela, P.N. 109615 (CASE #18-4953); French, Megan, R.N. 348755 (CASE #18-5464); Watson, Victoria, P.N. 148673 (CASE #18-1180); Carroll, Brenda, R.N. 301641, P.N. 098514 (CASE #18-4467); Roberts, Michael, R.N. 382834 (CASE #18-4879); Bucce, Kristin, P.N. 154105 (CASE #18-1795); Eisentrager, Stephanie, R.N. 372036, P.N. 128255 (CASE #18-0808); Binegar, Cali, R.N. NCLEX (CASE #18-3948); Robbins, Abbey, P.N. NCLEX (CASE #18-1297); Ballou, Meredith, R.N. endorse (CASE #18-3706); Keith, Alyshia, R.N. 383626 (CASE #17-4201); Simpson, Caresta, P.N. NCLEX (CASE #18-3647); Weberding, Eric, R.N. 352610 (CASE #17-6058); Swails, Shinita, R.N. 350202 (CASE #17-6137); Clair, Janice, R.N. 352926 (CASE #17-6289); Ripley, Kristen, P.N. NCLEX (CASE #18-4434).

Sandra Beidelschies voted no on Norwood, Shareese, P.N. NCLEX (CASE #18-2344); Barbara Douglas voted no on Noall, Kelly, R.N. 396397, APRN-CRNA 15247 (CASE #18-0459); Chandler-Arthur, Jillian, R.N. 345188, P.N. 125732 (CASE #17-6368); Erin Keels abstained on Soltwedel, Mackenize, R.N. 401295 (CASE #18-0921); Graber, Kathleen, R.N. 326472, APRN-CNP 11036 (CASE #18-5168); Staton, Amanda, R.N. 334135 (CASE #17-5924); Krensavage, David, R.N. 270163 (CASE #17-3640); Shackelford, Hollyn, R.N. 396081 (CASE #17-5932); Mayerchak, Mason, R.N. 409322, P.N. 151968 (CASE #18-2915); Daniel Lehman abstained on Cox, Miriam, R.N. 259077 (CASE #17-5710); McDonald, Kristen, R.N. 385753 (CASE #18-2793); Joanna Ridgeway abstained on Alexander, Lori, R.N. 301880 (CASE #18-2191); Graber, Kathleen, R.N. 326472, APRN-CNP 11036 (CASE #18-5168); Krensavage, David, R.N. 270163 (CASE #17-3640); Patricia Sharpnack voted no on Bryant, Timothy, DTI applicant (CASE

#18-0595); Griffin, Kaveo, P.N. 164600 (CASE #18-1483); Mayerchak, Mason, R.N. 409322, P.N. 151968 (CASE #18-2915); Robbins, Abbey, P.N. NCLEX (CASE #18-1297).

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

HEARING EXAMINER'S REPORT AND RECOMMENDATION

Calloway, Amy K. (aka "Amy France"), P.N. 103540 (CASE #17-5463, #17-5458)

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

Patricia Sharpnack moved to rescind the original motion she made because Daniel Lehmann needed to abstain.

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

Motion adopted by a majority vote of the Board members present with Matthew Carle, Daniel Lehmann and Sandra Ranck.

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September, 2018.

Weber, Anthony Claire, P.N. 151232 (CASE #17-6260)

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

Brenda Boggs moved to rescind the original motion she made because Daniel Lehmann needed to abstain.

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

Motion adopted by a majority vote of the Board members present with Matthew Carle, Daniel Lehmann and Sandra Ranck.

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September, 2018.

Shirley, Dawn Michelle, P.N. 149677 (CASE #14-6331)

Action: It was moved by Sandra Beidelschies, seconded by Brenda Boggs, that the Board redact State's Exhibit 9, pages 5 and 6, to remove a patient name in accordance with Section 4723.28(l), ORC. It was further moved that the Board admit Hearing Examiner's Exhibit A, including all attachments, and that the Board accept all of the Findings of Fact and Conclusions of Law, and modify the Recommendation in the Hearing Examiner's Report and Recommendation, and that **MS. SHIRLEY's** license to practice nursing as a licensed practical nurse in the State of Ohio be suspended for an indefinite period of time but not less than two (2) years with the conditions for reinstatement set forth below, and following reinstatement, **MS. SHIRLEY's** license to practice nursing as a licensed practical nurse shall be subject to a stayed suspension under the probationary terms and restrictions set forth below for a minimum period of three (3) years including the **Temporary Narcotic Restrictions, unless otherwise approved in advance, and Permanent Practice Restrictions**, set forth below.

The rationale for the modification is the following: Page 11 of the Report and Recommendation contained a typographical error in referencing the necessary redactions to State's Exhibit 9; and relabelling Hearing Examiner's Exhibit A, attachments as State's Exhibits is not necessary.

SUSPENSION OF LICENSE

MS. SHIRLEY's license is suspended for an indefinite period of time but not less than two (2) years.

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

CONDITIONS FOR REINSTATEMENT

MS. SHIRLEY shall:

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

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

Educational Requirements

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

Evaluations

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

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

Monitoring

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

addresses and telephone numbers; and

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

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

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

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

Reporting Requirements for Suspension Period

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

specified by the Board. All reporting and communications required by this Order shall be sent by email to: monitoring@nursing.ohio.gov or by mail to:

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

19. Verify that the reports and documentation required by this Order are received in the Board office.
20. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.
21. Submit to the Board a completed application for reinstatement on the form provided by the Board.

PROBATIONARY PERIOD

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

PROBATIONARY TERMS AND RESTRICTIONS

MS. SHIRLEY shall:

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

Evaluations

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

standards of safe nursing care.

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

Monitoring

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

MS. SHIRLEY shall:

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

8. **If recommended by the chemical dependency evaluation**, attend a minimum of one (1) meeting per week of a support or peer group meeting approved in advance by the Board, or a Twelve Step program, and provide satisfactory documentation of such attendance to the Board every six (6) months.

Employment Conditions

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

Reporting Requirements for Probationary Period

14. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
15. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
16. Submit any and all information that the Board may request regarding **MS. SHIRLEY's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.

17. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.
18. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: monitoring@nursing.ohio.gov or by mail to:

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

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

LICENSE RESTRICTIONS

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

Temporary Narcotic Restriction

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

Permanent Practice Restrictions

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

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

Director of Nursing, Nurse Manager, Vice President of Nursing.

FAILURE TO COMPLY

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

DURATION

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

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

Motion adopted by a majority vote of the Board members present with Matthew Carle, Daniel Lehmann and Sandra Ranck.

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September, 2018.

Haas, Cara Avis (fka "Cara Avis Poynter"), P.N. 122447 (CASE #17-2809)

Action: It was moved Erin Keels, seconded by Sandra Beidelschies, that the the Board accept all of the Findings of Fact, Conclusions of Law, and the Recommendation in the Hearing Examiner's Report and Recommendation and that **MS. HAAS's** license to practice nursing as a licensed practical nurse be **PERMANENTLY REVOKED**.

Motion adopted by a majority vote of the Board members present with Matthew Carle, Daniel Lehmann and Sandra Ranck.

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September, 2018.

Kolanko, Lindsay Nicole, R.N. 333176 (CASE #18-0121)

Action: It was moved by Joanna Ridgeway, seconded by Nancy Fellows, that the

Board redact a social security number from Exhibit 13, page 1 in accordance with the Federal Privacy Act of 1974. It was further moved that the Board accept all of the Findings of Fact and Conclusions of Law, and modify the Recommendation in the Hearing Examiner's Report and Recommendation, and that **MS. KOLANKO's** license to practice nursing as a registered nurse in the State of Ohio be suspended for an indefinite period of time but not less than two (2) years with the conditions for reinstatement set forth below, and following reinstatement, **MS. KOLANKO's** license to practice nursing as a registered nurse shall be subject to a stayed suspension under the probationary terms and restrictions set forth below for a minimum period of three (3) years including the **Permanent Narcotic Restrictions, unless otherwise approved in advance, and Temporary Practice Restrictions**, set forth below.

The rationale for the modification is the following: The Board in its expertise has determined that a longer period of suspension and Permanent Narcotic Restrictions, unless otherwise approved, are necessary to adequately protect the public and will afford **MS. KOLANKO** a final opportunity to maintain sobriety.

SUSPENSION OF LICENSE

MS. KOLANKO's license is suspended for an indefinite period of time but not less than two (2) years.

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

CONDITIONS FOR REINSTATEMENT

MS. KOLANKO shall:

1. Be determined, by the Board or its designee, to be able to practice nursing according to acceptable and prevailing standards of safe nursing care based upon an interview and review of the documentation specified in this Order.
2. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
3. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
4. **Within ninety (90) days immediately prior to requesting reinstatement**, submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MS. KOLANKO**, including a

check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MS. KOLANKO's** criminal records check to the Board. The Board will not consider a request for reinstatement until **MS. KOLANKO's** completed criminal records check, including the FBI check, is received by the Board.

Evaluations

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

Monitoring

7. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. KOLANKO's** history. **MS. KOLANKO** shall self-administer the prescribed drugs only in the manner prescribed.
8. Abstain completely from the use of alcohol or any products containing alcohol.
9. **For a minimum, continuous period of two (2) years immediately prior to requesting reinstatement**, submit, at **MS. KOLANKO's** expense and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Upon and after **MS. KOLANKO's** initiation of drug screening, refusal to submit such specimen, or failure to submit such specimen on the day she is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for

purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MS. KOLANKO** shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who has received a complete copy of this Order prior to prescribing for **MS. KOLANKO**.

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

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

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

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

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

Reporting Requirements for Suspension Period

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

12. Sign release of information forms allowing health professionals and other

organizations to submit the requested documentation directly to the Board.

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

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

16. Verify that the reports and documentation required by this Order are received in the Board office.
17. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.
18. Submit to the Board a completed application for reinstatement on the form provided by the Board.

PROBATIONARY PERIOD

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

PROBATIONARY TERMS AND RESTRICTIONS

MS. KOLANKO shall:

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

Evaluations

3. **Upon the request of the Board or its designee and within sixty (60) days of that request**, at **MS. KOLANKO's** expense, obtain a chemical

dependency evaluation by a chemical dependency professional approved by the Board or its designee and, prior to the evaluation, provide the chemical dependency professional with a copy of this Order. **MS. KOLANKO** shall execute releases to permit the chemical dependency professional to obtain any information deemed appropriate and necessary for the evaluation. The chemical dependency professional shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on **MS. KOLANKO's** license, and a statement as to whether **MS. KOLANKO** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.

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

Monitoring

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

MS. KOLANKO shall:

- a. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
- b. Update the list of treating practitioners with the Board within forty-

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

Employment Conditions

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

Reporting Requirements for Probationary Period

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

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

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

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

LICENSE RESTRICTIONS

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

Permanent Narcotic Restriction

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

Temporary Practice Restrictions

MS. KOLANKO shall not practice nursing as a registered nurse (1) in a patient's

residence; (2) for staffing agencies or pools; (3) for an individual or group of individuals who directly engage **MS. KOLANKO** to provide nursing services for fees, compensation, or other consideration or who engage **MS. KOLANKO** as a volunteer; or (4) as an independent contractor or for *locum tenens* assignments.

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

FAILURE TO COMPLY

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

DURATION

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

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

Motion adopted by a majority vote of the Board members present with Matthew Carle, Daniel Lehmann and Sandra Ranck.

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September, 2018.

Salak, Diane Marie (fka "Diane Krupka"), R.N. 176621 (CASE #16-6370)

Action: It was moved by Nancy Fellows, seconded by Barbara Douglas, that the Board grant the State's motion to admit additional evidence in the form of a patient key, which was admitted under seal according to Section 4723.28(I)(1), ORC, as State's Exhibit 1(a). It was further moved that the Board accept all of the Findings of Fact and Conclusions of Law, and modify the Recommendation in the Hearing

Examiner's Report and Recommendation, and that **MS. SALAK's** license to practice nursing as a registered nurse in the State of Ohio be suspended for an indefinite period of time with the conditions for reinstatement set forth below, and following reinstatement, **MS. SALAK's** license to practice nursing as a registered nurse shall be subject to a stayed suspension under the probationary terms and restrictions set forth below for a minimum period of three (3) years including the **Permanent Practice Restrictions**, set forth below.

The rationale for the modification is the following: The Board in its expertise has determined that a suspension with a chemical dependency evaluation, a fitness for duty evaluation, and a psychological evaluation, followed by three (3) years of probation with permanent practice restrictions is adequate to protect the public. **MS. SALAK** has been licensed since 1982 and has no previous discipline from the Board. Respondent's Exhibits at the hearing included excellence awards from her long-term employer, the Cleveland Clinic.

SUSPENSION OF LICENSE

MS. SALAK's license is suspended for an indefinite period of time.

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

CONDITIONS FOR REINSTATEMENT

MS. SALAK shall:

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

criminal records check, including the FBI check, is received by the Board.

Evaluations

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

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

Reporting Requirements for Suspension Period

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

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

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

in residential or home address or telephone number.

18. Submit to the Board a completed application for reinstatement on the form provided by the Board.

PROBATIONARY PERIOD

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

PROBATIONARY TERMS AND RESTRICTIONS

MS. SALAK shall:

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

Employment Conditions

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

Reporting Requirements for Probationary Period

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

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

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

LICENSE RESTRICTIONS

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

Permanent Practice Restrictions

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

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

FAILURE TO COMPLY

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

DURATION

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

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

Joanna Ridgeway voted no. Motion adopted by a majority vote of the Board members present with Matthew Carle, Daniel Lehmann and Sandra Ranck.

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September, 2018.

Morgan, Angelina R., P.N. 150873 (CASE #17-6686, #17-7512)

Action: It was moved by Barbara Douglas, seconded by Nancy Fellows, that the Board accept all of the Findings of Fact and Conclusions of Law, and modify the Recommendation in the Hearing Examiner's Report and Recommendation, and that **MS. MORGAN's** license to practice nursing as a licensed practical nurse in the State of Ohio be suspended for an indefinite period of time but not less than one (1) year with the conditions for reinstatement set forth below, and following reinstatement, **MS. MORGAN's** license to practice nursing as a licensed practical nurse shall be subject to a stayed suspension under the probationary terms and restrictions set forth below for a minimum period of one (1) year including the **Temporary Narcotic Restrictions, unless otherwise approved in advance, and Temporary Practice Restrictions**, set forth below.

The rationale for the modification is the following: The Board in its expertise has determined that a minimum stated one-year period of suspension, with drug and alcohol testing, is necessary to adequately protect the public.

SUSPENSION OF LICENSE

MS. MORGAN's license is suspended for an indefinite period of time but not less than one (1) year.

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

CONDITIONS FOR REINSTATEMENT

MS. MORGAN shall:

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

Evaluations

6. **Within sixty (60) days immediately prior to requesting reinstatement,**

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

Monitoring

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

addresses and telephone numbers; and

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

Reporting Requirements for Suspension Period

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

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

16. Verify that the reports and documentation required by this Order are received in the Board office.
17. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.
18. Submit to the Board a completed application for reinstatement on the form provided by the Board.

PROBATIONARY PERIOD

Following reinstatement, the suspension shall be stayed and **MS. MORGAN's** license shall be subject to Probationary Terms and Restrictions for a minimum period of one (1) year.

PROBATIONARY TERMS AND RESTRICTIONS

MS. MORGAN shall:

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

Monitoring

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

MS. MORGAN shall:

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

Employment Conditions

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

Reporting Requirements for Probationary Period

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

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

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

LICENSE RESTRICTIONS

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

Temporary Narcotic Restriction

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

Temporary Practice Restrictions

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

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

FAILURE TO COMPLY

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

DURATION

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

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

Motion adopted by a majority vote of the Board members present with Matthew Carle, Daniel Lehmann and Sandra Ranck.

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September, 2018.

Alnoubani, Muna M., R.N. 304829 (CASE #15-3530)

Action: It was moved by Deborah Knueve, seconded by Barbara Douglas, that the Board determine that, although Respondent's "Objections to August 20, 2018

Report and Recommendations” states she requested an extension to submit objections which was not “well-taken”, Respondent did not file a request with the Board, and as such, there was no ruling by the Board on any request. In addition, it was further moved that the Board grant the State’s Motion filed September 21, 2018, to admit as additional evidence a USPS certified mail tracking record showing the Board did mail the Report and Recommendation to Respondent’s attorney via certified mail, but the attorney failed to claim the mail.

It was further moved that the Board accept all of the Findings of Fact, Conclusions of Law, and the Recommendation in the Hearing Examiner’s Report and Recommendation and that **MS. ALNOUBANI’s** license to practice nursing as a registered nurse be **PERMANENTLY REVOKED**.

Motion adopted by a majority vote of the Board members present with Matthew Carle, Daniel Lehmann, Sandra Ranck, and Joanna Ridgeway abstaining.

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September, 2018.

Noggle, Mary Elizabeth, P.N. 131533 (CASE #15-6616, #15-5225)

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

SUSPENSION OF LICENSE

MS. NOGGLE’s license is suspended for an indefinite period of time but not less than two (2) years.

The Board may reinstate **MS. NOGGLE’s** license if **MS. NOGGLE** submits a written request for reinstatement and is determined by the Board or its designee to have complied with the Conditions for Reinstatement.

CONDITIONS FOR REINSTATEMENT

MS. NOGGLE shall:

1. Be determined, by the Board or its designee, to be able to practice nursing according to acceptable and prevailing standards of safe nursing care

based upon an interview and review of the documentation specified in this Order.

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

Educational Requirements

5. Successfully complete and submit satisfactory documentation of successful completion of the following continuing education, or other comparable course(s) approved in advance by the Board or its designee: fifteen (15) hours Chemical Dependency and Substance Abuse; five (5) hours Documentation; five (5) hours Medication Administration; five (5) hours Professional Accountability and Legal Liability for Nurses; five (5) hours Patient Rights; and two (2) hours Ohio Nursing Law and Rules. Continuing education required by this Order **does not meet the continuing education requirements for license renewal**.
6. **Upon request of the Board or its designee**, establish contact with a nursing educator, approved in advance by the Board or its designee, who has no less than a master's degree and who is affiliated with a nursing educational program.
 - a. Have the educator provide the Board with a written report of an assessment of **MS. NOGGLE**, which identifies **MS. NOGGLE's** knowledge/practice deficiencies and remedial educational needs.
 - b. Prior to the assessment, provide the nursing educator with a copy of this Order and submit to any nursing skills or knowledge assessments required by the educator. **MS. NOGGLE** shall also execute releases prior to the assessment to permit the educator to obtain any information deemed appropriate and necessary for the assessment including information from **MS. NOGGLE's** employer(s), former employers, and Board staff.

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

Evaluations

7. **Within three (3) months immediately prior to requesting reinstatement**, at **MS. NOGGLE's** expense, obtain a mental health evaluation from a Board approved evaluator and provide the Board with complete documentation of such evaluation. Prior to the evaluation, **MS. NOGGLE** shall provide the mental health evaluator with a copy of this Order. **MS. NOGGLE** shall execute releases to permit the mental health evaluator to obtain any information deemed appropriate and necessary for the evaluation. The mental health evaluator shall submit a written opinion to the Board that

- includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on **MS. NOGGLE's** license, and a statement as to whether **MS. NOGGLE** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
8. Provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the mental health evaluator described above until released. Further, the Board may utilize the mental health evaluator's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on **MS. NOGGLE's** license.
 9. **Within three (3) months immediately prior to requesting reinstatement**, at **MS. NOGGLE's** expense, obtain a chemical dependency evaluation by a chemical dependency professional approved by the Board or its designee and, prior to the evaluation, provide the chemical dependency professional with a copy of this Order. **MS. NOGGLE** shall execute releases to permit the chemical dependency professional to obtain any information deemed appropriate and necessary for the evaluation. The chemical dependency professional shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on **MS. NOGGLE's** license, and a statement as to whether **MS. NOGGLE** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
 10. Provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the chemical dependency professional described above until released. Further, the Board may utilize the professional's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on **MS. NOGGLE's** license.

Monitoring

11. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. NOGGLE's** history. **MS. NOGGLE** shall self-administer the prescribed drugs only in the manner prescribed.
12. **If recommended in the chemical dependency or mental health evaluation**, abstain completely from the use of alcohol or any products containing alcohol.
13. **For a minimum, continuous period of one (1) year immediately prior to requesting reinstatement**, submit, at **MS. NOGGLE's** expense and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Upon and after **MS. NOGGLE's** initiation of drug screening, refusal to submit such specimen, or failure to submit such

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

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

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

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

Reporting Requirements for Suspension Period

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

days of the occurrence of the violation.

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

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

20. Verify that the reports and documentation required by this Order are received in the Board office.
21. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.
22. Submit to the Board a completed application for reinstatement on the form provided by the Board.

PROBATIONARY PERIOD

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

PROBATIONARY TERMS AND RESTRICTIONS

MS. NOGGLE shall:

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

Monitoring

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

MS. NOGGLE shall:

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

Employment Conditions

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

Reporting Requirements for Probationary Period

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

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

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

LICENSE RESTRICTIONS

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

Permanent Narcotic Restriction

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

Permanent Practice Restrictions

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

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

FAILURE TO COMPLY

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

DURATION

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

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

Motion adopted by a majority vote of the Board members present with Matthew Carle, Daniel Lehmann and Sandra Ranck.

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September, 2018.

Shaw, Marlena Ashley, P.N. Applicant (CASE #17-6496)

Action: It was moved by Brenda Boggs, seconded by Patricia Sharpnack, that the Board accept all of the Findings of Fact, Conclusions of Law, and the Recommendation in the Hearing Examiner's Report and Recommendation, and that **MS. SHAW's** application to practice nursing as a licensed practical nurse in the State of Ohio be **DENIED** with conditions for re-application set forth below.

CONDITIONS FOR REAPPLICATION

MS. SHAW may submit a new application for licensure as a licensed practical nurse if it is determined by the Board or its designee that **MS. SHAW** has complied with the Conditions for Reapplication.

MS. SHAW shall:

1. Submit to the Board satisfactory documentation that her Texas license to practice as a licensed vocational nurse is current and valid, and not the subject of any pending disciplinary proceeding.

Motion adopted by a majority vote of the Board members present with Matthew Carle, Daniel Lehmann and Sandra Ranck.

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September, 2018.

BOARD PANEL

Nogueira, Rae Marie, R.N. 304847 (CASE #17-5151)

Action: It was moved by Sandra Beidelschies, seconded by Brenda Boggs, that the Board accept all of the Findings of Fact and Conclusions, and modify the Recommendation in the Board Hearing Committee's Report and Recommendation, and that **MS. NOGUEIRA's** license to practice nursing as a registered nurse in the State of Ohio be suspended for an indefinite period of time with the conditions for reinstatement set forth below, and following reinstatement, **MS. NOGUEIRA's** license to practice nursing as a registered nurse shall be subject to a stayed suspension under the probationary terms and restrictions set forth below for a minimum period of two (2) years including the **Temporary Practice Restrictions, unless otherwise approved in advance**, set forth below.

The rationale for the modification is the following: The Board in its expertise has determined that a fine and one (1) year of drug and alcohol testing, prior to reinstatement, is necessary to adequately protect the public.

SUSPENSION OF LICENSE

MS. NOGUEIRA's license is suspended for an indefinite period of time.

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

CONDITIONS FOR REINSTATEMENT

MS. NOGUEIRA shall:

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

practice of nursing in Ohio.

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

Educational Requirements

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

Evaluations

7. **Within three (3) months immediately prior to requesting reinstatement**, at **MS. NOGUEIRA's** expense, obtain a chemical dependency evaluation by a chemical dependency professional approved by the Board or its designee and, prior to the evaluation, provide the chemical dependency professional with a copy of this Order. **MS. NOGUEIRA** shall execute releases to permit the chemical dependency professional to obtain any information deemed appropriate and necessary for the evaluation. The chemical dependency professional shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on **MS. NOGUEIRA's** license, and a statement as to whether **MS. NOGUEIRA** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
8. Provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the chemical dependency

professional described above until released. Further, the Board may utilize the professional's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on **MS. NOGUEIRA's** license.

Monitoring

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

forty-eight (48) hours of being treated by another practitioner;

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

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

Reporting Requirements for Suspension Period

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

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

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

20. Submit to the Board a completed application for reinstatement on the form provided by the Board.

PROBATIONARY PERIOD

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

PROBATIONARY TERMS AND RESTRICTIONS

MS. NOGUEIRA shall:

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

Monitoring

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

MS. NOGUEIRA shall:

- a. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;

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

Employment Conditions

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

Reporting Requirements for Probationary Period

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

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

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

LICENSE RESTRICTIONS

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

Temporary Practice Restrictions

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

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

FAILURE TO COMPLY

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

DURATION

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

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

Motion adopted by a majority vote of the Board members present with Matthew Carle, Daniel Lehmann and Sandra Ranck.

NO REQUEST FOR HEARING

Carmichael, Crystalee, P.N. 119499 (CASE #18-2008)

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

set forth below for a minimum period of one (1) year including the **Temporary Narcotic and Temporary Practice Restrictions**, set forth below.

SUSPENSION OF LICENSE

MS. CARMICHAEL's license is suspended for an indefinite period of time.

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

CONDITIONS FOR REINSTATEMENT

MS. CARMICHAEL shall:

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

Educational Requirements

6. Successfully complete and submit satisfactory documentation of successful completion of the following continuing education, or other comparable course(s) approved in advance by the Board or its designee: five (5) hours Medication Administration, five (5) hours Substance Use Disorder, two (2)

hours Scope of Practice, and one (1) hour Ohio Nursing Law and Rules. Continuing education required by this Order **does not meet the continuing education requirements for license renewal.**

Evaluations

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

Monitoring

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

require a daily call-in process. The specimens submitted by **MS. CARMICHAEL** shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who has received a complete copy of this Order prior to prescribing for **MS. CARMICHAEL**.

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

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

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

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

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

Reporting Requirements for Suspension Period

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

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

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

18. Verify that the reports and documentation required by this Order are received in the Board office.
19. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.
20. Submit to the Board a completed application for reinstatement on the form provided by the Board.

PROBATIONARY PERIOD

Following reinstatement, the suspension shall be stayed and **MS. CARMICHAEL's** license shall be subject to Probationary Terms and Restrictions for a minimum period of one (1) year.

PROBATIONARY TERMS AND RESTRICTIONS

MS. CARMICHAEL shall:

1. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
2. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
3. Establish contact with a nursing educator, approved in advance by the Board or its designee, who has no less than a master's degree and who is affiliated with a nursing educational program.

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

Evaluations

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

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

Monitoring

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

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

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

MS. CARMICHAEL shall:

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

Employment Conditions

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

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

Reporting Requirements for Probationary Period

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

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

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

LICENSE RESTRICTIONS

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

Temporary Narcotic Restriction

MS. CARMICHAEL shall not administer, have access to, or possess (except as prescribed for **MS. CARMICHAEL's** use by another so authorized by law who has full knowledge of **MS. CARMICHAEL's** history) any narcotics, other controlled substances, or mood altering drugs. In addition, **MS. CARMICHAEL** shall not

count narcotics or possess or carry any work keys for locked medication carts, cabinets, drawers, or containers. **MS. CARMICHAEL** shall not call in or order prescriptions or prescription refills.

Temporary Practice Restrictions

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

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

FAILURE TO COMPLY

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

DURATION

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

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

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

This ORDER shall become effective immediately and is hereby entered upon the

Journal of the Board for the 27th day of September 2018.

Chanowski, Kevin M., P.N. 129150 (CASE #18-1881)

Action: It was moved by Brenda Boggs, seconded by Patricia Sharpnack, that upon consideration of the charges stated against **KEVIN M. CHANOWSKI** in the Notice of Automatic Suspension and Opportunity for Hearing (Notice) and evidence supporting the charges, the Board find that **MR. CHANOWSKI** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice, and that **MR. CHANOWSKI's** license to practice nursing as a licensed practical nurse be suspended for an indefinite period of time with the conditions for reinstatement set forth below, and following reinstatement, **MR. CHANOWSKI's** license to practice nursing as a licensed practical nurse shall be subject to a stayed suspension under the probationary terms and restrictions set forth below for a minimum period of two (2) years including the **Temporary Narcotic Restrictions**, set forth below.

SUSPENSION OF LICENSE

MR. CHANOWSKI's license is suspended for an indefinite period of time.

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

CONDITIONS FOR REINSTATEMENT

MR. CHANOWSKI shall:

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

5. Pay a fine of five hundred dollars (\$500.00), payable: online by credit or debit card; or payable to the "Treasurer, State of Ohio," by certified check, cashier check, or money order mailed to the attention of the Compliance Unit, Ohio Board of Nursing, 17 South High Street, Suite 660, Columbus, OH 43215-3466.
6. Submit documentation of his full compliance with the requirements imposed by the Summit County Court of Common Pleas in Case Number CR-2017-03-0873.

Evaluations

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

treatment and monitoring, any additional restrictions that should be placed on **MR. CHANOWSKI's** license, and a statement as to whether **MR. CHANOWSKI** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.

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

Monitoring

11. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to him by another so authorized by law who has full knowledge of **MR. CHANOWSKI's** history. **MR. CHANOWSKI** shall self-administer the prescribed drugs only in the manner prescribed.
12. Abstain completely from the use of alcohol or any products containing alcohol.
13. **For a minimum, continuous period of ninety (90) days immediately prior to requesting reinstatement**, submit, at **MR. CHANOWSKI's** expense and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Upon and after **MR. CHANOWSKI's** initiation of drug screening, refusal to submit such specimen, or failure to submit such specimen on the day he is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MR. CHANOWSKI** shall be negative, except for substances prescribed, administered, or dispensed to him by another so authorized by law who has received a complete copy of this Order prior to prescribing for **MR. CHANOWSKI**.
 - a. ***Prior*** to initiating drug screening:
 - i. Provide a copy of this Order to all treating practitioners;
 - ii. Provide to the Board a list of all treating practitioners, including addresses and telephone numbers; and
 - iii. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed,

administered, or dispensed to **MR. CHANOWSKI**, *and* submit the report directly to the Board.

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

Reporting Requirements for Suspension Period

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

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

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

20. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.
21. Submit to the Board a completed application for reinstatement on the form provided by the Board.

PROBATIONARY PERIOD

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

PROBATIONARY TERMS AND RESTRICTIONS

MR. CHANOWSKI shall:

1. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
2. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
3. Submit documentation of his full compliance with the requirements imposed by the Summit County Court of Common Pleas in Case Number CR-2017-03-0873.

Monitoring

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

law who has received a complete copy of this Order prior to prescribing for **MR. CHANOWSKI**.

MR. CHANOWSKI shall:

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

Employment Conditions

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

Reporting Requirements for Probationary Period

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

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

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

LICENSE RESTRICTIONS

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

Temporary Narcotic Restriction

MR. CHANOWSKI shall not administer, have access to, or possess (except as prescribed for **MR. CHANOWSKI's** use by another so authorized by law who has full knowledge of **MR. CHANOWSKI's** history) any narcotics, other controlled substances, or mood altering drugs for a minimum period of **twelve (12) months** in which **MR. CHANOWSKI** is working in a position that requires a nursing license. At any time after the minimum period of twelve (12) months previously described, **MR. CHANOWSKI** may submit a written request to the Board to have

this restriction re-evaluated. In addition, **MR. CHANOWSKI** shall not count narcotics or possess or carry any work keys for locked medication carts, cabinets, drawers, or containers. **MR. CHANOWSKI** shall not call in or order prescriptions or prescription refills.

FAILURE TO COMPLY

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

DURATION

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

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

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

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September 2018.

Plaster, Christine Irene, P.N. 113853 (CASE #17-6366)

Action: It was moved by Sandra Beidelschies, seconded by Brenda Boggs, that upon consideration of the charges stated against **CHRISTINE IRENE PLASTER** in the Notice of Automatic Suspension and Opportunity for Hearing (Notice) and evidence supporting the charges, the Board find that **MS. PLASTER** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice, and that **MS. PLASTER's** license to practice nursing as a licensed practical nurse be suspended for an indefinite period of time but not less than one (1) year with the conditions for reinstatement set forth below, and following reinstatement, **MS. PLASTER's** license to practice nursing as a licensed practical nurse shall be subject to a stayed suspension under the probationary terms and restrictions set forth below for a minimum period of two (2) years.

SUSPENSION OF LICENSE

MS. PLASTER's license is suspended for an indefinite period of time but not less than one (1) year.

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

CONDITIONS FOR REINSTATEMENT

MS. PLASTER shall:

1. Be determined, by the Board or its designee, to be able to practice nursing according to acceptable and prevailing standards of safe nursing care based upon an interview and review of the documentation specified in this Order.
2. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
3. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
4. **Within ninety (90) days immediately prior to requesting reinstatement,** submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MS. PLASTER**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MS. PLASTER's** criminal records check to the Board. The Board will not consider a request for reinstatement until **MS. PLASTER's** completed criminal records check, including the FBI check, is received by the Board.
5. Pay a fine of five hundred dollars (\$500.00), payable: online by credit or debit card; or payable to the "Treasurer, State of Ohio," by certified check, cashier check, or money order mailed to the attention of the Compliance Unit, Ohio Board of Nursing, 17 South High Street, Suite 660, Columbus, OH 43215-3466.
6. Submit documentation of her full compliance with the requirements imposed by the State of Florida, Circuit Court Seventh Judicial District In And For Volusia County, in Case Number 2015 100789 CFDL.

Educational Requirements

7. Successfully complete and submit satisfactory documentation of successful

completion of the following continuing education, or other comparable course(s) approved in advance by the Board or its designee: five (5) hours Substance Abuse, and two (2) hours Ohio Nursing Laws and Rules. Continuing education required by this Order **does not meet the continuing education requirements for license renewal.**

Evaluations

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

Monitoring

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

call-in process. The specimens submitted by **MS. PLASTER** shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who has received a complete copy of this Order prior to prescribing for **MS. PLASTER**.

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

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

Reporting Requirements for Suspension Period

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

statements, information, or documentation to the Board.

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

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

18. Verify that the reports and documentation required by this Order are received in the Board office.
19. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.
20. Submit to the Board a completed application for reinstatement on the form provided by the Board.

PROBATIONARY PERIOD

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

PROBATIONARY TERMS AND RESTRICTIONS

MS. PLASTER shall:

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

Evaluations

3. **Upon the request of the Board or its designee and within sixty (60) days of that request**, at **MS. PLASTER's** expense, obtain a chemical dependency evaluation by a chemical dependency professional approved by the Board or its designee and, prior to the evaluation, provide the chemical dependency professional with a copy of this Order and the Notice. **MS. PLASTER** shall execute releases to permit the chemical dependency professional to obtain any information deemed appropriate and necessary for the evaluation. The chemical dependency professional shall submit a written opinion to the Board that includes diagnoses, recommendations for

treatment and monitoring, any additional restrictions that should be placed on **MS. PLASTER's** license, and a statement as to whether **MS. PLASTER** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.

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

Monitoring

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

MS. PLASTER shall:

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

report for any and all substances prescribed, administered, or dispensed to **MS. PLASTER** *and* submit the report directly to the Board.

Employment Conditions

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

Reporting Requirements for Probationary Period

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

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

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

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

FAILURE TO COMPLY

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

DURATION

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

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

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

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September 2018.

Smith, Tiffany Louise, P.N. 127805 (CASE #17-7262)

Action: It was moved by Erin Keels, seconded by Sandra Beidelschies, that upon consideration of the charges stated against **TIFFANY LOUISE SMITH** in the Notice of Automatic Suspension and Opportunity for Hearing (Notice) and evidence supporting the charges, the Board find that **MS. SMITH** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice, and that **MS. SMITH's** license to practice nursing as a licensed practical nurse be suspended for an indefinite period of time with the conditions for reinstatement set forth below, and following reinstatement, **MS. SMITH's** license to practice nursing as a licensed practical nurse shall be subject to a stayed suspension under the probationary terms and restrictions set forth below for a minimum period of one (1) year including the **Temporary Practice Restrictions, unless otherwise approved in advance**, set forth below.

SUSPENSION OF LICENSE

MS. SMITH's license is suspended for an indefinite period of time.

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

CONDITIONS FOR REINSTATEMENT

MS. SMITH shall:

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

cashier check, or money order mailed to the attention of the Compliance Unit, Ohio Board of Nursing, 17 South High Street, Suite 660, Columbus, OH 43215-3466.

Educational Requirements

6. Successfully complete and submit satisfactory documentation of successful completion of the following continuing education, or other comparable course(s) approved in advance by the Board or its designee: five (5) hours Substance Use Disorder, and one (1) hour Ohio Nursing Law and Rules. Continuing education required by this Order **does not meet the continuing education requirements for license renewal.**

Evaluations

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

Monitoring

9. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. SMITH's** history. **MS. SMITH** shall self-administer the prescribed drugs only in the manner prescribed.
10. **Within ninety (90) days immediately prior to requesting reinstatement,** submit, at **MS. SMITH's** expense and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Upon and

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

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

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

Reporting Requirements for Suspension Period

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

12. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.

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

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

16. Verify that the reports and documentation required by this Order are received in the Board office.
17. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.
18. Submit to the Board a completed application for reinstatement on the form provided by the Board.

PROBATIONARY PERIOD

Following reinstatement, the suspension shall be stayed and **MS. SMITH's** license shall be subject to Probationary Terms and Restrictions for a minimum period of one (1) year.

PROBATIONARY TERMS AND RESTRICTIONS

MS. SMITH shall:

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

Evaluations

3. **Upon the request of the Board or its designee and within sixty (60) days of that request**, at **MS. SMITH's** expense, obtain a chemical dependency evaluation by a chemical dependency professional approved by the Board or its designee and, prior to the evaluation, provide the

chemical dependency professional with a copy of this Order and the Notice. **MS. SMITH** shall execute releases to permit the chemical dependency professional to obtain any information deemed appropriate and necessary for the evaluation. The chemical dependency professional shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on **MS. SMITH's** license, and a statement as to whether **MS. SMITH** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.

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

Monitoring

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

MS. SMITH shall:

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

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

Employment Conditions

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

Reporting Requirements for Probationary Period

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

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

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

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

LICENSE RESTRICTIONS

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

Temporary Practice Restrictions

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

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

FAILURE TO COMPLY

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

regarding the charges.

DURATION

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

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

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

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September 2018.

Weaver, Paulette, P.N. 143033 (CASE #18-0377)

Action: It was moved by Daniel Lehmann, seconded by Erin Keels, that upon consideration of the charges stated against **PAULETTE WEAVER** in the Notice of Automatic Suspension and Opportunity for Hearing (Notice) and evidence supporting the charges, the Board find that **MS. WEAVER** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice, and that **MS. WEAVER's** license to practice nursing as a licensed practical nurse be suspended for an indefinite period of time with the conditions for reinstatement set forth below, and following reinstatement, **MS. WEAVER's** license to practice nursing as a licensed practical nurse shall be subject to a stayed suspension under the probationary terms and restrictions set forth below for a minimum period of one (1) year.

SUSPENSION OF LICENSE

MS. WEAVER's license is suspended for an indefinite period of time.

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

CONDITIONS FOR REINSTATEMENT

MS. WEAVER shall:

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

Educational Requirements

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

Evaluation

6. **Within ninety (90) days immediately prior to requesting reinstatement**, at **MS. WEAVER's** expense, obtain a chemical dependency evaluation by a chemical dependency professional approved by the Board or its designee and, prior to the evaluation, provide the chemical dependency professional with a copy of this Order and the Notice. **MS. WEAVER** shall execute releases to permit the chemical dependency professional to obtain any information deemed appropriate and necessary for the evaluation. The chemical dependency professional shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on **MS. WEAVER's** license, and a statement as to whether **MS. WEAVER** is

capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.

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

Monitoring

8. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. WEAVER's** history. **MS. WEAVER** shall self-administer the prescribed drugs only in the manner prescribed.
9. Abstain completely from the use of alcohol or any products containing alcohol.
10. **For a minimum, continuous period of ninety (90) days immediately prior to requesting reinstatement**, submit, at **MS. WEAVER's** expense and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Upon and after **MS. WEAVER's** initiation of drug screening, refusal to submit such specimen, or failure to submit such specimen on the day she is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MS. WEAVER** shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who has received a complete copy of this Order prior to prescribing for **MS. WEAVER**.
 - a. **Prior** to initiating drug screening:
 - i. Provide a copy of this Order to all treating practitioners;
 - ii. Provide to the Board a list of all treating practitioners, including addresses and telephone numbers; and
 - iii. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. WEAVER**, **and** submit the report directly to the Board.

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

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

11. **For a minimum, continuous period of ninety (90) days immediately prior to requesting reinstatement**, attend a minimum of one (1) meeting per week of a support or peer group meeting approved in advance by the Board, or a Twelve Step program, and provide satisfactory documentation of such attendance to the Board prior to reinstatement.

Reporting Requirements for Suspension Period

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

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

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

18. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.
19. Submit to the Board a completed application for reinstatement on the form provided by the Board.

PROBATIONARY PERIOD

Following reinstatement, the suspension shall be stayed and **MS. WEAVER's** license shall be subject to Probationary Terms and Restrictions for a minimum period of one (1) year.

PROBATIONARY TERMS AND RESTRICTIONS

MS. WEAVER shall:

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

Monitoring

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

MS. WEAVER shall:

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

Employment Conditions

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

Reporting Requirements for Probationary Period

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

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Columbus, OH 43215-3466**

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

FAILURE TO COMPLY

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

DURATION

The Board may only alter the probationary period imposed by this Order if: (1) the Board determines that **MS. WEAVER** has complied with all aspects of this Order; and (2) the Board determines that **MS. WEAVER** is able to practice nursing

according to acceptable and prevailing standards of safe nursing care without Board monitoring, based upon an interview with **MS. WEAVER** and review of the reports as required herein.

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

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

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September 2018.

Hempfling, Ruth Cecilia, R.N. 221696 (CASE #17-6978)

Action: It was moved by Joanna Ridgeway, seconded by Nancy Fellows, that upon consideration of the charges stated against **RUTH CECILIA HEMPFLING** in the Notice of Immediate Suspension and Opportunity for Hearing (Notice) and evidence supporting the charges, the Board find that **MS. HEMPFLING** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice, and that **MS. HEMPFLING's** license to practice nursing as a registered nurse be suspended for an indefinite period of time but not less than two (2) years with the conditions for reinstatement set forth below, and following reinstatement, **MS. HEMPFLING's** license to practice nursing as a registered nurse shall be subject to a stayed suspension under the probationary terms and restrictions set forth below for a minimum period of three (3) years including the **Temporary Narcotic and Permanent Practice Restrictions, unless otherwise approved in advance**, set forth below.

SUSPENSION OF LICENSE

MS. HEMPFLING's license is suspended for an indefinite period of time but not less than two (2) years.

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

CONDITIONS FOR REINSTATEMENT

MS. HEMPFLING shall:

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

2. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
3. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
4. **Within ninety (90) days immediately prior to requesting reinstatement**, submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MS. HEMPFLING**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MS. HEMPFLING's** criminal records check to the Board. The Board will not consider a request for reinstatement until **MS. HEMPFLING's** completed criminal records check, including the FBI check, is received by the Board.
5. Submit documentation of her full compliance with the requirements imposed by the Ripley County, Indiana Superior Court in Case Number 69D01-1702-F6-020.

Evaluations

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

Monitoring

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

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

administered, or dispensed to **MS. HEMPFLING** *and* submit the report directly to the Board.

Reporting Requirements for Suspension Period

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

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

16. Verify that the reports and documentation required by this Order are received in the Board office.
17. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.
18. Submit to the Board a completed application for reinstatement on the form provided by the Board.

PROBATIONARY PERIOD

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

PROBATIONARY TERMS AND RESTRICTIONS

MS. HEMPFLING shall:

1. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
2. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
3. Submit documentation of her full compliance with the requirements imposed by the Ripley County, Indiana Superior Court in Case Number 69D01-1702-F6-020.

Evaluations

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

Monitoring

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

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

MS. HEMPFLING shall:

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

Employment Conditions

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

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

Reporting Requirements for Probationary Period

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

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Ohio Board of Nursing
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Columbus, OH 43215-3466**

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

LICENSE RESTRICTIONS

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

Temporary Narcotic Restriction

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

Permanent Practice Restrictions

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

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

FAILURE TO COMPLY

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

DURATION

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

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

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

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September 2018.

Isaac, Shauntae R., P.N. 122893 (CASE #17-7080)

Action: It was moved by Nancy Fellows, seconded by Joanna Ridgeway, that upon consideration of the charges stated against **SHAUNTAE R. ISAAC** in the Notice of Immediate Suspension and Opportunity for Hearing (Notice) and evidence supporting the charges, the Board find that **MS. ISAAC** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice, and that **MS. ISAAC's** license to practice nursing as a licensed practical nurse be suspended for an indefinite period of time with the conditions for reinstatement set forth below, and following reinstatement, **MS. ISAAC's** license to practice nursing as a licensed practical nurse shall be subject to a stayed suspension under the probationary terms and restrictions set forth below for a minimum period of two (2) years including the **Temporary Narcotic and Temporary Practice Restrictions**, set forth below.

SUSPENSION OF LICENSE

MS. ISAAC's license is suspended for an indefinite period of time.

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

CONDITIONS FOR REINSTATEMENT

MS. ISAAC shall:

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

as requested by the Board or its designee.

4. **Within ninety (90) days immediately prior to requesting reinstatement**, submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MS. ISAAC**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MS. ISAAC's** criminal records check to the Board. The Board will not consider a request for reinstatement until **MS. ISAAC's** completed criminal records check, including the FBI check, is received by the Board.
5. Submit documentation of her full compliance with the requirements imposed by the Lucas County Court of Common Pleas in Case Number G-4801-CR-0201703118-000.

Monitoring

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

administered, or dispensed to **MS. ISAAC**, *and* submit the report directly to the Board.

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

Reporting Requirements for Suspension Period

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

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

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

15. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.
16. Submit to the Board a completed application for reinstatement on the form provided by the Board.

PROBATIONARY PERIOD

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

PROBATIONARY TERMS AND RESTRICTIONS

MS. ISAAC shall:

1. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
2. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
3. Submit documentation of her full compliance with the requirements imposed by the Lucas County Court of Common Pleas in Case Number G-4801-CR-0201703118-000.

Monitoring

4. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. ISAAC's** history. **MS. ISAAC** shall self-administer prescribed drugs only in the manner prescribed.
5. Abstain completely from the use of alcohol or any products containing alcohol.
6. Submit, at her expense, and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. **MS. ISAAC may request release from this requirement after one (1) year of the probationary period.** Refusal to submit such specimen, or failure to submit such specimen on the day she is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MS. ISAAC** shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who has received a complete copy of

this Order prior to prescribing for **MS. ISAAC**.

MS. ISAAC shall:

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

Employment Conditions

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

Reporting Requirements for Probationary Period

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

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

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

LICENSE RESTRICTIONS

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

Temporary Narcotic Restriction

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

Temporary Practice Restrictions

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

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

FAILURE TO COMPLY

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

DURATION

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

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

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

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September 2018.

Page, Tammy Lynn, P.N. 109984 (CASE #17-3391)

Action: It was moved by Barbara Douglas, seconded by Nancy Fellows, that upon consideration of the charges stated against **TAMMY LYNN PAGE** in the Notice of Opportunity for Hearing (Notice) and evidence supporting the charges, the Board

find that **MS. PAGE** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice, that **MS. PAGE's** license to practice nursing as a licensed practical nurse be suspended and that the suspension is stayed subject to the probationary terms and restrictions set forth below for a minimum period of three (3) years including the **Temporary Narcotic and Temporary Practice Restrictions**, set forth below.

PROBATIONARY PERIOD

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

PROBATIONARY TERMS AND RESTRICTIONS

MS. PAGE shall:

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

Educational Requirements

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

Evaluations

5. **Within ninety (90) days of the execution of the probationary period**, **MS. PAGE** shall, at her expense, obtain a comprehensive physical examination by a Board approved physician for the purposes of evaluating

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

Monitoring

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

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

11. **Within ninety (90) days of the effective date of this Order**, begin submitting, at **MS. PAGE's** expense and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Upon and after **MS. PAGE's** initiation of drug screening, refusal to submit such specimen, or failure to submit such specimen on the day she is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MS. PAGE** shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who has received a complete copy of this Order prior to prescribing for **MS. PAGE**.

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

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

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

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

Employment Conditions

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

Reporting Requirements for Probationary Period

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

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

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

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

LICENSE RESTRICTIONS

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

Temporary Narcotic Restriction

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

Temporary Practice Restrictions

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

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

FAILURE TO COMPLY

The stay of **MS. PAGE's** suspension shall be lifted and **MS. PAGE's** license to

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

DURATION

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

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

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

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September 2018.

Stevens, Erin R. (aka "Erin Robbins"), R.N. 362740 (CASE #18-1138, #17-7551)
Action: It was moved by Deborah Knueve, seconded by Barbara Douglas, that upon consideration of the charges stated against **ERIN R. STEVENS** in the Notice of Immediate Suspension and Opportunity for Hearing (Notice) and evidence supporting the charges, the Board find that **MS. STEVENS** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice, and that **MS. STEVENS's** license to practice nursing as a registered nurse be suspended for an indefinite period of time with the conditions for reinstatement set forth below.

SUSPENSION OF LICENSE

MS. STEVENS's license is suspended for an indefinite period of time.

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

CONDITIONS FOR REINSTATEMENT

MS. STEVENS shall:

1. Be determined, by the Board or its designee, to be able to practice nursing according to acceptable and prevailing standards of safe nursing care based upon an interview and review of the documentation specified in this Order.
2. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
3. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
4. **Within ninety (90) days immediately prior to requesting reinstatement**, submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MS. STEVENS**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MS. STEVENS's** criminal records check to the Board. The Board will not consider a request for reinstatement until **MS. STEVENS's** completed criminal records check, including the FBI check, is received by the Board.
5. Submit documentation of her full compliance with the terms and conditions imposed by the Final Order Accepting Proposed Findings of Fact, Conclusions of Law and Order issued by the Indiana State Board of Nursing, dated December 1, 2017, and that her Indiana nursing license is current, valid, and unrestricted.
6. **Upon the request of the Board or its designee, prior to working in a position where a license to practice nursing is required**, complete and submit satisfactory documentation of completion of a nurse refresher course or an extensive orientation approved in advance by the Board or its designee.

Reporting Requirements for Suspension Period

7. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
8. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
9. Submit any and all information that the Board may request regarding **MS. STEVENS's** ability to practice nursing according to acceptable and

- prevailing standards of safe nursing practice.
10. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board.
 11. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: monitoring@nursing.ohio.gov or by mail to:

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

12. Verify that the reports and documentation required by this Order are received in the Board office.
13. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.
14. Submit to the Board a completed application for reinstatement on the form provided by the Board.

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

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September 2018.

Wears, Tonya Marie, P.N. 108768 (CASE #17-0967)

Action: It was moved by Patricia Sharpnack, seconded by Brenda Boggs, that upon consideration of the charges stated against **TONYA MARIE WEARS** in the Notice of Opportunity for Hearing (Notice) and evidence supporting the charges, the Board find that **MS. WEARS** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice, and that **MS. WEARS's** license to practice nursing as a licensed practical nurse be suspended and that the suspension is stayed subject to the probationary terms and restrictions set forth below for an indefinite period of time including the **Permanent Practice Restrictions**, set forth below.

PROBATIONARY PERIOD

MS. WEARS's license shall be subject to Probationary Terms and Restrictions for an indefinite period of time.

PROBATIONARY TERMS AND RESTRICTIONS

MS. WEARS shall:

1. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
2. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
3. Submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MS. WEARS**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MS. WEARS's** criminal records check to the Board. **MS. WEARS's** completed criminal records check, including the FBI check, must be received by the Board **within ninety (90) days of the effective date of this Order**.
4. Submit documentation of her full compliance with the requirements imposed by the Licking County Court of Common Pleas in Case Number 17 CR 00091. **MS. WEARS** shall complete her restitution and submit documentation of completion prior to requesting release from the probationary terms and restrictions in this Order.

Educational Requirements

5. **Within six (6) months of the effective date of this Order**, successfully complete and submit satisfactory documentation of successful completion of the following continuing education, or other comparable course(s) approved in advance by the Board or its designee: five (5) hours Ethics, four (4) hours Professional Accountability & Legal Liability, five (5) hours Patient Rights, five (5) hours Veracity, and two (2) hours Ohio Nursing Law and Rules. Continuing education required by this Order **does not meet the continuing education requirements for license renewal**.
6. Establish contact with a nursing educator, approved in advance by the Board or its designee, who has no less than a master's degree and who is affiliated with a nursing educational program.
 - a. Have the educator provide the Board with a written report of an assessment of **MS. WEARS**, which identifies **MS. WEARS's** knowledge/practice deficiencies and remedial educational needs.
 - b. Prior to the assessment, provide the nursing educator with a copy of this Order and the Notice and submit to any nursing skills or knowledge assessments required by the educator. **MS. WEARS**

shall also execute releases prior to the assessment to permit the educator to obtain any information deemed appropriate and necessary for the assessment including information from **MS. WEARS's** employer(s), former employers, and Board staff.

- c. Following the assessment, have the educator provide the Board with a copy of a learning plan developed by the educator for **MS. WEARS** and obtain approval of the learning plan by the Board or its designee. The learning plan shall identify specific remediation that **MS. WEARS** shall complete to address any knowledge/practice deficiencies and remedial educational needs identified by the educator and shall identify the time frame during which **MS. WEARS** shall complete such learning plan.
- d. Successfully complete and submit satisfactory documentation of successful completion of the learning plan within the time frame specified in the learning plan.
- e. Be responsible for all costs associated with meeting the requirements of the learning plan.
- f. **After MS. WEARS has successfully completed the learning plan**, have the educator provide the Board with:
 - i. An assessment and any recommendations for additional remedial education and/or restrictions that should be placed on **MS. WEARS's** license; and
 - ii. A written opinion stating whether **MS. WEARS** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
- g. The Board may utilize the educator's recommendations and conclusions from the assessment as a basis for additional terms and restrictions on **MS. WEARS's** license.

Evaluations

7. **Within ninety (90) days of the execution of the probationary period**, at **MS. WEARS's** expense, obtain a mental health evaluation from a Board approved evaluator and provide the Board with complete documentation of such evaluation. Prior to the evaluation, **MS. WEARS** shall provide the mental health evaluator with a copy of this Order and the Notice. **MS. WEARS** shall execute releases to permit the mental health evaluator to obtain any information deemed appropriate and necessary for the evaluation. The mental health evaluator shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and

- monitoring, any additional restrictions that should be placed on **MS. WEARS's** license, and a statement as to whether **MS. WEARS** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
8. Provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the mental health evaluator described above until released. Further, the Board may utilize the mental health evaluator's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on **MS. WEARS's** license.

Employment Conditions

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

Reporting Requirements for Probationary Period

14. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
15. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.

16. Submit any and all information that the Board may request regarding **MS. WEARS's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
17. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.
18. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: monitoring@nursing.ohio.gov or by mail to:

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

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

LICENSE RESTRICTIONS

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

Permanent Practice Restrictions

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

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

FAILURE TO COMPLY

The stay of **MS. WEARS's** suspension shall be lifted and **MS. WEARS's** license

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

DURATION

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

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

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

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September 2018.

Billings, Jesse Allen, P.N. 141906 (CASE #18-1845)

Action: It was moved by Brenda Boggs, seconded by Patricia Sharpnack, that upon consideration of the charges stated against **JESSE ALLEN BILLINGS** in the Notice of Automatic Suspension and Opportunity for Hearing (Notice) and evidence supporting the charges, the Board find that **MR. BILLINGS** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice, and that **MR. BILLINGS's** license to practice nursing as a licensed practical nurse be **PERMANENTLY REVOKED**.

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

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September 2018.

Cross, David Brandon, R.N. 409728 (CASE #18-0013)

Action: It was moved by Sandra Beidelschies, seconded by Brenda Boggs, that upon consideration of the charges stated against **DAVID BRANDON CROSS** in the Notice of Automatic Suspension and Opportunity for Hearing (Notice) and evidence supporting the charges, the Board find that **MR. CROSS** has committed

acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice, and that **MR. CROSS's** license to practice nursing as a registered nurse be suspended for an indefinite period of time but not less than one (1) year with the conditions for reinstatement set forth below, and following reinstatement, **MR. CROSS's** license to practice nursing as a registered nurse shall be subject to a stayed suspension under the probationary terms and restrictions set forth below for a minimum period of eighteen (18) months including the **Temporary Practice Restrictions, unless otherwise approved in advance**, set forth below.

SUSPENSION OF LICENSE

MR. CROSS's license is suspended for an indefinite period of time but not less than one (1) year.

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

CONDITIONS FOR REINSTATEMENT

MR. CROSS shall:

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

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

Educational Requirements

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

Evaluations

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

Monitoring

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

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

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

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

Reporting Requirements for Suspension Period

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

13. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.

14. Submit any and all information that the Board may request regarding **MR. CROSS's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
15. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board.
16. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: monitoring@nursing.ohio.gov or by mail to:

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

17. Verify that the reports and documentation required by this Order are received in the Board office.
18. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.
19. Submit to the Board a completed application for reinstatement on the form provided by the Board.

PROBATIONARY PERIOD

Following reinstatement, the suspension shall be stayed and **MR. CROSS's** license shall be subject to Probationary Terms and Restrictions for a minimum period of eighteen (18) months.

PROBATIONARY TERMS AND RESTRICTIONS

MR. CROSS shall:

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

Monitoring

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

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

MR. CROSS shall:

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

Employment Conditions

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

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

Reporting Requirements for Probationary Period

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

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

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

LICENSE RESTRICTIONS

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

Temporary Practice Restrictions

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

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

FAILURE TO COMPLY

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

DURATION

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

As indicated above under Employment Conditions, any period during which **MR. CROSS** does not work in a position within the State of Ohio for which a license to practice nursing is required

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

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September 2018.

Thomas, Kari Lynn, P.N. 124958 (CASE #18-0465)

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

SUSPENSION OF LICENSE

MS. THOMAS's license is suspended for an indefinite period of time.

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

CONDITIONS FOR REINSTATEMENT

MS. THOMAS shall:

1. Be determined, by the Board or its designee, to be able to practice nursing according to acceptable and prevailing standards of safe nursing care based upon an interview and review of the documentation specified in this Order.
2. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
3. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
4. **Within ninety (90) days immediately prior to requesting reinstatement**, submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MS. THOMAS**, including a check of Federal Bureau of Investigation (FBI) records, and shall request

that BCII submit **MS. THOMAS's** criminal records check to the Board. The Board will not consider a request for reinstatement until **MS. THOMAS's** completed criminal records check, including the FBI check, is received by the Board.

5. Pay a fine of five hundred dollars (\$500.00), payable: online by credit or debit card; or payable to the "Treasurer, State of Ohio," by certified check, cashier check, or money order mailed to the attention of the Compliance Unit, Ohio Board of Nursing, 17 South High Street, Suite 660, Columbus, OH 43215-3466.

Educational Requirements

6. Successfully complete and submit satisfactory documentation of successful completion of the following continuing education, or other comparable course(s) approved in advance by the Board or its designee: ten (10) hours Medication Administration, and one (1) hour Ohio Nursing Law and Rules. Continuing education required by this Order **does not meet the continuing education requirements for license renewal.**

Evaluations

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

Monitoring

9. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. THOMAS's** history. **MS. THOMAS** shall

self-administer the prescribed drugs only in the manner prescribed.

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

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

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

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

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

Reporting Requirements for Suspension Period

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

days of the occurrence of the violation.

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

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

16. Verify that the reports and documentation required by this Order are received in the Board office.
17. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.
18. Submit to the Board a completed application for reinstatement on the form provided by the Board.

PROBATIONARY PERIOD

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

PROBATIONARY TERMS AND RESTRICTIONS

MS. THOMAS shall:

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

Evaluations

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

Monitoring

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

MS. THOMAS shall:

- a. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;

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

Employment Conditions

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

Reporting Requirements for Probationary Period

12. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
13. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.

14. Submit any and all information that the Board may request regarding **MS. THOMAS's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
15. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.
16. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: monitoring@nursing.ohio.gov or by mail to:

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

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

LICENSE RESTRICTIONS

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

Temporary Narcotic Restriction

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

Temporary Practice Restrictions

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

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

FAILURE TO COMPLY

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

DURATION

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

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

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

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September 2018.

Capell, Wilburn Tyrone, DTI 005258 (CASE #17-7127)

Action: It was moved by Daniel Lehmann, seconded by Erin Keels, that upon consideration of the charges stated against **WILBURN TYRONE CAPELL** in the Notice of Automatic Suspension and Opportunity for Hearing (Notice) and evidence supporting the charges, the Board find that **MR. CAPELL** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice, and that **MR. CAPELL's** certificate to practice as a dialysis technician intern be suspended for an indefinite period of time with the conditions for reinstatement set forth below, and following reinstatement, **MR. CAPELL's** certificate to practice as a dialysis technician intern shall be subject to a stayed suspension under the probationary terms and restrictions set forth below for a

minimum period of one (1) year including the **Temporary Practice Restrictions, unless otherwise approved in advance**, set forth below.

SUSPENSION OF CERTIFICATE

MR. CAPELL's certificate is suspended for an indefinite period of time.

The Board may reinstate **MR. CAPELL's** certificate if **MR. CAPELL** submits a written request for reinstatement and is determined by the Board or its designee to have complied with the Conditions for Reinstatement.

CONDITIONS FOR REINSTATEMENT

MR. CAPELL shall:

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

Educational Requirements

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

not meet the continuing education requirements for certificate renewal.

Evaluation

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

Monitoring

9. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to him by another so authorized by law who has full knowledge of **MR. CAPELL's** history. **MR. CAPELL** shall self-administer the prescribed drugs only in the manner prescribed.
10. Abstain completely from the use of alcohol or any products containing alcohol.
11. **For a minimum, continuous period of ninety (90) days immediately prior to requesting reinstatement,** submit, at **MR. CAPELL's** expense and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Upon and after **MR. CAPELL's** initiation of drug screening, refusal to submit such specimen, or failure to submit such specimen on the day he is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a certificate for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MR. CAPELL** shall be negative, except for substances prescribed, administered, or dispensed to

him by another so authorized by law who has received a complete copy of this Order prior to prescribing for **MR. CAPELL**.

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

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

12. **For a minimum, continuous period of ninety (90) days immediately prior to requesting reinstatement**, attend a minimum of one (1) meeting per week of a support or peer group meeting approved in advance by the Board, or a Twelve Step program, and provide satisfactory documentation of such attendance to the Board prior to reinstatement.

Reporting Requirements for Suspension Period

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

14. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.

15. Submit any and all information that the Board may request regarding **MR. CAPELL's** ability to practice as a dialysis technician intern according to acceptable and prevailing standards of safe practice.
16. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board.
17. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: monitoring@nursing.ohio.gov or by mail to:

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

18. Verify that the reports and documentation required by this Order are received in the Board office.
19. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.
20. Submit to the Board a completed application for reinstatement on the form provided by the Board.

PROBATIONARY PERIOD

Following reinstatement, the suspension shall be stayed and **MR. CAPELL's** certificate shall be subject to Probationary Terms and Restrictions for a minimum period of one (1) year.

PROBATIONARY TERMS AND RESTRICTIONS

MR. CAPELL shall:

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

Evaluation

3. **Upon the request of the Board or its designee and within sixty (60) days of that request**, at **MR. CAPELL's** expense, obtain a chemical dependency evaluation by a chemical dependency professional approved by the Board or its designee and, prior to the evaluation, provide the

chemical dependency professional with a copy of this Order and the Notice. **MR. CAPELL** shall execute releases to permit the chemical dependency professional to obtain any information deemed appropriate and necessary for the evaluation. The chemical dependency professional shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on **MR. CAPELL's** certificate, and a statement as to whether **MR. CAPELL** is capable of practicing as a dialysis technician according to acceptable and prevailing standards of safe care.

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

Monitoring

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

MR. CAPELL shall:

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

- c. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and
 - d. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MR. CAPELL** and submit the report directly to the Board.
8. Attend a minimum of one (1) meeting per week of a support or peer group meeting approved in advance by the Board, or a Twelve Step program, and provide satisfactory documentation of such attendance to the Board every six (6) months.

Employment Conditions

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

Reporting Requirements for Probationary Period

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

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

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

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

CERTIFICATE RESTRICTIONS

In addition to Probationary Terms and Restrictions, MR. CAPELL's certificate is subject to the following Certificate Restrictions:

Temporary Practice Restrictions

Unless otherwise approved in advance, in writing, by the Board or its designee, MR. CAPELL shall not practice as a dialysis technician intern (1) for staffing agencies or pools; (2) for an individual or group of individuals who directly engage **MR. CAPELL** to provide dialysis services for fees, compensation, or other consideration or who engage **MR. CAPELL** as a volunteer; or (3) as an independent contractor or for *locum tenens* assignments.

MR. CAPELL shall not function as a supervisor or as a manager while working in a position for which a certificate to practice as a dialysis technician intern is required.

FAILURE TO COMPLY

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

DURATION

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

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

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

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September 2018.

Centifanti, Christine D., R.N. 181134 (CASE #18-000352; #18-000390; #18-000902, #17-7457)

Action: It was moved by Joanna Ridgeway, seconded by Nancy Fellows, that upon consideration of the charges stated against **CHRISTINE D. CENTIFANTI** in the Notice of Automatic Suspension and Opportunity for Hearing (Notice) and evidence supporting the charges, the Board find that **MS. CENTIFANTI** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice, and that **MS. CENTIFANTI's** license to practice nursing as a registered nurse be suspended for an indefinite period of time but not less than three (3) years with the conditions for reinstatement set forth below, and following reinstatement, **MS. CENTIFANTI's** license to practice nursing as a registered nurse shall be subject to a stayed suspension under the probationary terms and restrictions set forth below for a minimum period of three (3) years including the **Temporary Practice Restrictions, unless otherwise approved in advance**, set forth below.

SUSPENSION OF LICENSE

MS. CENTIFANTI's license is suspended for an indefinite period of time but not less than three (3) years.

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

CONDITIONS FOR REINSTATEMENT

MS. CENTIFANTI shall:

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

Educational Requirements

6. Successfully complete and submit satisfactory documentation of successful completion of the following continuing education, or other comparable course(s) approved in advance by the Board or its designee: five (5) hours Professional Accountability and Legal Liability, four (4) hours Substance Use Disorder, and two (2) hours Ohio Nursing Law and Rules. Continuing education required by this Order **does not meet the continuing education**

requirements for license renewal.

Monitoring

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

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

Reporting Requirements for Suspension Period

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

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

- 15. Verify that the reports and documentation required by this Order are received in the Board office.
- 16. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.
- 17. Submit to the Board a completed application for reinstatement on the form provided by the Board.

PROBATIONARY PERIOD

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

PROBATIONARY TERMS AND RESTRICTIONS

MS. CENTIFANTI shall:

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

Monitoring

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

MS. CENTIFANTI shall:

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

report for any and all substances prescribed, administered, or dispensed to **MS. CENTIFANTI** *and* submit the report directly to the Board.

Employment Conditions

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

Reporting Requirements for Probationary Period

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

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

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

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

LICENSE RESTRICTIONS

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

Temporary Practice Restrictions

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

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

FAILURE TO COMPLY

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

and automatic suspension of **MS. CENTIFANTI's** license. **MS. CENTIFANTI** may request a hearing regarding the charges.

DURATION

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

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

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

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September 2018.

Barger, Kelly Elizabeth, P.N. 105131 (CASE #16-4492)

Action: It was moved by Nancy Fellows, seconded by Joanna Ridgeway, that upon consideration of the charges stated against **KELLY ELIZABETH BARGER** in the Notice of Opportunity for Hearing (Notice) and evidence supporting the charges, the Board find that **MS. BARGER** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice, and that **MS. BARGER's** license to practice nursing as a licensed practical nurse be suspended and that the suspension is stayed subject to the probationary terms and restrictions set forth below for a minimum period of three (3) years including the **Temporary Narcotic Restrictions**, set forth below.

PROBATIONARY PERIOD

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

PROBATIONARY TERMS AND RESTRICTIONS

MS. BARGER shall:

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

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

Evaluations

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

Monitoring

6. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. BARGER's** history. **MS. BARGER** shall self-administer prescribed drugs only in the manner prescribed.
7. **If recommended by the chemical dependency evaluation**, abstain completely from the use of alcohol or any products containing alcohol.
8. **Within ninety (90) days of the effective date of this Order**, begin submitting, at **MS. BARGER's** expense and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a

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

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

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

Employment Conditions

9. **Upon the request of the Board or its designee**, complete and submit satisfactory documentation of completion of a nurse refresher course or an extensive orientation approved in advance by the Board or its designee

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

Reporting Requirements for Probationary Period

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

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

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

LICENSE RESTRICTIONS

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

Temporary Narcotic Restriction

MS. BARGER shall not administer, have access to, or possess (except as prescribed for **MS. BARGER's** use by another so authorized by law who has full knowledge of **MS. BARGER's** history) any narcotics, other controlled substances, or mood altering drugs for a minimum period of **two (2) years** in which **MS. BARGER** is working in a position that requires a nursing license. At any time after the minimum period of two (2) years previously described, **MS. BARGER** may submit a written request to the Board to have this restriction re-evaluated. In addition, **MS. BARGER** shall not count narcotics or possess or carry any work keys for locked medication carts, cabinets, drawers, or containers. **MS. BARGER** shall not call in or order prescriptions or prescription refills.

FAILURE TO COMPLY

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

DURATION

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

As indicated above under Employment Conditions, any period during which **MS.**

BARGER does not work in a position within the State of Ohio for which a license to practice nursing is required shall not count toward fulfilling the probationary period imposed by this Order.

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

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September 2018.

Cross, Veronica R., R.N. 430641 (CASE #17-3012)

Action: It was moved by Barbara Douglas, seconded by Nancy Fellows, that upon of the charges stated against **VERONICA R. CROSS** in the Notice of Opportunity for Hearing (Notice) and evidence supporting the charges, the Board find that **MS. CROSS** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice, and that **MS. CROSS's** license to practice nursing as a registered nurse be suspended for an indefinite period of time but not less than two (2) years with the conditions for reinstatement set forth below, and following reinstatement, **MS. CROSS's** license to practice nursing as a registered nurse shall be subject to a stayed suspension under the probationary terms and restrictions set forth below for a minimum period of three (3) years including the **Temporary Narcotic and Temporary Practice Restrictions**, set forth below.

SUSPENSION OF LICENSE

MS. CROSS's license is suspended for an indefinite period of time but not less than two (2) years.

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

CONDITIONS FOR REINSTATEMENT

MS. CROSS shall:

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

4. **Within ninety (90) days immediately prior to requesting reinstatement**, submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MS. CROSS**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MS. CROSS's** criminal records check to the Board. The Board will not consider a request for reinstatement until **MS. CROSS's** completed criminal records check, including the FBI check, is received by the Board.

Educational Requirements

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

Evaluation

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

Monitoring

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

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

11. **For a minimum, continuous period of one (1) year immediately prior to**

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

Reporting Requirements for Suspension Period

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

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

17. Verify that the reports and documentation required by this Order are received in the Board office.
18. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.
19. Submit to the Board a completed application for reinstatement on the form provided by the Board.

PROBATIONARY PERIOD

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

PROBATIONARY TERMS AND RESTRICTIONS

MS. CROSS shall:

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

Monitoring

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

MS. CROSS shall:

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

Board.

6. Attend a minimum of one (1) meeting per week of a support or peer group meeting approved in advance by the Board, or a Twelve Step program, and provide satisfactory documentation of such attendance to the Board every six (6) months.

Employment Conditions

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

Reporting Requirements for Probationary Period

12. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
13. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
14. Submit any and all information that the Board may request regarding **MS. CROSS's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.

15. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.
16. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: monitoring@nursing.ohio.gov or by mail to:

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

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

LICENSE RESTRICTIONS

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

Temporary Narcotic Restriction

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

Temporary Practice Restrictions

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

MS. CROSS shall not function in a position or employment where the job duties or requirements involve management of nursing and nursing responsibilities, or supervising and evaluating nursing practice. Such positions include, but are not

limited to, the following: Director of Nursing, Assistant Director of Nursing, Nurse Manager, Vice President of Nursing.

FAILURE TO COMPLY

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

DURATION

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

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

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

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September 2018.

Hayman, Janice Irene, R.N. 344593 (CASE #17-7120)

Action: It was moved by Deborah Knueve, seconded by Barbara Douglas, that upon consideration of the charges stated against **JANICE IRENE HAYMAN** in the Notice of Opportunity for Hearing (Notice) and evidence supporting the charges, the Board find that **MS. HAYMAN** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice, and that **MS. HAYMAN's** license to practice nursing as a registered nurse be suspended for an indefinite period of time with the conditions for reinstatement set forth below.

SUSPENSION OF LICENSE

MS. HAYMAN's license is suspended for an indefinite period of time.

The Board may reinstate **MS. HAYMAN's** license if **MS. HAYMAN** submits a

written request for reinstatement and is determined by the Board or its designee to have complied with the Conditions for Reinstatement.

CONDITIONS FOR REINSTATEMENT

MS. HAYMAN shall:

1. Be determined, by the Board or its designee, to be able to practice nursing according to acceptable and prevailing standards of safe nursing care based upon an interview and review of the documentation specified in this Order.
2. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
3. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
4. **Within ninety (90) days immediately prior to requesting reinstatement**, submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MS. HAYMAN**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MS. HAYMAN's** criminal records check to the Board. The Board will not consider a request for reinstatement until **MS. HAYMAN's** completed criminal records check, including the FBI check, is received by the Board.
5. Submit documentation of her full compliance with the terms and conditions imposed by the Agreed Order issued by the Texas Board of Nursing, dated October 26, 2017, and that her Texas license is current, valid, and unrestricted.
6. **Upon the request of the Board or its designee, prior to working in a position where a license to practice nursing is required**, complete and submit satisfactory documentation of completion of a nurse refresher course or an extensive orientation approved in advance by the Board or its designee.

Reporting Requirements for Suspension Period

7. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
8. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
9. Submit any and all information that the Board may request regarding **MS.**

- HAYMAN's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
10. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board.
 11. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: monitoring@nursing.ohio.gov or by mail to:

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

12. Verify that the reports and documentation required by this Order are received in the Board office.
13. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.
14. Submit to the Board a completed application for reinstatement on the form provided by the Board.

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

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September 2018.

Jones, Jeffrey Michael, R.N. 413823 (CASE #17-7439)

Action: It was moved by Patricia Sharpnack, seconded by Brenda Boggs, that upon consideration of the charges stated against **JEFFREY MICHAEL JONES** in the Notice of Opportunity for Hearing (Notice) and evidence supporting the charges, the Board find that **MR. JONES** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice, and that **MR. JONES's** license to practice nursing as a registered nurse be suspended for an indefinite period of time with the conditions for reinstatement set forth below.

SUSPENSION OF LICENSE

MR. JONES's license is suspended for an indefinite period of time.

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

CONDITIONS FOR REINSTATEMENT

MR. JONES shall:

1. Be determined, by the Board or its designee, to be able to practice nursing according to acceptable and prevailing standards of safe nursing care based upon an interview and review of the documentation specified in this Order.
2. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
3. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
4. **Within ninety (90) days immediately prior to requesting reinstatement**, submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MR. JONES**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MR. JONES's** criminal records check to the Board. The Board will not consider a request for reinstatement until **MR. JONES's** completed criminal records check, including the FBI check, is received by the Board.
5. Submit documentation of his full compliance with the terms and conditions imposed by the Agreed Order for Voluntary Surrender issued by the Kentucky Board of Nursing, dated November 27, 2017.
6. **Upon the request of the Board or its designee, prior to working in a position where a license to practice nursing is required**, complete and submit satisfactory documentation of completion of a nurse refresher course or an extensive orientation approved in advance by the Board or its designee.

Reporting Requirements for Suspension Period

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

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

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

12. Verify that the reports and documentation required by this Order are received in the Board office.
13. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.
14. Submit to the Board a completed application for reinstatement on the form provided by the Board.

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

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September 2018.

Dosztal, Debra Elizabeth, R.N. 304725 (CASE #18-0514)

Action: It was moved by Brenda Boggs, seconded by Patricia Sharpnack, that upon consideration of the charges stated against **DEBRA ELIZABETH DOSZTAL** in the Notice of Automatic Suspension and Opportunity for Hearing (Notice) and evidence supporting the charges, the Board find that **MS. DOSZTAL** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice, and the Ohio Board of Nursing ORDERED that **MS. DOSZTAL's** license to practice nursing as a registered nurse be suspended for an indefinite period of time with the conditions for reinstatement set forth below, and following reinstatement, **MS. DOSZTAL's** license to practice nursing as a registered nurse shall be subject to a stayed suspension under the probationary terms and restrictions set forth below for a minimum period of two (2) years including the **Temporary Practice Restrictions**, set forth below.

SUSPENSION OF LICENSE

MS. DOSZTAL's license is suspended for an indefinite period of time.

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

CONDITIONS FOR REINSTATEMENT

MS. DOSZTAL shall:

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

Evaluation

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

and conclusions from the comprehensive physical examination and assessment as a basis for additional terms and restrictions on **MS. DOSZTAL's** license.

Reporting Requirements for Suspension Period

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

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

12. Verify that the reports and documentation required by this Order are received in the Board office.
13. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.
14. Submit to the Board a completed application for reinstatement on the form provided by the Board.

PROBATIONARY PERIOD

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

PROBATIONARY TERMS AND RESTRICTIONS

MS. DOSZTAL shall:

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

Employment Conditions

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

Reporting Requirements for Probationary Period

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

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

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

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

LICENSE RESTRICTIONS

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

Temporary Practice Restrictions

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

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

FAILURE TO COMPLY

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

DURATION

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

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

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

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September 2018.

Elliott, Melanie R., P.N. 120461 (CASE #17-5253)

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

SUSPENSION OF LICENSE

MS. ELLIOTT's license is suspended for an indefinite period of time but not less

than two (2) years.

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

CONDITIONS FOR REINSTATEMENT

MS. ELLIOTT shall:

1. Be determined, by the Board or its designee, to be able to practice nursing according to acceptable and prevailing standards of safe nursing care based upon an interview and review of the documentation specified in this Order.
2. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
3. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
4. **Within ninety (90) days immediately prior to requesting reinstatement**, submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MS. ELLIOTT**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MS. ELLIOTT's** criminal records check to the Board. The Board will not consider a request for reinstatement until **MS. ELLIOTT's** completed criminal records check, including the FBI check, is received by the Board.
5. Pay a fine of five hundred dollars (\$500.00), payable: online by credit or debit card; or payable to the "Treasurer, State of Ohio," by certified check, cashier check, or money order mailed to the attention of the Compliance Unit, Ohio Board of Nursing, 17 South High Street, Suite 660, Columbus, OH 43215-3466.
6. Submit documentation of her full compliance with the requirements imposed by the Ashland County Court of Common Pleas in Case Number 17-CRI-160.

Educational Requirements

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

education requirements for license renewal.

Evaluations

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

Monitoring

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

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

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

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

Reporting Requirements for Suspension Period

14. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
15. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
16. Submit any and all information that the Board may request regarding **MS. ELLIOTT's** ability to practice nursing according to acceptable and

- prevailing standards of safe nursing practice.
17. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board.
 18. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: monitoring@nursing.ohio.gov or by mail to:

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

19. Verify that the reports and documentation required by this Order are received in the Board office.
20. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.
21. Submit to the Board a completed application for reinstatement on the form provided by the Board.

PROBATIONARY PERIOD

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

PROBATIONARY TERMS AND RESTRICTIONS

MS. ELLIOTT shall:

1. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
2. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
3. Submit documentation of her full compliance with the requirements imposed by the Ashland County Court of Common Pleas in Case Number 17-CRI-160.

Evaluations

4. **Upon the request of the Board or its designee and within sixty (60) days of that request**, at **MS. ELLIOTT's** expense, obtain a chemical

dependency evaluation by a chemical dependency professional approved by the Board or its designee and, prior to the evaluation, provide the chemical dependency professional with a copy of this Order and the Notice. **MS. ELLIOTT** shall execute releases to permit the chemical dependency professional to obtain any information deemed appropriate and necessary for the evaluation. The chemical dependency professional shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on **MS. ELLIOTT's** license, and a statement as to whether **MS. ELLIOTT** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.

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

Monitoring

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

MS. ELLIOTT shall:

- a. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
- b. Update the list of treating practitioners with the Board within forty-

eight (48) hours of being treated by another practitioner;

- c. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and
 - d. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. ELLIOTT** and submit the report directly to the Board.
9. **If recommended by the chemical dependency evaluation**, attend a minimum of one (1) meeting per week of a support or peer group meeting approved in advance by the Board, or a Twelve Step program, and provide satisfactory documentation of such attendance to the Board every six (6) months.

Employment Conditions

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

Reporting Requirements for Probationary Period

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

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

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

LICENSE RESTRICTIONS

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

Permanent Practice Restrictions

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

MS. ELLIOTT shall not function in a position or employment where the job duties or requirements involve management of nursing and nursing responsibilities. Such

positions include, but are not limited to, the following: Director of Nursing, Assistant Director of Nursing, Nurse Manager, Vice President of Nursing.

FAILURE TO COMPLY

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

DURATION

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

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

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

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September 2018.

Klacza, Boguslaw R., P.N. 098446 (CASE #17-5497)

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

SUSPENSION OF LICENSE

MR. KLACZA's license is suspended for an indefinite period of time but not less than two (2) years.

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

CONDITIONS FOR REINSTATEMENT

MR. KLACZA shall:

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

Educational Requirements

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

Evaluations

6. **Within ninety (90) days immediately prior to requesting reinstatement,** at **MR. KLACZA's** expense, obtain a chemical dependency evaluation by a

chemical dependency professional approved by the Board or its designee and, prior to the evaluation, provide the chemical dependency professional with a copy of this Order and the Notice. **MR. KLACZA** shall execute releases to permit the chemical dependency professional to obtain any information deemed appropriate and necessary for the evaluation. The chemical dependency professional shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on **MR. KLACZA's** license, and a statement as to whether **MR. KLACZA** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.

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

Monitoring

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

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

- i. Provide a copy of this Order to all treating practitioners;
- ii. Provide to the Board a list of all treating practitioners, including

addresses and telephone numbers; and

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

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

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

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

Reporting Requirements for Suspension Period

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

specified by the Board. All reporting and communications required by this Order shall be sent by email to: monitoring@nursing.ohio.gov or by mail to:

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

17. Verify that the reports and documentation required by this Order are received in the Board office.
18. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.
19. Submit to the Board a completed application for reinstatement on the form provided by the Board.

PROBATIONARY PERIOD

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

PROBATIONARY TERMS AND RESTRICTIONS

MR. KLACZA shall:

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

Monitoring

3. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to him by another so authorized by law who has full knowledge of **MR. KLACZA's** history. **MR. KLACZA** shall self-administer prescribed drugs only in the manner prescribed.
4. Abstain completely from the use of alcohol or any products containing alcohol.
5. Submit, at his expense, and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Refusal to submit such specimen, or failure to submit such specimen on the day he is selected, or

in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MR. KLACZA** shall be negative, except for substances prescribed, administered, or dispensed to him by another so authorized by law who has received a complete copy of this Order prior to prescribing for **MR. KLACZA**.

MR. KLACZA shall:

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

Employment Conditions

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

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

Reporting Requirements for Probationary Period

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

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

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

LICENSE RESTRICTIONS

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

Temporary Narcotic Restriction

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

Temporary Practice Restrictions

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

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

FAILURE TO COMPLY

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

DURATION

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

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

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

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September 2018.

LaRue, Denise, MA-C 000092 (CASE #17-4863)

Action: It was moved by Daniel Lehmann, seconded by Erin Keels, that upon consideration of the charges stated against **DENISE LARUE** in the Notice of Opportunity for Hearing (Notice) and evidence supporting the charges, the Board find that **MS. LARUE** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice, and that **MS. LARUE's** certificate to practice as a medication aide be suspended for an indefinite period of time but not less than one (1) year with the conditions for reinstatement set forth below, and following reinstatement, **MS. LARUE's** certificate to practice as a medication aide shall be subject to a stayed suspension under the probationary terms and restrictions set forth below for a minimum period of two (2) years.

SUSPENSION OF CERTIFICATE

MS. LARUE's certificate is suspended for an indefinite period of time but not less than one (1) year.

The Board may reinstate **MS. LARUE's** certificate if **MS. LARUE** submits a written request for reinstatement and is determined by the Board or its designee to have complied with the Conditions for Reinstatement.

CONDITIONS FOR REINSTATEMENT

MS. LARUE shall:

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

4. **Within ninety (90) days immediately prior to requesting reinstatement**, submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MS. LARUE**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MS. LARUE's** criminal records check to the Board. The Board will not consider a request for reinstatement until **MS. LARUE's** completed criminal records check, including the FBI check, is received by the Board.

Educational Requirements

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

Monitoring

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

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

Reporting Requirements for Suspension Period

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

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

14. Verify that the reports and documentation required by this Order are received in the Board office.
15. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.
16. Submit to the Board a completed application for reinstatement on the form provided by the Board.

PROBATIONARY PERIOD

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

PROBATIONARY TERMS AND RESTRICTIONS

MS. LARUE shall:

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

Monitoring

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

MS. LARUE shall:

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

Employment Conditions

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

Reporting Requirements for Probationary Period

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

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

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

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

FAILURE TO COMPLY

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

DURATION

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

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

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

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September 2018.

Pernell, Cristy Michelle, P.N. APPLICANT (CASE #17-4430)

Action: It was moved by Joanna Ridgeway, seconded by Nancy Fellows, that upon consideration of the charges stated against **CRISTY MICHELLE PERNELL** in the Notice of Opportunity for Hearing (Notice) and evidence supporting the charges, the Board FIND that **MS. PERNELL** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice, and that **MS. PERNELL** be authorized to take the NCLEX-PN, and that upon passing the exam, **MS. PERNELL** shall be granted a license to practice nursing as a licensed practical nurse. It was further moved that **MS. PERNELL's** license to practice nursing as a licensed practical nurse be suspended and that the suspension be stayed subject to the probationary terms and restrictions set forth below for a minimum period of two (2) years.

PROBATIONARY PERIOD

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

PROBATIONARY TERMS AND RESTRICTIONS

MS. PERNELL shall:

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

Educational Requirements

4. **Within six (6) months of MS. PERNELL being issued a license to practice nursing as a licensed practical nurse**, successfully complete and submit satisfactory documentation of successful completion of the following continuing education, or other comparable course(s) approved in advance by the Board or its designee: five (5) hours Ethics, four (4) hours Professional Accountability and Legal Liability for Nurses, and two (2) hours Ohio Nursing Laws and Rules. Continuing education required by this Order **does not meet the continuing education requirements for license renewal.**

Employment Conditions

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

Reporting Requirements for Probationary Period

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

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

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

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

FAILURE TO COMPLY

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

DURATION

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

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

period imposed by this Order.

Motion adopted by a majority vote of the Board members present with Matthew Carle, Daniel Lehmann and Sandra Ranck abstaining.

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September 2018.

Wagel, Amber Dawn, P.N. 141934 (CASE #17-6670)

Action: It was moved moved by Nancy Fellows, seconded by Barbara Douglas, that upon consideration of the charges stated against **AMBER DAWN WAGEL** in the Notice of Opportunity for Hearing (Notice) and evidence supporting the charges, the Board find that **MS. WAGEL** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice, and that **MS. WAGEL's** license to practice nursing as a licensed practical nurse be suspended for an indefinite period of time but not less than five (5) years retroactive to May 12, 2016, with the conditions for reinstatement set forth below, and following reinstatement, **MS. WAGEL's** license to practice nursing as a licensed practical nurse shall be subject to a stayed suspension under the probationary terms and restrictions set forth below for a minimum period of two (2) years including the **Permanent Practice Restrictions**, set forth below.

SUSPENSION OF LICENSE

MS. WAGEL's license is suspended for an indefinite period of time but not less than five (5) years retroactive to May 12, 2016.

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

CONDITIONS FOR REINSTATEMENT

MS. WAGEL shall:

1. Be determined, by the Board or its designee, to be able to practice nursing according to acceptable and prevailing standards of safe nursing care based upon an interview and review of the documentation specified in this Order.
2. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
3. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
4. **Within ninety (90) days immediately prior to requesting reinstatement,**

- submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MS. WAGEL**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MS. WAGEL's** criminal records check to the Board. The Board will not consider a request for reinstatement until **MS. WAGEL's** completed criminal records check, including the FBI check, is received by the Board.
5. Submit documentation of her full compliance with the requirements imposed by the Franklin County Court of Common Pleas in Case Number 16CR 3365.

Reporting Requirements for Suspension Period

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

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11. Verify that the reports and documentation required by this Order are received in the Board office.
12. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.
13. Submit to the Board a completed application for reinstatement on the form provided by the Board.

PROBATIONARY PERIOD

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

PROBATIONARY TERMS AND RESTRICTIONS

MS. WAGEL shall:

1. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
2. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
3. Submit documentation of her full compliance with the requirements imposed by the Franklin County Court of Common Pleas in Case Number 16CR 3365.

Educational Requirements

4. **Within six (6) months following reinstatement**, successfully complete and submit satisfactory documentation of successful completion of the following continuing education, or other comparable course(s) approved in advance by the Board or its designee: ten (10) hours Ethics, and two (2) hours Ohio Nursing Law and Rules. Continuing education required by this Order **does not meet the continuing education requirements for license renewal**.

Employment Conditions

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

8. Have current employer(s), if working in a position where a license to practice nursing is required, submit written reports regarding job performance **on a quarterly basis beginning within thirty (30) days of the effective date of this Order or beginning within thirty (30) days of working in a position as a nurse, whichever is later.**
9. Have current employer(s) send documentation to the Board, along with the first employer report, of receipt of a copy of this Order, including the date this Order was received.

Reporting Requirements for Probationary Period

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

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

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

LICENSE RESTRICTIONS

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

Permanent Practice Restrictions

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

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

FAILURE TO COMPLY

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

DURATION

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

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

Motion adopted by a majority vote of the Board members present with Matthew Carle, Daniel Lehmann and Sandra Ranck abstaining.

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September 2018.

Allan, Amy Elizabeth, R.N. 357747 (CASE #18-1130)

Action: It was moved by Barbara Douglas, seconded by Nancy Fellows, that upon consideration of the charges stated against **AMY ELIZABETH ALLAN** in the Notice of Opportunity for Hearing (Notice) and evidence supporting the charges,

the Board find that **MS. ALLAN** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice, and that **MS. ALLAN's** license to practice nursing as a registered nurse be suspended for an indefinite period of time with the conditions for reinstatement set forth below.

SUSPENSION OF LICENSE

MS. ALLAN's license is suspended for an indefinite period of time.

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

CONDITIONS FOR REINSTATEMENT

MS. ALLAN shall:

1. Be determined, by the Board or its designee, to be able to practice nursing according to acceptable and prevailing standards of safe nursing care based upon an interview and review of the documentation specified in this Order.
2. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
3. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
4. **Within ninety (90) days immediately prior to requesting reinstatement,** submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MS. ALLAN**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MS. ALLAN's** criminal records check to the Board. The Board will not consider a request for reinstatement until **MS. ALLAN's** completed criminal records check, including the FBI check, is received by the Board.
5. Submit documentation of her full compliance with the terms and conditions imposed by the Decision and Order issued by the California Board of Registered Nursing, Department of Consumer Affairs, on or about February 2, 2018, and that her California nursing license is current, valid, and unrestricted.
6. **Upon the request of the Board or its designee, prior to working in a position where a license to practice nursing is required,** complete and submit satisfactory documentation of completion of a nurse refresher course or an extensive orientation approved in advance by the Board or its designee.

Reporting Requirements for Suspension Period

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

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

12. Verify that the reports and documentation required by this Order are received in the Board office.
13. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.
14. Submit to the Board a completed application for reinstatement on the form provided by the Board.

Motion adopted by a majority vote of the Board members present with Matthew Carle, Daniel Lehmann and Sandra Ranck abstaining.

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September 2018.

Adamson, Leanne Marie, R.N. 282433 (CASE #17-7570)

Action: It was moved by Deborah Knueve, seconded by Nancy Fellows, that upon consideration of the charges stated against **LEANNE MARIE ADAMSON** in the Notice of Opportunity for Hearing (Notice) and evidence supporting the charges, the Board find that **MS. ADAMSON** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice, and that

MS. ADAMSON's license to practice nursing as a registered nurse be suspended for an indefinite period of time with the conditions for reinstatement set forth below, and following reinstatement, **MS. ADAMSON's** license to practice nursing as a registered nurse shall be subject to a stayed suspension under the probationary terms and restrictions set forth below for a minimum period of four (4) years including the **Temporary Narcotic and Temporary Practice Restrictions**, set forth below.

SUSPENSION OF LICENSE

MS. ADAMSON's license is suspended for an indefinite period of time.

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

CONDITIONS FOR REINSTATEMENT

MS. ADAMSON shall:

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

Evaluations

5. **Within ninety (90) days immediately prior to requesting reinstatement**, at **MS. ADAMSON's** expense, obtain a chemical dependency evaluation by a chemical dependency professional approved by the Board or its designee and, prior to the evaluation, provide the chemical dependency professional with a copy of this Order and the Notice. **MS. ADAMSON** shall execute

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

Monitoring

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

prescription report for any and all substances prescribed, administered, or dispensed to **MS. ADAMSON**, *and* submit the report directly to the Board.

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

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

Reporting Requirements for Suspension Period

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

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

16. Verify that the reports and documentation required by this Order are received in the Board office.
17. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.
18. Submit to the Board a completed application for reinstatement on the form provided by the Board.

PROBATIONARY PERIOD

Following reinstatement, the suspension shall be stayed and **MS. ADAMSON's** license shall be subject to Probationary Terms and Restrictions for a minimum period of four (4) years.

PROBATIONARY TERMS AND RESTRICTIONS

MS. ADAMSON shall:

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

Monitoring

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

submitted by **MS. ADAMSON** shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who has received a complete copy of this Order prior to prescribing for **MS. ADAMSON**.

MS. ADAMSON shall:

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

Employment Conditions

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

of this Order or beginning within thirty (30) days of working in a position as a nurse, whichever is later.

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

Reporting Requirements for Probationary Period

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

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

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

LICENSE RESTRICTIONS

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

Temporary Narcotic Restriction

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

Temporary Practice Restrictions

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

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

FAILURE TO COMPLY

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

DURATION

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

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

Motion adopted by a majority vote of the Board members present with Matthew Carle, Daniel Lehmann, Sandra Ranck and Patricia Sharpnack abstaining.

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September 2018.

Clark, Richard J., R.N. 422170 (CASE #18-0546)

Action: It was moved by Patricia Sharpnack, seconded by Brenda Boggs, that upon consideration of the charges stated against **RICHARD J. CLARK** in the Notice of Opportunity for Hearing (Notice) and evidence supporting the charges, the Board find that **MR. CLARK** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice, and that **MR. CLARK's** license to practice nursing as a registered nurse be suspended for an indefinite period of time with the conditions for reinstatement set forth below.

SUSPENSION OF LICENSE

MR. CLARK's license is suspended for an indefinite period of time.

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

CONDITIONS FOR REINSTATEMENT

MR. CLARK shall:

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

imposed by the Final Decision and Order issued by the Massachusetts Board of Registration in Nursing, dated February 7, 2018.

6. **Upon the request of the Board or its designee, prior to working in a position where a license to practice nursing is required**, complete and submit satisfactory documentation of completion of a nurse refresher course or an extensive orientation approved in advance by the Board or its designee.

Reporting Requirements for Suspension Period

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

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Columbus, OH 43215-3466**

12. Verify that the reports and documentation required by this Order are received in the Board office.
13. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.
14. Submit to the Board a completed application for reinstatement on the form provided by the Board.

Motion adopted by a majority vote of the Board members present with Matthew Carle, Daniel Lehmann and Sandra Ranck abstaining.

This ORDER shall become effective immediately and is hereby entered upon the

Journal of the Board for the 27th day of September 2018.

Johnson, Doreen Ann (aka "Doreen A. Doerr"), R.N. 225473 (CASE #17-7122)

Action: It was moved by Brenda Boggs, seconded by Patricia Sharpnack, that upon consideration of the charges stated against **DOREEN ANN JOHNSON** in the Notice of Opportunity for Hearing (Notice) and evidence supporting the charges, the Board find that **MS. JOHNSON** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice, and that **MS. JOHNSON's** license to practice nursing as a registered nurse be suspended for an indefinite period of time with the conditions for reinstatement set forth below.

SUSPENSION OF LICENSE

MS. JOHNSON's license is suspended for an indefinite period of time.

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

CONDITIONS FOR REINSTATEMENT

MS. JOHNSON shall:

1. Be determined, by the Board or its designee, to be able to practice nursing according to acceptable and prevailing standards of safe nursing care based upon an interview and review of the documentation specified in this Order.
2. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
3. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
4. **Within ninety (90) days immediately prior to requesting reinstatement**, submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MS. JOHNSON**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MS. JOHNSON's** criminal records check to the Board. The Board will not consider a request for reinstatement until **MS. JOHNSON's** completed criminal records check, including the FBI check, is received by the Board.
5. Submit documentation of her full compliance with the terms and conditions imposed by the Final Order issued by the Florida Board of Nursing on or about October 19, 2017, and that her Florida nursing license is current, valid, and unrestricted.

6. **Upon the request of the Board or its designee, prior to working in a position where a license to practice nursing is required**, complete and submit satisfactory documentation of completion of a nurse refresher course or an extensive orientation approved in advance by the Board or its designee.

Reporting Requirements for Suspension Period

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

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12. Verify that the reports and documentation required by this Order are received in the Board office.
13. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.
14. Submit to the Board a completed application for reinstatement on the form provided by the Board.

Motion adopted by a majority vote of the Board members present with Matthew Carle, Daniel Lehmann and Sandra Ranck abstaining.

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September 2018.

Miller, Michael L, R.N. 257094 (CASE #17-7567)

Action: It was moved by Sandra Beidelschies, seconded by Brenda Boggs, that upon consideration of the charges stated against **MICHAEL L. MILLER** in the Notice of Opportunity for Hearing (Notice) and evidence supporting the charges, the Board find that **MR. MILLER** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice, and that **MR. MILLER's** license to practice nursing as a registered nurse be **PERMANENTLY REVOKED**.

Motion adopted by a majority vote of the Board members present with Matthew Carle, Daniel Lehmann and Sandra Ranck abstaining.

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September 2018.

Morris, Keri Marie, (aka "Keri Glenn Morris"), R.N. 285552 (CASE #17-7586)

Action: It was moved by Erin Keels, seconded by Sandra Beidelschies, that upon consideration of the charges stated against **KERI MARIE MORRIS** in the Notice of Opportunity for Hearing (Notice) and evidence supporting the charges, the Board find that **MS. MORRIS** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice, and that **MS. MORRIS's** license to practice nursing as a registered nurse be **PERMANENTLY REVOKED**.

Motion adopted by a majority vote of the Board members present with Matthew Carle, Daniel Lehmann and Sandra Ranck abstaining.

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September 2018.

Shie, Charmyn Leah (aka "Charmyn Shie Rodriguez"), P.N. 109799 (CASE #17-7219)

Action: It was moved by Erin Keels, seconded by Sandra Beidelschies, that upon consideration of the charges stated against **CHARMYN LEAH SHIE** in the Notice of Opportunity for Hearing (Notice) and evidence supporting the charges, the Board find that **MS. SHIE** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice, and that **MS. SHIE's** license to practice nursing as a licensed practical nurse be suspended for an indefinite period of time with the conditions for reinstatement set forth below.

SUSPENSION OF LICENSE

MS. SHIE's license is suspended for an indefinite period of time.

The Board may reinstate **MS. SHIE's** license if **MS. SHIE** submits a written request for reinstatement and is determined by the Board or its designee to have complied

with the Conditions for Reinstatement.

CONDITIONS FOR REINSTATEMENT

MS. SHIE shall:

1. Be determined, by the Board or its designee, to be able to practice nursing according to acceptable and prevailing standards of safe nursing care based upon an interview and review of the documentation specified in this Order.
2. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
3. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
4. **Within ninety (90) days immediately prior to requesting reinstatement**, submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MS. SHIE**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MS. SHIE's** criminal records check to the Board. The Board will not consider a request for reinstatement until **MS. SHIE's** completed criminal records check, including the FBI check, is received by the Board.
5. Submit documentation of her full compliance with the terms and conditions imposed by the Final Order issued by the Florida Board of Nursing on or about October 23, 2017, and that her Florida nursing license is current, valid, and unrestricted.
6. **Upon the request of the Board or its designee, prior to working in a position where a license to practice nursing is required**, complete and submit satisfactory documentation of completion of a nurse refresher course or an extensive orientation approved in advance by the Board or its designee.

Reporting Requirements for Suspension Period

7. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
8. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
9. Submit any and all information that the Board may request regarding **MS. SHIE's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.

10. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board.
11. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: monitoring@nursing.ohio.gov or by mail to:

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

12. Verify that the reports and documentation required by this Order are received in the Board office.
13. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.
14. Submit to the Board a completed application for reinstatement on the form provided by the Board.

Motion adopted by a majority vote of the Board members present with Matthew Carle, Daniel Lehmann and Sandra Ranck abstaining.

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September 2018.

Tomlinson, Lisa Marie, P.N. 096180 (CASE #17-7552)

Action: It was moved by Joanna Ridgeway, seconded by Nancy Fellows, that upon consideration of the charges stated against **LISA MARIE TOMLINSON** in the Notice of Opportunity for Hearing (Notice) and evidence supporting the charges, the Board find that **MS. TOMLINSON** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice, and that **MS. TOMLINSON's** license to practice nursing as a licensed practical nurse be suspended for an indefinite period of time with the conditions for reinstatement set forth below.

SUSPENSION OF LICENSE

MS. TOMLINSON's license is suspended for an indefinite period of time.

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

CONDITIONS FOR REINSTATEMENT

MS. TOMLINSON shall:

1. Be determined, by the Board or its designee, to be able to practice nursing according to acceptable and prevailing standards of safe nursing care based upon an interview and review of the documentation specified in this Order.
2. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
3. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
4. **Within ninety (90) days immediately prior to requesting reinstatement**, submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MS. TOMLINSON**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MS. TOMLINSON's** criminal records check to the Board. The Board will not consider a request for reinstatement until **MS. TOMLINSON's** completed criminal records check, including the FBI check, is received by the Board.
5. Submit documentation of her full compliance with the terms and conditions imposed by the Final Order issued by the Indiana State Board of Nursing, dated December 1, 2017, and that her Indiana license is current, valid, and unrestricted.
6. **Upon the request of the Board or its designee, prior to working in a position where a license to practice nursing is required**, complete and submit satisfactory documentation of completion of a nurse refresher course or an extensive orientation approved in advance by the Board or its designee.

Reporting Requirements for Suspension Period

7. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
8. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
9. Submit any and all information that the Board may request regarding **MS. TOMLINSON's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.

10. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board.
11. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: monitoring@nursing.ohio.gov or by mail to:

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12. Verify that the reports and documentation required by this Order are received in the Board office.
13. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.
14. Submit to the Board a completed application for reinstatement on the form provided by the Board.

Motion adopted by a majority vote of the Board members present with Matthew Carle, Daniel Lehmann and Sandra Ranck abstaining.

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September 2018.

Razeeq, Ayesha Kai, R.N. 390150 (CASE #18-1815)

Action: It was moved by Joanna Ridgeway, seconded by Nancy Fellows, that upon consideration of the charges stated against **AYESHA KAI RAZEEQ** in the Notice of Opportunity for Hearing (Notice) and evidence supporting the charges, the Board find that **MS. RAZEEQ** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice, and that **MS. RAZEEQ's** license to practice nursing as a registered nurse be suspended for an indefinite period of time with the conditions for reinstatement set forth below.

SUSPENSION OF LICENSE

MS. RAZEEQ's license is suspended for an indefinite period of time.

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

CONDITIONS FOR REINSTATEMENT

MS. RAZEEQ shall:

1. Be determined, by the Board or its designee, to be able to practice nursing according to acceptable and prevailing standards of safe nursing care based upon an interview and review of the documentation specified in this Order.
2. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
3. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
4. **Within ninety (90) days immediately prior to requesting reinstatement,** submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MS. RAZEEQ**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MS. RAZEEQ's** criminal records check to the Board. The Board will not consider a request for reinstatement until **MS. RAZEEQ's** completed criminal records check, including the FBI check, is received by the Board.
5. Submit documentation of her full compliance with the terms and conditions imposed by the Order issued by the Texas Board of Nursing, dated February 15, 2018.
6. **Upon the request of the Board or its designee, prior to working in a position where a license to practice nursing is required,** complete and submit satisfactory documentation of completion of a nurse refresher course or an extensive orientation approved in advance by the Board or its designee.

Reporting Requirements for Suspension Period

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

statements, information, or documentation to the Board.

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

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Columbus, OH 43215-3466**

12. Verify that the reports and documentation required by this Order are received in the Board office.
13. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.
14. Submit to the Board a completed application for reinstatement on the form provided by the Board.

Motion adopted by a majority vote of the Board members present with Matthew Carle, Daniel Lehmann and Sandra Ranck abstaining.

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September 2018.

Gibson, Lori Sue, R.N. 369619 (CASE #16-4073)

Action: It was moved by Nancy Fellows, seconded by Joanna Ridgeway, that upon consideration of the charges stated against **LORI SUE GIBSON** in the Notice of Opportunity for Hearing (Notice) and evidence supporting the charges, the Board find that **MS. GIBSON** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice, and that **MS. GIBSON's** license to practice nursing as a registered nurse be suspended and that the suspension is stayed subject to the probationary terms and restrictions set forth below for a minimum period of two (2) years.

PROBATIONARY PERIOD

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

PROBATIONARY TERMS AND RESTRICTIONS

MS. GIBSON shall:

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

Educational Requirements

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

Evaluation

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

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

Monitoring

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

8. **Within ninety (90) days of the effective date of this Order**, begin submitting, at **MS. GIBSON's** expense and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Upon and after **MS. GIBSON's** initiation of drug screening, refusal to submit such specimen, or failure to submit such specimen on the day she is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MS. GIBSON** shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who has received a complete copy of this Order prior to prescribing for **MS. GIBSON**.
 - a. **Prior** to initiating drug screening:
 - i. Provide a copy of this Order to all treating practitioners;
 - ii. Provide to the Board a list of all treating practitioners, including addresses and telephone numbers; and
 - iii. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. GIBSON**, **and** submit the report directly to the Board.

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

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

Employment Conditions

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

Reporting Requirements for Probationary Period

14. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
15. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
16. Submit any and all information that the Board may request regarding **MS. GIBSON's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.

17. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.
18. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: monitoring@nursing.ohio.gov or by mail to:

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Columbus, OH 43215-3466**

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

FAILURE TO COMPLY

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

DURATION

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

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

Motion adopted by a majority vote of the Board members present with Matthew Carle, Daniel Lehmann and Sandra Ranck abstaining.

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September 2018.

Hilbert, Thomas S., R.N. 382271 (CASE #17-6548)

Action: It was moved by Barbara Douglas, seconded by Deborah Knueve, that upon consideration of the charges stated against **THOMAS S. HILBERT** in the Notice of Immediate Suspension and Opportunity for Hearing Notice and the Notice of Opportunity for Hearing (Notices) evidence supporting the charges, the Board find that **MR. HILBERT** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notices, and that **MR. HILBERT's** license to practice nursing as a registered nurse be suspended for an indefinite period of time but not less than two (2) years with the conditions for reinstatement set forth below, and following reinstatement, **MR. HILBERT's** license to practice nursing as a registered nurse shall be subject to a stayed suspension under the probationary terms and restrictions set forth below for a minimum period of three (3) years including the **Temporary Narcotic and Temporary Practice Restrictions**, set forth below.

SUSPENSION OF LICENSE

MR. HILBERT's license is suspended for an indefinite period of time but not less than two (2) years.

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

CONDITIONS FOR REINSTATEMENT

MR. HILBERT shall:

1. Be determined, by the Board or its designee, to be able to practice nursing according to acceptable and prevailing standards of safe nursing care based upon an interview and review of the documentation specified in this Order.
2. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
3. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
4. **Within ninety (90) days immediately prior to requesting reinstatement**, submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MR. HILBERT**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MR. HILBERT's** criminal records check to the Board. The

Board will not consider a request for reinstatement until **MR. HILBERT's** completed criminal records check, including the FBI check, is received by the Board.

5. Submit documentation of his full compliance with the requirements imposed by the Cuyahoga County Court of Common Pleas in Case Number CR-17-622636-A.

Educational Requirements

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

Evaluations

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

Monitoring

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

alcohol.

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

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

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

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

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

12. For a minimum, continuous period of one (1) year immediately prior to requesting reinstatement, attend a minimum of one (1) meeting per week

of a support or peer group meeting approved in advance by the Board, or a Twelve Step program, and provide satisfactory documentation of such attendance to the Board prior to reinstatement.

Reporting Requirements for Suspension Period

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

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

18. Verify that the reports and documentation required by this Order are received in the Board office.
19. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.
20. Submit to the Board a completed application for reinstatement on the form provided by the Board.

PROBATIONARY PERIOD

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

PROBATIONARY TERMS AND RESTRICTIONS

MR. HILBERT shall:

1. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
2. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
3. Submit documentation of his full compliance with the requirements imposed by the Cuyahoga County Court of Common Pleas in Case Number CR-17-622636-A.

Evaluations

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

Monitoring

6. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to him by another so authorized by law who has full knowledge of **MR. HILBERT's** history. **MR. HILBERT** shall self-administer prescribed drugs only in the manner prescribed.
7. Abstain completely from the use of alcohol or any products containing alcohol.

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

MR. HILBERT shall:

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

Employment Conditions

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

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

Reporting Requirements for Probationary Period

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

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

LICENSE RESTRICTIONS

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

Temporary Narcotic Restriction

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

Temporary Practice Restrictions

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

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

FAILURE TO COMPLY

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

DURATION

The Board may only alter the probationary period imposed by this Order if: (1) the Board determines that **MR. HILBERT** has complied with all aspects of this Order; and (2) the Board determines that **MR. HILBERT** is able to practice nursing according to acceptable and prevailing standards of safe nursing care without

Board monitoring, based upon an interview with **MR. HILBERT** and review of the reports as required herein.

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

Motion adopted by a majority vote of the Board members present with Matthew Carle, Daniel Lehmann and Sandra Ranck abstaining.

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September 2018.

Wells, Emily S., R.N. 347555 (CASE #17-1557, #16-7461)

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

SUSPENSION OF LICENSE

MS. WELLS's license is suspended for an indefinite period of time but not less than two (2) years.

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

CONDITIONS FOR REINSTATEMENT

MS. WELLS shall:

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

- practice of nursing in Ohio.
3. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
 4. **Within ninety (90) days immediately prior to requesting reinstatement**, submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MS. WELLS**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MS. WELLS's** criminal records check to the Board. The Board will not consider a request for reinstatement until **MS. WELLS's** completed criminal records check, including the FBI check, is received by the Board.
 5. Submit documentation of her full compliance with the requirements imposed by the Hamilton County Court of Common Pleas in Case Number B 1700383.

Educational Requirements

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

Evaluations

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

Monitoring

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

hospitalization or medical treatment; and

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

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

Reporting Requirements for Suspension Period

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

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

18. Verify that the reports and documentation required by this Order are received in the Board office.
19. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.
20. Submit to the Board a completed application for reinstatement on the form provided by the Board.

PROBATIONARY PERIOD

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

PROBATIONARY TERMS AND RESTRICTIONS

MS. WELLS shall:

1. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
2. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
3. Submit documentation of her full compliance with the requirements imposed by the Hamilton County Court of Common Pleas in Case Number B 1700383.

Evaluations

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

Monitoring

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

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

MS. WELLS shall:

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

Employment Conditions

10. Upon the request of the Board or its designee, prior to working in a position where a license to practice nursing is required, complete and submit satisfactory documentation of completion of a nurse refresher course or an extensive orientation approved in advance by the Board or its designee.

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

Reporting Requirements for Probationary Period

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

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

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

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

LICENSE RESTRICTIONS

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

Temporary Narcotic Restriction

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

Temporary Practice Restrictions

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

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

FAILURE TO COMPLY

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

DURATION

The Board may only alter the probationary period imposed by this Order if: (1) the Board determines that **MS. WELLS** has complied with all aspects of this Order;

and (2) the Board determines that **MS. WELLS** is able to practice nursing according to acceptable and prevailing standards of safe nursing care without Board monitoring, based upon an interview with **MS. WELLS** and review of the reports as required herein.

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

Motion adopted by a majority vote of the Board members present with Matthew Carle, Daniel Lehmann and Sandra Ranck abstaining.

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September 2018.

Baker, Kitzi A., (aka "Kitzi A. McVey") R.N. 418049 (CASE #17-5462, #17-3086)

Action: It was moved by Patricia Sharpnack, seconded by Brenda Boggs, that upon consideration of the charges stated against **KITZI A. BAKER** in the Notice of Opportunity for Hearing (Notice) and evidence supporting the charges, the Board find that **MS. BAKER** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice, and that **MS. BAKER's** license to practice nursing as a registered nurse be suspended for an indefinite period of time but not less than two (2) years with the conditions for reinstatement set forth below, and following reinstatement, **MS. BAKER's** license to practice nursing as a registered nurse shall be subject to a stayed suspension under the probationary terms and restrictions set forth below for a minimum period of two (2) years.

SUSPENSION OF LICENSE

MS. BAKER's license is suspended for an indefinite period of time but not less than two (2) years.

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

CONDITIONS FOR REINSTATEMENT

MS. BAKER shall:

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

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

Evaluation

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

Monitoring

7. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. BAKER's** history. **MS. BAKER** shall self-administer the prescribed drugs only in the manner prescribed.
8. Abstain completely from the use of alcohol or any products containing alcohol.
9. **For a minimum, continuous period of one (1) year immediately prior to**

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

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

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

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

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

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

Reporting Requirements for Suspension Period

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

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

16. Verify that the reports and documentation required by this Order are received in the Board office.
17. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.
18. Submit to the Board a completed application for reinstatement on the form provided by the Board.

PROBATIONARY PERIOD

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

PROBATIONARY TERMS AND RESTRICTIONS

MS. BAKER shall:

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

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

Evaluations

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

Monitoring

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

submitted by **MS. BAKER** shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who has received a complete copy of this Order prior to prescribing for **MS. BAKER**.

MS. BAKER shall:

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

Employment Conditions

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

of this Order or beginning within thirty (30) days of working in a position as a nurse, whichever is later.

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

Reporting Requirements for Probationary Period

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

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

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

FAILURE TO COMPLY

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

regarding the charges.

DURATION

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

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

Motion adopted by a majority vote of the Board members present with Matthew Carle, Daniel Lehmann and Sandra Ranck abstaining.

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September 2018.

Hugebeck, Kristen (aka "Kristen Elizabeth Miller"), P.N. 144033 (CASE #18-0690)

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

SUSPENSION OF LICENSE

MS. HUGEBECK's license is suspended for an indefinite period of time.

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

CONDITIONS FOR REINSTATEMENT

MS. HUGEBECK shall:

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

Educational Requirements

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

Evaluations

7. **Within ninety (90) days immediately prior to requesting reinstatement**, at **MS. HUGEBECK's** expense, obtain a mental health evaluation from a Board approved evaluator and provide the Board with complete documentation of such evaluation. Prior to the evaluation, **MS.**

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

Reporting Requirements for Suspension Period

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

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

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

16. Submit to the Board a completed application for reinstatement on the form provided by the Board.

PROBATIONARY PERIOD

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

PROBATIONARY TERMS AND RESTRICTIONS

MS. HUGEBECK shall:

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

Employment Conditions

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

Reporting Requirements for Probationary Period

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

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

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

LICENSE RESTRICTIONS

In addition to Probationary Terms and Restrictions, MS. HUGEBECK's license remains subject to the following License Restrictions:

Permanent Practice Restrictions

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

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

FAILURE TO COMPLY

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

DURATION

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

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

Motion adopted by a majority vote of the Board members present with Matthew Carle, Daniel Lehmann and Sandra Ranck abstaining.

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September 2018.

Paul, Angela Kay (aka "Angela Woosley"), P.N. 103345 (CASE #18-0515)

Action: It was moved by Sandra Beidelschies, seconded by Brenda Boggs, that upon consideration of the charges stated against **ANGELA KAY PAUL** in the Notice of Automatic Suspension and Opportunity for Hearing (Notice) and evidence supporting the charges, the Board find that **MS. PAUL** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice, and that **MS. PAUL's** license to practice nursing as a licensed practical nurse be suspended for an indefinite period of time with the conditions for reinstatement set forth below, and following reinstatement, **MS. PAUL's** license to

practice nursing as a licensed practical nurse shall be subject to a stayed suspension under the probationary terms and restrictions set forth below for a minimum period of two (2) years including the **Temporary Narcotic and Temporary Practice Restrictions**, set forth below.

SUSPENSION OF LICENSE

MS. PAUL's license is suspended for an indefinite period of time.

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

CONDITIONS FOR REINSTATEMENT

MS. PAUL shall:

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

Educational Requirements

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

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

Evaluations

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

license.

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

Monitoring

13. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. PAUL's** history. **MS. PAUL** shall self-administer the prescribed drugs only in the manner prescribed.
14. Abstain completely from the use of alcohol or any products containing alcohol.
15. **Within ninety (90) days immediately prior to requesting reinstatement,** submit, at **MS. PAUL's** expense and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Upon and after **MS. PAUL's** initiation of drug screening, refusal to submit such specimen, or failure to submit such specimen on the day she is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MS. PAUL** shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who has received a complete copy of this Order prior to prescribing for **MS. PAUL**.
 - a. ***Prior*** to initiating drug screening:

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

Reporting Requirements for Suspension Period

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

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

21. Verify that the reports and documentation required by this Order are received in the Board office.
22. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.
23. Submit to the Board a completed application for reinstatement on the form provided by the Board.

PROBATIONARY PERIOD

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

PROBATIONARY TERMS AND RESTRICTIONS

MS. PAUL shall:

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

Monitoring

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

submitted by **MS. PAUL** shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who has received a complete copy of this Order prior to prescribing for **MS. PAUL**.

MS. PAUL shall:

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

Employment Conditions

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

Reporting Requirements for Probationary Period

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

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

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

LICENSE RESTRICTIONS

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

Temporary Narcotic Restriction

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

Temporary Practice Restrictions

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

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

FAILURE TO COMPLY

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

DURATION

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

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

Motion adopted by a majority vote of the Board members present with Matthew Carle, Daniel Lehmann and Sandra Ranck abstaining.

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September 2018.

Peiffer, Laurel A., R.N. 179002 (CASE #18-1501, #18-0914)

Action: It was moved by Erin Keels, seconded by Sandra Beidelschies, that upon consideration of the charges stated against **LAUREL A. PEIFFER** in the Notice of Automatic Suspension and Opportunity for Hearing (Notice) and evidence

supporting the charges, the Board find that **MS. PEIFFER** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice, and that **MS. PEIFFER's** license to practice nursing as a registered nurse be suspended for an indefinite period of time with the conditions for reinstatement set forth below, and following reinstatement, **MS. PEIFFER's** license to practice nursing as a registered nurse shall be subject to a stayed suspension under the probationary terms and restrictions set forth below for a minimum period of two (2) years including the **Temporary Practice Restrictions, unless otherwise approved in advance**, set forth below.

SUSPENSION OF LICENSE

MS. PEIFFER's license is suspended for an indefinite period of time.

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

CONDITIONS FOR REINSTATEMENT

MS. PEIFFER shall:

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

Evaluation

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

Monitoring

8. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. PEIFFER's** history. **MS. PEIFFER** shall self-administer the prescribed drugs only in the manner prescribed.
9. Abstain completely from the use of alcohol or any products containing alcohol.
10. **For a minimum, continuous period of ninety (90) days immediately prior to requesting reinstatement**, submit, at **MS. PEIFFER's** expense and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Upon and after **MS. PEIFFER's** initiation of drug screening, refusal to submit such specimen, or failure to submit such specimen on the day she is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MS. PEIFFER** shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who has received a complete copy of this Order prior to prescribing for **MS. PEIFFER**.

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

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

11. **For a minimum, continuous period of ninety (90) days immediately prior to requesting reinstatement**, attend a minimum of one (1) meeting per week of a support or peer group meeting approved in advance by the Board, or a Twelve Step program, and provide satisfactory documentation of such attendance to the Board prior to reinstatement.

Reporting Requirements for Suspension Period

12. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
13. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
14. Submit any and all information that the Board may request regarding **MS. PEIFFER's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.

15. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board.
16. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: monitoring@nursing.ohio.gov or by mail to:

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

17. Verify that the reports and documentation required by this Order are received in the Board office.
18. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.
19. Submit to the Board a completed application for reinstatement on the form provided by the Board.

PROBATIONARY PERIOD

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

PROBATIONARY TERMS AND RESTRICTIONS

MS. PEIFFER shall:

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

Monitoring

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

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

MS. PEIFFER shall:

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

Employment Conditions

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

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

Reporting Requirements for Probationary Period

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

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

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

LICENSE RESTRICTIONS

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

Temporary Practice Restrictions

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

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

FAILURE TO COMPLY

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

DURATION

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

As indicated above under Employment Conditions, any period during which **MS. PEIFFER** does not work in a position within the State of Ohio for which a license to practice nursing is required shall not count toward fulfilling the probationary period imposed by this Order.

Motion adopted by a majority vote of the Board members present with Matthew Carle, Daniel Lehmann and Sandra Ranck abstaining.

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September 2018.

Horn, Connie Sue, P.N. 114508 (CASE #17-4531, #17-1492)

Action: it was moved by Joanna Ridgeway, seconded by Nancy Fellows, that upon consideration of the charges stated against **CONNIE SUE HORN** in the Notice of Immediate Suspension and Opportunity for Hearing (Notice) and evidence supporting the charges, the Board find that **MS. HORN** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice, and that **MS. HORN's** license to practice nursing as a licensed practical nurse be suspended for an indefinite period of time with the conditions for reinstatement set forth below, and following reinstatement, **MS. HORN's** license to practice nursing as a licensed practical nurse shall be subject to a stayed suspension under the probationary terms and restrictions set forth below for a minimum period of three (3) years including the **Temporary Narcotic Restrictions**, set forth below.

SUSPENSION OF LICENSE

MS. HORN's license is suspended for an indefinite period of time.

The Board may reinstate **MS. HORN's** license if **MS. HORN** submits a written request for reinstatement and is determined by the Board or its designee to have complied with the Conditions for Reinstatement.

CONDITIONS FOR REINSTATEMENT

MS. HORN shall:

1. Be determined, by the Board or its designee, to be able to practice nursing according to acceptable and prevailing standards of safe nursing care based upon an interview and review of the documentation specified in this Order.
2. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
3. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
4. **Within ninety (90) days immediately prior to requesting reinstatement**, submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MS. HORN**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII

- submit **MS. HORN's** criminal records check to the Board. The Board will not consider a request for reinstatement until **MS. HORN's** completed criminal records check, including the FBI check, is received by the Board.
5. Submit documentation of her full compliance with the requirements imposed by the Warren County Court of Common Pleas in Case Number 17CR33097.

Educational Requirements

6. Successfully complete and submit satisfactory documentation of successful completion of the following continuing education, or other comparable course(s) approved in advance by the Board or its designee: five (5) hours Substance Abuse, four (4) hours Professional Accountability and Legal Liability for Nurses, and two (2) hours Ohio Nursing Laws and Rules. Continuing education required by this Order **does not meet the continuing education requirements for license renewal.**

Evaluations

7. **Within ninety (90) days immediately prior to requesting reinstatement,** at **MS. HORN's** expense, obtain a chemical dependency evaluation by a chemical dependency professional approved by the Board or its designee and, prior to the evaluation, provide the chemical dependency professional with a copy of this Order and the Notice. **MS. HORN** shall execute releases to permit the chemical dependency professional to obtain any information deemed appropriate and necessary for the evaluation. The chemical dependency professional shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on **MS. HORN's** license, and a statement as to whether **MS. HORN** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
8. Provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the chemical dependency professional described above until released. Further, the Board may utilize the professional's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on **MS. HORN's** license.

Monitoring

9. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. HORN's** history. **MS. HORN** shall self-administer the prescribed drugs only in the manner prescribed.
10. Abstain completely from the use of alcohol or any products containing

alcohol.

11. **For a minimum, continuous period of one (1) year immediately prior to requesting reinstatement**, submit, at **MS. HORN's** expense and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Upon and after **MS. HORN's** initiation of drug screening, refusal to submit such specimen, or failure to submit such specimen on the day she is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MS. HORN** shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who has received a complete copy of this Order prior to prescribing for **MS. HORN**.

a. **Prior** to initiating drug screening:

- i. Provide a copy of this Order to all treating practitioners;
- ii. Provide to the Board a list of all treating practitioners, including addresses and telephone numbers; and
- iii. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. HORN**, **and** submit the report directly to the Board.

b. **After** initiating drug screening, be under a **continuing duty** to:

- i. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
- ii. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;
- iii. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and
- iv. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. HORN and** submit the report directly to the Board.

Reporting Requirements for Suspension Period

12. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
13. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
14. Submit any and all information that the Board may request regarding **MS. HORN's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
15. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board.
16. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: monitoring@nursing.ohio.gov or by mail to:

**Compliance Unit
Ohio Board of Nursing
17 South High Street, Suite 660
Columbus, OH 43215-3466**

17. Verify that the reports and documentation required by this Order are received in the Board office.
18. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.
19. Submit to the Board a completed application for reinstatement on the form provided by the Board.

PROBATIONARY PERIOD

Following reinstatement, the suspension shall be stayed and **MS. HORN's** license shall be subject to Probationary Terms and Restrictions for a minimum period of three (3) years.

PROBATIONARY TERMS AND RESTRICTIONS

MS. HORN shall:

1. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.

2. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
3. Submit documentation of her full compliance with the requirements imposed by the Warren County Court of Common Pleas in Case Number 17CR33097.

Monitoring

4. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. HORN's** history. **MS. HORN** shall self-administer prescribed drugs only in the manner prescribed.
5. Abstain completely from the use of alcohol or any products containing alcohol.
6. Submit, at her expense, and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. **MS. HORN may request release from this requirement after one (1) year of the probationary period.** Refusal to submit such specimen, or failure to submit such specimen on the day she is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MS. HORN** shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who has received a complete copy of this Order prior to prescribing for **MS. HORN**.

MS. HORN shall:

- a. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
- b. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;
- c. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and
- d. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. HORN** *and* submit the report directly to the Board.

Employment Conditions

7. **Upon the request of the Board or its designee, prior to working in a position where a license to practice nursing is required**, complete and submit satisfactory documentation of completion of a nurse refresher course or an extensive orientation approved in advance by the Board or its designee.
8. **Prior to accepting employment as a nurse**, each time with every employer, notify the Board, in writing. Any period during which **MS. HORN** does not work in a position within the State of Ohio for which a license to practice nursing is required **shall not count** toward fulfilling the probationary period imposed by this Order.
9. Be under a continuing duty to provide a copy of this Order to any new employer **prior to accepting employment as a nurse**.
10. Have current employer(s), if working in a position where a license to practice nursing is required, submit written reports regarding job performance **on a quarterly basis beginning within thirty (30) days of the effective date of this Order or beginning within thirty (30) days of working in a position as a nurse, whichever is later**.
11. Have current employer(s) send documentation to the Board, along with the first employer report, of receipt of a copy of this Order, including the date this Order was received.

Reporting Requirements for Probationary Period

12. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
13. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
14. Submit any and all information that the Board may request regarding **MS. HORN's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
15. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.
16. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: monitoring@nursing.ohio.gov or by mail to:

**Compliance Unit
Ohio Board of Nursing
17 South High Street, Suite 660
Columbus, OH 43215-3466**

17. Verify that the reports and documentation required by this Order are received in the Board office.
18. Inform the Board **within five (5) business days**, in writing, of any change in employment status or of any change in residential or home address or telephone number.

LICENSE RESTRICTIONS

In addition to Probationary Terms and Restrictions, MS. HORN's license is subject to the following License Restrictions:

Temporary Narcotic Restriction

MS. HORN shall not administer, have access to, or possess (except as prescribed for **MS. HORN's** use by another so authorized by law who has full knowledge of **MS. HORN's** history) any narcotics, other controlled substances, or mood altering drugs. In addition, **MS. HORN** shall not count narcotics or possess or carry any work keys for locked medication carts, cabinets, drawers, or containers. **MS. HORN** shall not call in or order prescriptions or prescription refills.

FAILURE TO COMPLY

The stay of **MS. HORN's** suspension shall be lifted and **MS. HORN's** license to practice nursing as a licensed practical nurse will be automatically suspended if it appears to the Board that **MS. HORN** has violated or breached any terms or conditions of this Order. Following the automatic suspension, the Board shall notify **MS. HORN** via certified mail of the specific nature of the charges and automatic suspension of **MS. HORN's** license. **MS. HORN** may request a hearing regarding the charges.

DURATION

The Board may only alter the probationary period imposed by this Order if: (1) the Board determines that **MS. HORN** has complied with all aspects of this Order; and (2) the Board determines that **MS. HORN** is able to practice nursing according to acceptable and prevailing standards of safe nursing care without Board monitoring, based upon an interview with **MS. HORN** and review of the reports as required herein.

As indicated above under Employment Conditions, any period during which **MS. HORN** does not work in a position within the State of Ohio for which a license to

practice nursing is required shall not count toward fulfilling the probationary period imposed by this Order.

Motion adopted by a majority vote of the Board members present with Matthew Carle, Daniel Lehmann and Sandra Ranck abstaining.

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September 2018.

Folczynski, Michael J., R.N. 378556 (CASE #17-5445)

Action: It was moved by Barbara Douglas, seconded by Nancy Fellows, that upon consideration of the charges stated against **MICHAEL J. FOLCZYNSKI** in the Notice of Immediate Suspension and Opportunity for Hearing (Notice) and evidence supporting the charges, the Board find that **MR. FOLCZYNSKI** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice, and that **MR. FOLCZYNSKI's** license to practice nursing as a registered nurse be suspended for an indefinite period of time but not less than two (2) years with the conditions for reinstatement set forth below, and following reinstatement, **MR. FOLCZYNSKI's** license to practice nursing as a registered nurse shall be subject to a stayed suspension under the probationary terms and restrictions set forth below for a minimum period of three (3) years including the **Temporary Narcotic and Permanent Practice Restrictions**, set forth below.

SUSPENSION OF LICENSE

MR. FOLCZYNSKI's license is suspended for an indefinite period of time but not less than two (2) years.

The Board may reinstate **MR. FOLCZYNSKI's** license if **MR. FOLCZYNSKI** submits a written request for reinstatement and is determined by the Board or its designee to have complied with the Conditions for Reinstatement.

CONDITIONS FOR REINSTATEMENT

MR. FOLCZYNSKI shall:

1. Be determined, by the Board or its designee, to be able to practice nursing according to acceptable and prevailing standards of safe nursing care based upon an interview and review of the documentation specified in this Order.
2. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
3. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.

4. **Within ninety (90) days immediately prior to requesting reinstatement**, submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MR. FOLCZYNSKI**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MR. FOLCZYNSKI's** criminal records check to the Board. The Board will not consider a request for reinstatement until **MR. FOLCZYNSKI's** completed criminal records check, including the FBI check, is received by the Board.
5. Submit documentation of his full compliance with the requirements imposed by the Cuyahoga County Court of Common Pleas in Case Number CR-17-621893-A.

Educational Requirements

6. Successfully complete and submit satisfactory documentation of successful completion of the following continuing education, or other comparable course(s) approved in advance by the Board or its designee: four (4) hours Professional Accountability & Legal Liability, five (5) hours Ethics, and two (2) hours Ohio Nursing Law and Rules. Continuing education required by this Order **does not meet the continuing education requirements for license renewal**.

Evaluations

7. **Within ninety (90) days immediately prior to requesting reinstatement**, at **MR. FOLCZYNSKI's** expense, obtain a chemical dependency evaluation by a chemical dependency professional approved by the Board or its designee and, prior to the evaluation, provide the chemical dependency professional with a copy of this Order and the Notice. **MR. FOLCZYNSKI** shall execute releases to permit the chemical dependency professional to obtain any information deemed appropriate and necessary for the evaluation. The chemical dependency professional shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on **MR. FOLCZYNSKI's** license, and a statement as to whether **MR. FOLCZYNSKI** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
8. Provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the chemical dependency professional described above until released. Further, the Board may utilize the professional's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on **MR. FOLCZYNSKI's** license.

Monitoring

9. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to him by another so authorized by law who has full knowledge of **MR. FOLCZYNSKI's** history. **MR. FOLCZYNSKI** shall self-administer the prescribed drugs only in the manner prescribed.
10. Abstain completely from the use of alcohol or any products containing alcohol.
11. **For a minimum, continuous period of one (1) year immediately prior to requesting reinstatement**, submit, at **MR. FOLCZYNSKI's** expense and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Upon and after **MR. FOLCZYNSKI's** initiation of drug screening, refusal to submit such specimen, or failure to submit such specimen on the day he is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MR. FOLCZYNSKI** shall be negative, except for substances prescribed, administered, or dispensed to him by another so authorized by law who has received a complete copy of this Order prior to prescribing for **MR. FOLCZYNSKI**.
 - a. ***Prior*** to initiating drug screening:
 - i. Provide a copy of this Order to all treating practitioners;
 - ii. Provide to the Board a list of all treating practitioners, including addresses and telephone numbers; and
 - iii. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MR. FOLCZYNSKI**, **and** submit the report directly to the Board.
 - b. ***After*** initiating drug screening, be under a ***continuing duty*** to:
 - i. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
 - ii. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;
 - iii. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from

hospitalization or medical treatment; and

- iv. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MR. FOLCZYNSKI** *and* submit the report directly to the Board.

12. **For a minimum, continuous period of one (1) year immediately prior to requesting reinstatement**, attend a minimum of one (1) meeting per week of a support or peer group meeting approved in advance by the Board, or a Twelve Step program, and provide satisfactory documentation of such attendance to the Board prior to reinstatement.

Reporting Requirements for Suspension Period

13. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
14. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
15. Submit any and all information that the Board may request regarding **MR. FOLCZYNSKI's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
16. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board.
17. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: monitoring@nursing.ohio.gov or by mail to:

**Compliance Unit
Ohio Board of Nursing
17 South High Street, Suite 660
Columbus, OH 43215-3466**

18. Verify that the reports and documentation required by this Order are received in the Board office.
19. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.
20. Submit to the Board a completed application for reinstatement on the form provided by the Board.

PROBATIONARY PERIOD

Following reinstatement, the suspension shall be stayed and **MR. FOLCZYNSKI's** license shall be subject to Probationary Terms and Restrictions for a minimum period of three (3) years.

PROBATIONARY TERMS AND RESTRICTIONS

MR. FOLCZYNSKI shall:

1. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
2. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
3. Submit documentation of his full compliance with the requirements imposed by the Cuyahoga County Court of Common Pleas in Case Number CR-17-621893-A.

Evaluations

4. **Upon the request of the Board or its designee and within sixty (60) days of that request, at MR. FOLCZYNSKI's expense, obtain a chemical dependency evaluation by a chemical dependency professional approved by the Board or its designee and, prior to the evaluation, provide the chemical dependency professional with a copy of this Order and the Notice. MR. FOLCZYNSKI shall execute releases to permit the chemical dependency professional to obtain any information deemed appropriate and necessary for the evaluation. The chemical dependency professional shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on MR. FOLCZYNSKI's license, and a statement as to whether MR. FOLCZYNSKI is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.**
5. **If a chemical dependency evaluation is requested, provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the chemical dependency professional described above until released. Further, the Board may utilize the professional's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on MR. FOLCZYNSKI's license.**

Monitoring

6. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to him by another so authorized by

- law who has full knowledge of **MR. FOLCZYNSKI's** history. **MR. FOLCZYNSKI** shall self-administer prescribed drugs only in the manner prescribed.
7. Abstain completely from the use of alcohol or any products containing alcohol.
 8. Submit, at his expense, and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Refusal to submit such specimen, or failure to submit such specimen on the day he is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MR. FOLCZYNSKI** shall be negative, except for substances prescribed, administered, or dispensed to him by another so authorized by law who has received a complete copy of this Order prior to prescribing for **MR. FOLCZYNSKI**.

MR. FOLCZYNSKI shall:

- a. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
 - b. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;
 - c. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and
 - d. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MR. FOLCZYNSKI** *and* submit the report directly to the Board.
9. Attend a minimum of one (1) meeting per week of a support or peer group meeting approved in advance by the Board, or a Twelve Step program, and provide satisfactory documentation of such attendance to the Board every six (6) months.

Employment Conditions

10. **Upon the request of the Board or its designee, prior to working in a position where a license to practice nursing is required**, complete and submit satisfactory documentation of completion of a nurse refresher

course or an extensive orientation approved in advance by the Board or its designee.

11. **Prior to accepting employment as a nurse**, each time with every employer, notify the Board, in writing. Any period during which **MR. FOLCZYNSKI** does not work in a position within the State of Ohio for which a license to practice nursing is required **shall not count** toward fulfilling the probationary period imposed by this Order.
12. Be under a continuing duty to provide a copy of this Order to any new employer **prior to accepting employment as a nurse**.
13. Have current employer(s), if working in a position where a license to practice nursing is required, submit written reports regarding job performance **on a quarterly basis beginning within thirty (30) days of the effective date of this Order or beginning within thirty (30) days of working in a position as a nurse, whichever is later**.
14. Have current employer(s) send documentation to the Board, along with the first employer report, of receipt of a copy of this Order, including the date this Order was received.

Reporting Requirements for Probationary Period

15. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
16. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
17. Submit any and all information that the Board may request regarding **MR. FOLCZYNSKI's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
18. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.
19. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: monitoring@nursing.ohio.gov or by mail to:

**Compliance Unit
Ohio Board of Nursing
17 South High Street, Suite 660
Columbus, OH 43215-3466**

20. Verify that the reports and documentation required by this Order are received in the Board office.
21. Inform the Board **within five (5) business days**, in writing, of any change in employment status or of any change in residential or home address or telephone number.

LICENSE RESTRICTIONS

In addition to Probationary Terms and Restrictions, MR. FOLCZYNSKI's license is subject to the following License Restrictions:

Temporary Narcotic Restriction

MR. FOLCZYNSKI shall not administer, have access to, or possess (except as prescribed for **MR. FOLCZYNSKI's** use by another so authorized by law who has full knowledge of **MR. FOLCZYNSKI's** history) any narcotics, other controlled substances, or mood altering drugs. In addition, **MR. FOLCZYNSKI** shall not count narcotics or possess or carry any work keys for locked medication carts, cabinets, drawers, or containers. **MR. FOLCZYNSKI** shall not call in or order prescriptions or prescription refills.

Permanent Practice Restrictions

MR. FOLCZYNSKI shall not practice nursing as a registered nurse (1) in a patient's residence; (2) for staffing agencies or pools; (3) for an individual or group of individuals who directly engage **MR. FOLCZYNSKI** to provide nursing services for fees, compensation, or other consideration or who engage **MR. FOLCZYNSKI** as a volunteer; or (4) as an independent contractor or for *locum tenens* assignments.

MR. FOLCZYNSKI shall not function in a position or employment where the job duties or requirements involve management of nursing and nursing responsibilities, or supervising and evaluating nursing practice. Such positions include, but are not limited to, the following: Director of Nursing, Assistant Director of Nursing, Nurse Manager, Vice President of Nursing.

FAILURE TO COMPLY

The stay of **MR. FOLCZYNSKI's** suspension shall be lifted and **MR. FOLCZYNSKI's** license to practice nursing as a registered nurse will be automatically suspended if it appears to the Board that **MR. FOLCZYNSKI** has violated or breached any terms or conditions of this Order. Following the automatic suspension, the Board shall notify **MR. FOLCZYNSKI** via certified mail of the specific nature of the charges and automatic suspension of **MR. FOLCZYNSKI's** license. **MR. FOLCZYNSKI** may request a hearing regarding the charges.

DURATION

The Board may only alter the probationary period imposed by this Order if: (1) the Board determines that **MR. FOLCZYNSKI** has complied with all aspects of this Order; and (2) the Board determines that **MR. FOLCZYNSKI** is able to practice nursing according to acceptable and prevailing standards of safe nursing care without Board monitoring, based upon an interview with **MR. FOLCZYNSKI** and review of the reports as required herein.

As indicated above under Employment Conditions, any period during which **MR. FOLCZYNSKI** does not work in a position within the State of Ohio for which a license to practice nursing is required shall not count toward fulfilling the probationary period imposed by this Order.

Motion adopted by a majority vote of the Board members present with Matthew Carle, Daniel Lehmann and Sandra Ranck abstaining.

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September 2018.

Porter, Mara Christine, R.N. 412935 (CASE #17-4451)

Action: It was moved by Nancy Fellows, seconded by Barbara Douglas, that upon consideration of the charges stated against **MARA CHRISTINE PORTER** in the Notice of Automatic Suspension and Opportunity for Hearing (Notice) and evidence supporting the charges, the Board find that **MS. PORTER** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice, and that **MS. PORTER's** license to practice nursing as a registered nurse be suspended for an indefinite period of time with the conditions for reinstatement set forth below, and following reinstatement, **MS. PORTER's** license to practice nursing as a registered nurse shall be subject to a stayed suspension under the probationary terms and restrictions set forth below for a minimum period of one (1) year including the **Temporary Practice Restrictions, unless otherwise approved in advance**, set forth below.

SUSPENSION OF LICENSE

MS. PORTER's license is suspended for an indefinite period of time.

The Board may reinstate **MS. PORTER's** license if **MS. PORTER** submits a written request for reinstatement and is determined by the Board or its designee to have complied with the Conditions for Reinstatement.

CONDITIONS FOR REINSTATEMENT

MS. PORTER shall:

1. Be determined, by the Board or its designee, to be able to practice nursing according to acceptable and prevailing standards of safe nursing care based upon an interview and review of the documentation specified in this Order.
2. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
3. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
4. **Within ninety (90) days immediately prior to requesting reinstatement,** submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MS. PORTER**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MS. PORTER's** criminal records check to the Board. The Board will not consider a request for reinstatement until **MS. PORTER's** completed criminal records check, including the FBI check, is received by the Board.

Educational Requirements

5. Successfully complete and submit satisfactory documentation of successful completion of the following continuing education, or other comparable course(s) approved in advance by the Board or its designee: five (5) hours Substance Use Disorder; five (5) hours Professionalism; five (5) hours Stress Management; five (5) hours Anger Management; and two (2) hours Ohio Nursing Law and Rules. Continuing education required by this Order **does not meet the continuing education requirements for license renewal.**

Evaluations

6. **Within ninety (90) days immediately prior to requesting reinstatement,** at **MS. PORTER's** expense, obtain a mental health evaluation from a Board approved evaluator and provide the Board with complete documentation of such evaluation. Prior to the evaluation, **MS. PORTER** shall provide the mental health evaluator with a copy of this Order and the Notice. **MS. PORTER** shall execute releases to permit the mental health evaluator to obtain any information deemed appropriate and necessary for the evaluation. The mental health evaluator shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on **MS.**

- PORTER's** license, and a statement as to whether **MS. PORTER** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
7. Provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the mental health evaluator described above until released. Further, the Board may utilize the mental health evaluator's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on **MS. PORTER's** license.
 8. **Upon the request of the Board or its designee and within sixty (60) days of that request**, at **MS. PORTER's** expense, obtain a chemical dependency evaluation by a chemical dependency professional approved by the Board or its designee and, prior to the evaluation, provide the chemical dependency professional with a copy of this Order and the Notice. **MS. PORTER** shall execute releases to permit the chemical dependency professional to obtain any information deemed appropriate and necessary for the evaluation. The chemical dependency professional shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on **MS. PORTER's** license, and a statement as to whether **MS. PORTER** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
 9. **If a chemical dependency evaluation is requested**, provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the chemical dependency professional described above until released. Further, the Board may utilize the professional's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on **MS. PORTER's** license.

Monitoring

10. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. PORTER's** history. **MS. PORTER** shall self-administer the prescribed drugs only in the manner prescribed.
11. **For a minimum, continuous period of ninety (90) days immediately prior to requesting reinstatement**, submit, at **MS. PORTER's** expense and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Upon and after **MS. PORTER's** initiation of drug screening, refusal to submit such specimen, or failure to submit such specimen on the day she is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily

call-in process. The specimens submitted by **MS. PORTER** shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who has received a complete copy of this Order prior to prescribing for **MS. PORTER**.

a. **Prior** to initiating drug screening:

- i. Provide a copy of this Order to all treating practitioners;
- ii. Provide to the Board a list of all treating practitioners, including addresses and telephone numbers; and
- iii. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. PORTER**, **and** submit the report directly to the Board.

b. **After** initiating drug screening, be under a **continuing duty** to:

- i. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
- ii. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;
- iii. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and
- iv. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. PORTER** **and** submit the report directly to the Board.

Reporting Requirements for Suspension Period

12. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
13. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
14. Submit any and all information that the Board may request regarding **MS. PORTER's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
15. Not submit or cause to be submitted any false, misleading, or deceptive

statements, information, or documentation to the Board.

16. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: monitoring@nursing.ohio.gov or by mail to:

**Compliance Unit
Ohio Board of Nursing
17 South High Street, Suite 660
Columbus, OH 43215-3466**

17. Verify that the reports and documentation required by this Order are received in the Board office.
18. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.
19. Submit to the Board a completed application for reinstatement on the form provided by the Board.

PROBATIONARY PERIOD

Following reinstatement, the suspension shall be stayed and **MS. PORTER's** license shall be subject to Probationary Terms and Restrictions for a minimum period of one (1) year.

PROBATIONARY TERMS AND RESTRICTIONS

MS. PORTER shall:

1. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
2. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.

Monitoring

3. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. PORTER's** history. **MS. PORTER** shall self-administer prescribed drugs only in the manner prescribed.
4. Submit, at her expense, and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Refusal to submit such specimen, or failure to submit such specimen on the day she is selected, or

in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MS. PORTER** shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who has received a complete copy of this Order prior to prescribing for **MS. PORTER**.

MS. PORTER shall:

- a. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
- b. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;
- c. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and
- d. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. PORTER** *and* submit the report directly to the Board.

Employment Conditions

5. **Upon the request of the Board or its designee, prior to working in a position where a license to practice nursing is required**, complete and submit satisfactory documentation of completion of a nurse refresher course or an extensive orientation approved in advance by the Board or its designee.
6. **Prior to accepting employment as a nurse**, each time with every employer, notify the Board, in writing. Any period during which **MS. PORTER** does not work in a position within the State of Ohio for which a license to practice nursing is required **shall not count** toward fulfilling the probationary period imposed by this Order.
7. Be under a continuing duty to provide a copy of this Order to any new employer **prior to accepting employment as a nurse**.
8. Have current employer(s), if working in a position where a license to practice nursing is required, submit written reports regarding job performance **on a quarterly basis beginning within thirty (30) days of the effective date of this Order or beginning within thirty (30) days of working in a position as a nurse, whichever is later**.

9. Have current employer(s) send documentation to the Board, along with the first employer report, of receipt of a copy of this Order, including the date this Order was received.

Reporting Requirements for Probationary Period

10. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
11. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
12. Submit any and all information that the Board may request regarding **MS. PORTER's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
13. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.
14. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: monitoring@nursing.ohio.gov or by mail to:

**Compliance Unit
Ohio Board of Nursing
17 South High Street, Suite 660
Columbus, OH 43215-3466**

15. Verify that the reports and documentation required by this Order are received in the Board office.
16. Inform the Board **within five (5) business days**, in writing, of any change in employment status or of any change in residential or home address or telephone number.

LICENSE RESTRICTIONS

In addition to Probationary Terms and Restrictions, MS. PORTER's license is subject to the following License Restrictions:

Temporary Practice Restrictions

Unless otherwise approved in advance, in writing, by the Board or its designee, MS. PORTER shall not practice nursing as a registered nurse (1) in a patient's residence; (2) for staffing agencies or pools; (3) for an individual or group

of individuals who directly engage **MS. PORTER** to provide nursing services for fees, compensation, or other consideration or who engage **MS. PORTER** as a volunteer; or (4) as an independent contractor or for *locum tenens* assignments.

Unless otherwise approved in advance, in writing, by the Board or its designee, MS. PORTER shall not function in a position or employment where the job duties or requirements involve management of nursing and nursing responsibilities, or supervising and evaluating nursing practice. Such positions include, but are not limited to, the following: Director of Nursing, Assistant Director of Nursing, Nurse Manager, Vice President of Nursing.

FAILURE TO COMPLY

The stay of **MS. PORTER's** suspension shall be lifted and **MS. PORTER's** license to practice nursing as a registered nurse will be automatically suspended if it appears to the Board that **MS. PORTER** has violated or breached any terms or conditions of this Order. Following the automatic suspension, the Board shall notify **MS. PORTER** via certified mail of the specific nature of the charges and automatic suspension of **MS. PORTER's** license. **MS. PORTER** may request a hearing regarding the charges.

DURATION

The Board may only alter the probationary period imposed by this Order if: (1) the Board determines that **MS. PORTER** has complied with all aspects of this Order; and (2) the Board determines that **MS. PORTER** is able to practice nursing according to acceptable and prevailing standards of safe nursing care without Board monitoring, based upon an interview with **MS. PORTER** and review of the reports as required herein.

As indicated above under Employment Conditions, any period during which **MS. PORTER** does not work in a position within the State of Ohio for which a license to practice nursing is required shall not count toward fulfilling the probationary period imposed by this Order.

Motion adopted by a majority vote of the Board members present with Matthew Carle, Daniel Lehmann and Sandra Ranck abstaining.

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September 2018.

Townsend, Jamie L., P.N. 111083 (CASE #17-6173)

Action: It was moved by Barbara Douglas, seconded by Nancy Fellows, that upon consideration of the charges stated against **JAMIE L. TOWNSEND** in the Notice of Automatic Suspension and Opportunity for Hearing (Notice) and evidence supporting the charges, the Board find that **MS. TOWNSEND** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated

in the Notice, and that **MS. TOWNSEND's** license to practice nursing as a licensed practical nurse be suspended for an indefinite period of time with the conditions for reinstatement set forth below, and following reinstatement, **MS. TOWNSEND's** license to practice nursing as a licensed practical nurse shall be subject to a stayed suspension under the probationary terms and restrictions set forth below for a minimum period of one (1) year including the **Temporary Practice Restrictions, unless otherwise approved in advance**, set forth below.

SUSPENSION OF LICENSE

MS. TOWNSEND's license is suspended for an indefinite period of time.

The Board may reinstate **MS. TOWNSEND's** license if **MS. TOWNSEND** submits a written request for reinstatement and is determined by the Board or its designee to have complied with the Conditions for Reinstatement.

CONDITIONS FOR REINSTATEMENT

MS. TOWNSEND shall:

1. Be determined, by the Board or its designee, to be able to practice nursing according to acceptable and prevailing standards of safe nursing care based upon an interview and review of the documentation specified in this Order.
2. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
3. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
4. **Within ninety (90) days immediately prior to requesting reinstatement**, submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MS. TOWNSEND**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MS. TOWNSEND's** criminal records check to the Board. The Board will not consider a request for reinstatement until **MS. TOWNSEND's** completed criminal records check, including the FBI check, is received by the Board.
5. Pay a fine of five hundred dollars (\$500.00), payable: online by credit or debit card; or payable to the "Treasurer, State of Ohio," by certified check, cashier check, or money order mailed to the attention of the Compliance Unit, Ohio Board of Nursing, 17 South High Street, Suite 660, Columbus, OH 43215-3466.

Educational Requirements

6. Successfully complete and submit satisfactory documentation of successful completion of the following continuing education, or other comparable course(s) approved in advance by the Board or its designee: five (5) hours Substance Use Disorder, and two (2) hours Ohio Nursing Laws and Rules. Continuing education required by this Order **does not meet the continuing education requirements for license renewal.**

Evaluations

7. **Upon the request of the Board or its designee and within sixty (60) days of that request, at MS. TOWNSEND's expense, obtain a chemical dependency evaluation by a chemical dependency professional approved by the Board or its designee and, prior to the evaluation, provide the chemical dependency professional with a copy of this Order and the Notice. MS. TOWNSEND shall execute releases to permit the chemical dependency professional to obtain any information deemed appropriate and necessary for the evaluation. The chemical dependency professional shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on MS. TOWNSEND's license, and a statement as to whether MS. TOWNSEND is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.**
8. **If a chemical dependency evaluation is requested, provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the chemical dependency professional described above until released. Further, the Board may utilize the professional's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on MS. TOWNSEND's license.**

Monitoring

9. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. TOWNSEND's** history. **MS. TOWNSEND** shall self-administer the prescribed drugs only in the manner prescribed.
10. **Within ninety (90) days of requesting reinstatement, begin submitting, at MS. TOWNSEND's expense and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Upon and after MS. TOWNSEND's initiation of drug screening, refusal to submit such specimen, or failure to submit such specimen on the day she is selected, or in such a manner as the Board may request, shall constitute a violation of**

a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MS. TOWNSEND** shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who has received a complete copy of this Order prior to prescribing for **MS. TOWNSEND**.

a. **Prior** to initiating drug screening:

- i. Provide a copy of this Order to all treating practitioners;
- ii. Provide to the Board a list of all treating practitioners, including addresses and telephone numbers; and
- iii. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. TOWNSEND**, **and** submit the report directly to the Board.

b. **After** initiating drug screening, be under a **continuing duty** to:

- i. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
- ii. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;
- iii. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and
- iv. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. TOWNSEND** **and** submit the report directly to the Board.

Reporting Requirements for Suspension Period

11. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
12. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
13. Submit any and all information that the Board may request regarding **MS. TOWNSEND's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.

14. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board.
15. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: monitoring@nursing.ohio.gov or by mail to:

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Ohio Board of Nursing
17 South High Street, Suite 660
Columbus, OH 43215-3466**

16. Verify that the reports and documentation required by this Order are received in the Board office.
17. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.
18. Submit to the Board a completed application for reinstatement on the form provided by the Board.

PROBATIONARY PERIOD

Following reinstatement, the suspension shall be stayed and **MS. TOWNSEND's** license shall be subject to Probationary Terms and Restrictions for a minimum period of one (1) year.

PROBATIONARY TERMS AND RESTRICTIONS

MS. TOWNSEND shall:

1. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
2. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.

Monitoring

3. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. TOWNSEND's** history. **MS. TOWNSEND** shall self-administer prescribed drugs only in the manner prescribed.
4. Submit, at her expense, and on the day selected, blood, breath, hair or urine

specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Refusal to submit such specimen, or failure to submit such specimen on the day she is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MS. TOWNSEND** shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who has received a complete copy of this Order prior to prescribing for **MS. TOWNSEND**.

MS. TOWNSEND shall:

- a. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
- b. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;
- c. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and
- d. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. TOWNSEND** and submit the report directly to the Board.

Employment Conditions

5. **Upon the request of the Board or its designee, prior to working in a position where a license to practice nursing is required**, complete and submit satisfactory documentation of completion of a nurse refresher course or an extensive orientation approved in advance by the Board or its designee.
6. **Prior to accepting employment as a nurse**, each time with every employer, notify the Board, in writing. Any period during which **MS. TOWNSEND** does not work in a position within the State of Ohio for which a license to practice nursing is required **shall not count** toward fulfilling the probationary period imposed by this Order.
7. Be under a continuing duty to provide a copy of this Order to any new employer **prior to accepting employment as a nurse**.
8. Have current employer(s), if working in a position where a license to practice nursing is required, submit written reports regarding job performance **on a**

quarterly basis beginning within thirty (30) days of the effective date of this Order or beginning within thirty (30) days of working in a position as a nurse, whichever is later.

9. Have current employer(s) send documentation to the Board, along with the first employer report, of receipt of a copy of this Order, including the date this Order was received.

Reporting Requirements for Probationary Period

10. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
11. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
12. Submit any and all information that the Board may request regarding **MS. TOWNSEND's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
13. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.
14. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: monitoring@nursing.ohio.gov or by mail to:

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Ohio Board of Nursing
17 South High Street, Suite 660
Columbus, OH 43215-3466**

15. Verify that the reports and documentation required by this Order are received in the Board office.
16. Inform the Board **within five (5) business days**, in writing, of any change in employment status or of any change in residential or home address or telephone number.

LICENSE RESTRICTIONS

In addition to Probationary Terms and Restrictions, MS. TOWNSEND's license is subject to the following License Restrictions:

Temporary Practice Restrictions

Unless otherwise approved in advance, in writing, by the Board or its designee, MS. TOWNSEND shall not practice nursing as a licensed practical nurse (1) in a patient's residence; (2) for staffing agencies or pools; (3) for an individual or group of individuals who directly engage **MS. TOWNSEND** to provide nursing services for fees, compensation, or other consideration or who engage **MS. TOWNSEND** as a volunteer; or (4) as an independent contractor or for *locum tenens* assignments.

Unless otherwise approved in advance, in writing, by the Board or its designee, MS. TOWNSEND shall not function in a position or employment where the job duties or requirements involve management of nursing and nursing responsibilities. Such positions include, but are not limited to, the following: Director of Nursing, Assistant Director of Nursing, Nurse Manager, Vice President of Nursing.

FAILURE TO COMPLY

The stay of **MS. TOWNSEND's** suspension shall be lifted and **MS. TOWNSEND's** license to practice nursing as a licensed practical nurse will be automatically suspended if it appears to the Board that **MS. TOWNSEND** has violated or breached any terms or conditions of this Order. Following the automatic suspension, the Board shall notify **MS. TOWNSEND** via certified mail of the specific nature of the charges and automatic suspension of **MS. TOWNSEND's** license. **MS. TOWNSEND** may request a hearing regarding the charges.

DURATION

The Board may only alter the probationary period imposed by this Order if: (1) the Board determines that **MS. TOWNSEND** has complied with all aspects of this Order; and (2) the Board determines that **MS. TOWNSEND** is able to practice nursing according to acceptable and prevailing standards of safe nursing care without Board monitoring, based upon an interview with **MS. TOWNSEND** and review of the reports as required herein.

As indicated above under Employment Conditions, any period during which **MS. TOWNSEND** does not work in a position within the State of Ohio for which a license to practice nursing is required shall not count toward fulfilling the probationary period imposed by this Order.

Motion adopted by a majority vote of the Board members present with Matthew Carle, Daniel Lehmann, Sandra Ranck and Patricia Sharpnack abstaining.

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September 2018.

Balog, Maegan, R.N. 391457 (CASE #17-3721, #16-4575)

Action: It was moved by Deborah Knueve, seconded by Barbara Douglas, that upon consideration of the charges stated against **MAEGAN BALOG** in the Notice of Opportunity for Hearing (Notice) and evidence supporting the charges, the Board find that **MS. BALOG** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice, and that **MS. BALOG's** license to practice nursing as a registered nurse be suspended and that the suspension is stayed subject to the probationary terms and restrictions set forth below for a minimum period of three (3) years including the **Temporary Narcotic and Temporary Practice Restrictions**, set forth below.

PROBATIONARY PERIOD

MS. BALOG's license shall be subject to Probationary Terms and Restrictions for a minimum period of three (3) years.

PROBATIONARY TERMS AND RESTRICTIONS

MS. BALOG shall:

1. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
2. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
3. Submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MS. BALOG**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MS. BALOG's** criminal records check to the Board. **MS. BALOG's** completed criminal records check, including the FBI check, must be received by the Board **within ninety (90) days of the effective date of this Order**.

Educational Requirements

4. Establish contact with a nursing educator, approved in advance by the Board or its designee, who has no less than a master's degree and who is affiliated with a nursing educational program.
 - a. Have the educator provide the Board with a written report of an assessment of **MS. BALOG**, which identifies **MS. BALOG's** knowledge/practice deficiencies and remedial educational needs.
 - b. Prior to the assessment, provide the nursing educator with a copy of this Order and the Notice and submit to any nursing skills or

knowledge assessments required by the educator. **MS. BALOG** shall also execute releases prior to the assessment to permit the educator to obtain any information deemed appropriate and necessary for the assessment including information from **MS. BALOG's** employer(s), former employers, and Board staff.

- c. Following the assessment, have the educator provide the Board with a copy of a learning plan developed by the educator for **MS. BALOG** and obtain approval of the learning plan by the Board or its designee. The learning plan shall identify specific remediation that **MS. BALOG** shall complete to address any knowledge/practice deficiencies and remedial educational needs identified by the educator and shall identify the time frame during which **MS. BALOG** shall complete such learning plan.
- d. Successfully complete and submit satisfactory documentation of successful completion of the learning plan within the time frame specified in the learning plan.
- e. Be responsible for all costs associated with meeting the requirements of the learning plan.
- f. **After MS. BALOG has successfully completed the learning plan,** have the educator provide the Board with:
 - i. An assessment and any recommendations for additional remedial education and/or restrictions that should be placed on **MS. BALOG's** license; and
 - ii. A written opinion stating whether **MS. BALOG** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
- g. The Board may utilize the educator's recommendations and conclusions from the assessment as a basis for additional terms and restrictions on **MS. BALOG's** license.

Evaluations

5. **Within ninety (90) days of the execution of the probationary period,** at **MS. BALOG's** expense, obtain a chemical dependency evaluation by a chemical dependency professional approved by the Board or its designee and, prior to the evaluation, provide the chemical dependency professional with a copy of this Order and the Notice. **MS. BALOG** shall execute releases to permit the chemical dependency professional to obtain any information deemed appropriate and necessary for the evaluation. The chemical dependency professional shall submit a written opinion to the

- Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on **MS. BALOG's** license, and a statement as to whether **MS. BALOG** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
6. Provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the chemical dependency professional described above until released. Further, the Board may utilize the professional's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on **MS. BALOG's** license.

Monitoring

7. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. BALOG's** history. **MS. BALOG** shall self-administer prescribed drugs only in the manner prescribed.
8. **If recommended by the chemical dependency evaluation**, abstain completely from the use of alcohol or any products containing alcohol.
9. **Within ninety (90) days of the effective date of this Order**, begin submitting, at **MS. BALOG's** expense and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Upon and after **MS. BALOG's** initiation of drug screening, refusal to submit such specimen, or failure to submit such specimen on the day she is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MS. BALOG** shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who has received a complete copy of this Order prior to prescribing for **MS. BALOG**.
 - a. **Prior** to initiating drug screening:
 - i. Provide a copy of this Order to all treating practitioners;
 - ii. Provide to the Board a list of all treating practitioners, including addresses and telephone numbers; and
 - iii. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. BALOG**, **and** submit the report directly to the Board.

- b. **After** initiating drug screening, be under a **continuing duty** to:
- i. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
 - ii. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;
 - iii. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and
 - iv. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. BALOG** and submit the report directly to the Board.

10. **If recommended by the chemical dependency evaluation**, attend a minimum of one (1) meeting per week of a support or peer group meeting approved in advance by the Board, or a Twelve Step program, and provide satisfactory documentation of such attendance to the Board every six (6) months.

Employment Conditions

11. **Upon the request of the Board or its designee**, complete and submit satisfactory documentation of completion of a nurse refresher course or an extensive orientation approved in advance by the Board or its designee.
12. Notify the Board, in writing, of the name and address of any current employer **within thirty (30) days following the effective date of this Order**, or any new employer **prior to accepting nursing employment**. Any period during which **MS. BALOG** does not work in a position within the State of Ohio for which a license to practice nursing is required **shall not count** toward fulfilling the probationary period imposed by this Order.
13. **Within fifteen (15) days of the effective date of this Order**, provide her current employer(s) with a copy of this Order, if working in a position in which a nursing license is required. **MS. BALOG** is under a continuing duty to provide a copy of this Order to any new employer(s) **prior to accepting employment as a nurse**.
14. Have current employer(s), if working in a position where a license to practice nursing is required, submit written reports regarding job performance **on a quarterly basis beginning within thirty (30) days of the effective date**

of this Order or beginning within thirty (30) days of working in a position as a nurse, whichever is later.

15. Have current employer(s) send documentation to the Board, along with the first employer report, of receipt of a copy of this Order, including the date this Order was received.

Reporting Requirements for Probationary Period

16. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
17. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
18. Submit any and all information that the Board may request regarding **MS. BALOG's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
19. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.
20. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: monitoring@nursing.ohio.gov or by mail to:

**Compliance Unit
Ohio Board of Nursing
17 South High Street, Suite 660
Columbus, OH 43215-3466**

21. Verify that the reports and documentation required by this Order are received in the Board office.
22. Inform the Board **within five (5) business days**, in writing, of any change in employment status or of any change in residential or home address or telephone number.

LICENSE RESTRICTIONS

In addition to Probationary Terms and Restrictions, MS. BALOG's license is subject to the following License Restrictions:

Temporary Narcotic Restriction

MS. BALOG shall not administer, have access to, or possess (except as

prescribed for **MS. BALOG's** use by another so authorized by law who has full knowledge of **MS. BALOG's** history) any narcotics, other controlled substances, or mood altering drugs. In addition, **MS. BALOG** shall not count narcotics or possess or carry any work keys for locked medication carts, cabinets, drawers, or containers. **MS. BALOG** shall not call in or order prescriptions or prescription refills.

Temporary Practice Restrictions

MS. BALOG shall not practice nursing as a registered nurse (1) in a patient's residence; (2) for staffing agencies or pools; (3) for an individual or group of individuals who directly engage **MS. BALOG** to provide nursing services for fees, compensation, or other consideration or who engage **MS. BALOG** as a volunteer; or (4) as an independent contractor or for *locum tenens* assignments.

MS. BALOG shall not function in a position or employment where the job duties or requirements involve management of nursing and nursing responsibilities, or supervising and evaluating nursing practice. Such positions include, but are not limited to, the following: Director of Nursing, Assistant Director of Nursing, Nurse Manager, Vice President of Nursing.

FAILURE TO COMPLY

The stay of **MS. BALOG's** suspension shall be lifted and **MS. BALOG's** license to practice nursing as a registered nurse will be automatically suspended if it appears to the Board that **MS. BALOG** has violated or breached any terms or conditions of this Order. Following the automatic suspension, the Board shall notify **MS. BALOG** via certified mail of the specific nature of the charges and automatic suspension of **MS. BALOG's** license. **MS. BALOG** may request a hearing regarding the charges.

DURATION

The Board may only alter the probationary period imposed by this Order if: (1) the Board determines that **MS. BALOG** has complied with all aspects of this Order; and (2) the Board determines that **MS. BALOG** is able to practice nursing according to acceptable and prevailing standards of safe nursing care without Board monitoring, based upon an interview with **MS. BALOG** and review of the reports as required herein.

As indicated above under Employment Conditions, any period during which **MS. BALOG** does not work in a position within the State of Ohio for which a license to practice nursing is required shall not count toward fulfilling the probationary period imposed by this Order.

Motion adopted by a majority vote of the Board members present with Matthew Carle, Daniel Lehmann and Sandra Ranck abstaining.

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September 2018.

Causey, Cynthia Annece, R.N. 400678 (CASE #17-3209)

Action: It was moved by Patricia Sharpnack, seconded by Brenda Boggs, that upon consideration of the charges stated against **CYNTHIA ANNECE CAUSEY** in the Notice of Automatic Suspension and Opportunity for Hearing (Notice) and evidence supporting the charges, the Board find that **MS. CAUSEY** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice, and that **MS. CAUSEY's** license to practice nursing as a registered nurse be suspended for an indefinite period of time with the conditions for reinstatement set forth below, and following reinstatement, **MS. CAUSEY's** license to practice nursing as a registered nurse shall be subject to a stayed suspension under the probationary terms and restrictions set forth below for a minimum period of one (1) year including the **Temporary Practice Restrictions**, set forth below.

SUSPENSION OF LICENSE

MS. CAUSEY's license is suspended for an indefinite period of time.

The Board may reinstate **MS. CAUSEY's** license if **MS. CAUSEY** submits a written request for reinstatement and is determined by the Board or its designee to have complied with the Conditions for Reinstatement.

CONDITIONS FOR REINSTATEMENT

MS. CAUSEY shall:

1. Be determined, by the Board or its designee, to be able to practice nursing according to acceptable and prevailing standards of safe nursing care based upon an interview and review of the documentation specified in this Order.
2. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
3. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
4. **Within ninety (90) days immediately prior to requesting reinstatement**, submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MS. CAUSEY**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MS. CAUSEY's** criminal records check to the Board. The Board will not consider a request for reinstatement until **MS. CAUSEY's**

completed criminal records check, including the FBI check, is received by the Board.

5. Pay a fine of one thousand dollars (\$1,000.00), payable: online by credit or debit card; or payable to the "Treasurer, State of Ohio," by certified check, cashier check, or money order mailed to the attention of the Compliance Unit, Ohio Board of Nursing, 17 South High Street, Suite 660, Columbus, OH 43215-3466.

Educational Requirements

6. Successfully complete and submit satisfactory documentation of successful completion of the following continuing education, or other comparable course(s) approved in advance by the Board or its designee: five (5) hours Veracity; five (5) hours Ethics; five (5) hours Professional Accountability and Legal Liability; and two (2) hours Ohio Nursing Law and Rules. Continuing education required by this Order **does not meet the continuing education requirements for license renewal.**

Reporting Requirements for Suspension Period

7. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
8. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
9. Submit any and all information that the Board may request regarding **MS. CAUSEY's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
10. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board.
11. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: monitoring@nursing.ohio.gov or by mail to:

**Compliance Unit
Ohio Board of Nursing
17 South High Street, Suite 660
Columbus, OH 43215-3466**

12. Verify that the reports and documentation required by this Order are received in the Board office.
13. Inform the Board **within five (5) business days**, in writing, of any change

in residential or home address or telephone number.

14. Submit to the Board a completed application for reinstatement on the form provided by the Board.

PROBATIONARY PERIOD

Following reinstatement, the suspension shall be stayed and **MS. CAUSEY's** license shall be subject to Probationary Terms and Restrictions for a minimum period of one (1) year.

PROBATIONARY TERMS AND RESTRICTIONS

MS. CAUSEY shall:

1. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
2. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.

Employment Conditions

3. **Upon the request of the Board or its designee, prior to working in a position where a license to practice nursing is required**, complete and submit satisfactory documentation of completion of a nurse refresher course or an extensive orientation approved in advance by the Board or its designee.
4. **Prior to accepting employment as a nurse**, each time with every employer, notify the Board, in writing. Any period during which **MS. CAUSEY** does not work in a position within the State of Ohio for which a license to practice nursing is required **shall not count** toward fulfilling the probationary period imposed by this Order.
5. Be under a continuing duty to provide a copy of this Order to any new employer **prior to accepting employment as a nurse**.
6. Have current employer(s), if working in a position where a license to practice nursing is required, submit written reports regarding job performance **on a quarterly basis beginning within thirty (30) days of the effective date of this Order or beginning within thirty (30) days of working in a position as a nurse, whichever is later**.
7. Have current employer(s) send documentation to the Board, along with the first employer report, of receipt of a copy of this Order, including the date this Order was received.

Reporting Requirements for Probationary Period

8. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
9. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
10. Submit any and all information that the Board may request regarding **MS. CAUSEY's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
11. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.
12. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: monitoring@nursing.ohio.gov or by mail to:

**Compliance Unit
Ohio Board of Nursing
17 South High Street, Suite 660
Columbus, OH 43215-3466**

13. Verify that the reports and documentation required by this Order are received in the Board office.
14. Inform the Board **within five (5) business days**, in writing, of any change in employment status or of any change in residential or home address or telephone number.

LICENSE RESTRICTIONS

In addition to Probationary Terms and Restrictions, MS. CAUSEY's license is subject to the following License Restrictions:

Temporary Practice Restrictions

MS. CAUSEY shall not practice nursing as a registered nurse (1) in a patient's residence; (2) for staffing agencies or pools; (3) for an individual or group of individuals who directly engage **MS. CAUSEY** to provide nursing services for fees, compensation, or other consideration or who engage **MS. CAUSEY** as a volunteer; or (4) as an independent contractor or for *locum tenens* assignments.

MS. CAUSEY shall not function in a position or employment where the job duties

or requirements involve management of nursing and nursing responsibilities, or supervising and evaluating nursing practice. Such positions include, but are not limited to, the following: Director of Nursing, Assistant Director of Nursing, Nurse Manager, Vice President of Nursing.

FAILURE TO COMPLY

The stay of **MS. CAUSEY's** suspension shall be lifted and **MS. CAUSEY's** license to practice nursing as a registered nurse will be automatically suspended if it appears to the Board that **MS. CAUSEY** has violated or breached any terms or conditions of this Order. Following the automatic suspension, the Board shall notify **MS. CAUSEY** via certified mail of the specific nature of the charges and automatic suspension of **MS. CAUSEY's** license. **MS. CAUSEY** may request a hearing regarding the charges.

DURATION

The Board may only alter the probationary period imposed by this Order if: (1) the Board determines that **MS. CAUSEY** has complied with all aspects of this Order; and (2) the Board determines that **MS. CAUSEY** is able to practice nursing according to acceptable and prevailing standards of safe nursing care without Board monitoring, based upon an interview with **MS. CAUSEY** and review of the reports as required herein.

As indicated above under Employment Conditions, any period during which **MS. CAUSEY** does not work in a position within the State of Ohio for which a license to practice nursing is required shall not count toward fulfilling the probationary period imposed by this Order.

Motion adopted by a majority vote of the Board members present with Matthew Carle, Daniel Lehmann and Sandra Ranck abstaining.

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September 2018.

Frazier, Crystal Yvette (aka "Crystal Yvette Cavanaugh"), P.N. 097744 (CASE #17-6966)

Action: It was moved by Brenda Boggs, seconded by Patricia Sharpnack, that upon consideration of the charges stated against **CRYSTAL YVETTE FRAZIER** in the Notice of Automatic Suspension and Opportunity for Hearing (Notice) and evidence supporting the charges, the Board find that **MS. FRAZIER** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice, and that **MS. FRAZIER's** license to practice nursing as a licensed practical nurse be suspended for an indefinite period of time with the conditions for reinstatement set forth below, and following reinstatement, **MS. FRAZIER's** license to practice nursing as a licensed practical nurse shall be subject to a stayed suspension under the probationary terms and restrictions set

forth below for a minimum period of three (3) years including the **Temporary Narcotic and Temporary Practice Restrictions, unless otherwise approved in advance**, set forth below.

SUSPENSION OF LICENSE

MS. FRAZIER's license is suspended for an indefinite period of time.

The Board may reinstate **MS. FRAZIER's** license if **MS. FRAZIER** submits a written request for reinstatement and is determined by the Board or its designee to have complied with the Conditions for Reinstatement.

CONDITIONS FOR REINSTATEMENT

MS. FRAZIER shall:

1. Be determined, by the Board or its designee, to be able to practice nursing according to acceptable and prevailing standards of safe nursing care based upon an interview and review of the documentation specified in this Order.
2. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
3. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
4. **Within ninety (90) days immediately prior to requesting reinstatement**, submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MS. FRAZIER**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MS. FRAZIER's** criminal records check to the Board. The Board will not consider a request for reinstatement until **MS. FRAZIER's** completed criminal records check, including the FBI check, is received by the Board.
5. Pay a fine of five hundred dollars (\$500.00), payable: online by credit or debit card; or payable to the "Treasurer, State of Ohio," by certified check, cashier check, or money order mailed to the attention of the Compliance Unit, Ohio Board of Nursing, 17 South High Street, Suite 660, Columbus, OH 43215-3466.

Educational Requirements

6. Successfully complete and submit satisfactory documentation of successful completion of the following continuing education, or other comparable course(s) approved in advance by the Board or its designee: four (4) hours

Medication Administration, four (4) hours Documentation, five (5) hours Substance Use Disorder, and two (2) hours Ohio Nursing Laws and Rules. Continuing education required by this Order **does not meet the continuing education requirements for license renewal.**

Evaluations

7. **Within ninety (90) days immediately prior to requesting reinstatement, at MS. FRAZIER's expense, obtain a mental health evaluation from a Board approved evaluator and provide the Board with complete documentation of such evaluation. Prior to the evaluation, MS. FRAZIER shall provide the mental health evaluator with a copy of this Order and the Notice. MS. FRAZIER shall execute releases to permit the mental health evaluator to obtain any information deemed appropriate and necessary for the evaluation. The mental health evaluator shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on MS. FRAZIER's license, and a statement as to whether MS. FRAZIER is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.**
8. Provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the mental health evaluator described above until released. Further, the Board may utilize the mental health evaluator's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on **MS. FRAZIER's** license.
9. **Upon the request of the Board or its designee and within sixty (60) days of that request, at MS. FRAZIER's expense, obtain a comprehensive physical examination by a Board approved physician for the purposes of evaluating MS. FRAZIER's fitness for duty and safety to practice nursing as a licensed practical nurse. This Board approved physician shall provide the Board with complete documentation of MS. FRAZIER's comprehensive physical examination and with a comprehensive assessment regarding MS. FRAZIER's fitness for duty and safety to practice nursing as a licensed practical nurse. Prior to the examination, MS. FRAZIER shall provide the Board approved physician with a copy of this Order and the Notice. MS. FRAZIER shall execute releases to permit the Board approved physician performing the comprehensive physical examination, and assessment to obtain any information deemed appropriate and necessary for the assessment. The evaluating physician shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on MS. FRAZIER's license, and stating whether MS. FRAZIER is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.**

10. The Board may utilize the Board approved physician's recommendations and conclusions from the comprehensive physical examination and assessment as a basis for additional terms and restrictions on **MS. FRAZIER's** license.
11. **Within ninety (90) days immediately prior to requesting reinstatement,** at **MS. FRAZIER's** expense, obtain a chemical dependency evaluation by a chemical dependency professional approved by the Board or its designee and, prior to the evaluation, provide the chemical dependency professional with a copy of this Order and the Notice. **MS. FRAZIER** shall execute releases to permit the chemical dependency professional to obtain any information deemed appropriate and necessary for the evaluation. The chemical dependency professional shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on **MS. FRAZIER's** license, and a statement as to whether **MS. FRAZIER** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
12. Provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the chemical dependency professional described above until released. Further, the Board may utilize the professional's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on **MS. FRAZIER's** license.

Monitoring

13. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. FRAZIER's** history. **MS. FRAZIER** shall self-administer the prescribed drugs only in the manner prescribed.
14. Abstain completely from the use of alcohol or any products containing alcohol.
15. **Within ninety (90) days of requesting reinstatement,** begin submitting, at **MS. FRAZIER's** expense and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Upon and after **MS. FRAZIER's** initiation of drug screening, refusal to submit such specimen, or failure to submit such specimen on the day she is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MS. FRAZIER** shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who has received a complete copy of this Order prior to prescribing for

MS. FRAZIER.

- a. **Prior** to initiating drug screening:
 - i. Provide a copy of this Order to all treating practitioners;
 - ii. Provide to the Board a list of all treating practitioners, including addresses and telephone numbers; and
 - iii. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. FRAZIER**, **and** submit the report directly to the Board.

- b. **After** initiating drug screening, be under a **continuing duty** to:
 - i. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
 - ii. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;
 - iii. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and
 - iv. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. FRAZIER** **and** submit the report directly to the Board.

Reporting Requirements for Suspension Period

16. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
17. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
18. Submit any and all information that the Board may request regarding **MS. FRAZIER's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
19. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board.
20. Submit the reports and documentation required by this Order on forms

specified by the Board. All reporting and communications required by this Order shall be sent by email to: monitoring@nursing.ohio.gov or by mail to:

**Compliance Unit
Ohio Board of Nursing
17 South High Street, Suite 660
Columbus, OH 43215-3466**

21. Verify that the reports and documentation required by this Order are received in the Board office.
22. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.
23. Submit to the Board a completed application for reinstatement on the form provided by the Board.

PROBATIONARY PERIOD

Following reinstatement, the suspension shall be stayed and **MS. FRAZIER's** license shall be subject to Probationary Terms and Restrictions for a minimum period of three (3) years.

PROBATIONARY TERMS AND RESTRICTIONS

MS. FRAZIER shall:

1. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
2. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.

Evaluations

3. **Upon the request of the Board or its designee and within sixty (60) days of that request, MS. FRAZIER** shall, at her expense, obtain a comprehensive physical examination by a Board approved physician for the purposes of evaluating **MS. FRAZIER's** fitness for duty and safety to practice nursing as a licensed practical nurse. This Board approved physician shall provide the Board with complete documentation of **MS. FRAZIER's** comprehensive physical examination, and with a comprehensive assessment regarding **MS. FRAZIER's** fitness for duty and safety to practice nursing as a licensed practical nurse. Prior to the examination, **MS. FRAZIER** shall provide the Board approved physician with a copy of this Order and the Notice. Further, **MS. FRAZIER** shall

- execute releases to permit the Board approved physician performing the comprehensive physical examination and assessment to obtain any information deemed appropriate and necessary for the assessment. The evaluating physician shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on **MS. FRAZIER's** license, and stating whether **MS. FRAZIER** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
4. The Board may utilize the Board approved physician's recommendations and conclusions from the comprehensive physical examination and assessment as a basis for additional terms and restrictions on **MS. FRAZIER's** license.
 5. **Upon the request of the Board or its designee and within sixty (60) days of that request,** at **MS. FRAZIER's** expense, obtain a chemical dependency evaluation by a chemical dependency professional approved by the Board or its designee and, prior to the evaluation, provide the chemical dependency professional with a copy of this Order and the Notice. **MS. FRAZIER** shall execute releases to permit the chemical dependency professional to obtain any information deemed appropriate and necessary for the evaluation. The chemical dependency professional shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on **MS. FRAZIER's** license, and a statement as to whether **MS. FRAZIER** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
 6. **If a chemical dependency evaluation is requested,** provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the chemical dependency professional described above until released. Further, the Board may utilize the professional's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on **MS. FRAZIER's** license.

Monitoring

7. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. FRAZIER's** history. **MS. FRAZIER** shall self-administer prescribed drugs only in the manner prescribed.
8. Abstain completely from the use of alcohol or any products containing alcohol.
9. Submit, at her expense, and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by

the Board at such times as the Board may request. Refusal to submit such specimen, or failure to submit such specimen on the day she is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MS. FRAZIER** shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who has received a complete copy of this Order prior to prescribing for **MS. FRAZIER**.

MS. FRAZIER shall:

- a. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
- b. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;
- c. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and
- d. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. FRAZIER** *and* submit the report directly to the Board.

Employment Conditions

10. **Upon the request of the Board or its designee, prior to working in a position where a license to practice nursing is required**, complete and submit satisfactory documentation of completion of a nurse refresher course or an extensive orientation approved in advance by the Board or its designee.
11. **Prior to accepting employment as a nurse**, each time with every employer, notify the Board, in writing. Any period during which **MS. FRAZIER** does not work in a position within the State of Ohio for which a license to practice nursing is required **shall not count** toward fulfilling the probationary period imposed by this Order.
12. Be under a continuing duty to provide a copy of this Order to any new employer **prior to accepting employment as a nurse**.
13. Have current employer(s), if working in a position where a license to practice nursing is required, submit written reports regarding job performance **on a quarterly basis beginning within thirty (30) days of the effective date**

of this Order or beginning within thirty (30) days of working in a position as a nurse, whichever is later.

14. Have current employer(s) send documentation to the Board, along with the first employer report, of receipt of a copy of this Order, including the date this Order was received.

Reporting Requirements for Probationary Period

15. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
16. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
17. Submit any and all information that the Board may request regarding **MS. FRAZIER's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
18. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.
19. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: monitoring@nursing.ohio.gov or by mail to:

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Ohio Board of Nursing
17 South High Street, Suite 660
Columbus, OH 43215-3466**

20. Verify that the reports and documentation required by this Order are received in the Board office.
21. Inform the Board **within five (5) business days**, in writing, of any change in employment status or of any change in residential or home address or telephone number.

LICENSE RESTRICTIONS

In addition to Probationary Terms and Restrictions, MS. FRAZIER's license is subject to the following License Restrictions:

Temporary Narcotic Restriction

Unless otherwise approved in advance, in writing, by the Board or its designee, MS. FRAZIER shall not administer, have access to, or possess (except as prescribed for **MS. FRAZIER's** use by another so authorized by law who has full knowledge of **MS. FRAZIER's** history) any narcotics, other controlled substances, or mood altering drugs. In addition, **MS. FRAZIER** shall not count narcotics or possess or carry any work keys for locked medication carts, cabinets, drawers, or containers. **MS. FRAZIER** shall not call in or order prescriptions or prescription refills.

Temporary Practice Restrictions

Unless otherwise approved in advance, in writing, by the Board or its designee, MS. FRAZIER shall not practice nursing as a licensed practical nurse (1) in a patient's residence; (2) for staffing agencies or pools; (3) for an individual or group of individuals who directly engage **MS. FRAZIER** to provide nursing services for fees, compensation, or other consideration or who engage **MS. FRAZIER** as a volunteer; or (4) as an independent contractor or for *locum tenens* assignments.

Unless otherwise approved in advance, in writing, by the Board or its designee, MS. FRAZIER shall not function in a position or employment where the job duties or requirements involve management of nursing and nursing responsibilities. Such positions include, but are not limited to, the following: Director of Nursing, Assistant Director of Nursing, Nurse Manager, Vice President of Nursing.

FAILURE TO COMPLY

The stay of **MS. FRAZIER's** suspension shall be lifted and **MS. FRAZIER's** license to practice nursing as a licensed practical nurse will be automatically suspended if it appears to the Board that **MS. FRAZIER** has violated or breached any terms or conditions of this Order. Following the automatic suspension, the Board shall notify **MS. FRAZIER** via certified mail of the specific nature of the charges and automatic suspension of **MS. FRAZIER's** license. **MS. FRAZIER** may request a hearing regarding the charges.

DURATION

The Board may only alter the probationary period imposed by this Order if: (1) the Board determines that **MS. FRAZIER** has complied with all aspects of this Order; and (2) the Board determines that **MS. FRAZIER** is able to practice nursing according to acceptable and prevailing standards of safe nursing care without Board monitoring, based upon an interview with **MS. FRAZIER** and review of the reports as required herein.

As indicated above under Employment Conditions, any period during which **MS. FRAZIER** does not work in a position within the State of Ohio for which a license to practice nursing is required shall not count toward fulfilling the probationary period imposed by this Order.

Motion adopted by a majority vote of the Board members present with Matthew Carle, Daniel Lehmann and Sandra Ranck abstaining.

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September 2018.

Manz, Catherine Marie, P.N. 123734 (CASE #16-5629)

Action: It was moved by Sandra Beidelschies, seconded by Brenda Boggs, that upon consideration of the charges stated against **CATHERINE MARIE MANZ** in the Notice of Opportunity for Hearing (Notice) and evidence supporting the charges, the Board find that **MS. MANZ** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice, and that **MS. MANZ's** license to practice nursing as a licensed practical nurse be suspended and that the suspension is stayed subject to the probationary terms and restrictions set forth below for a minimum period of one (1) year.

PROBATIONARY PERIOD

MS. MANZ's license shall be subject to Probationary Terms and Restrictions for a minimum period of one (1) year.

PROBATIONARY TERMS AND RESTRICTIONS

MS. MANZ shall:

1. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
2. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
3. Submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MS. MANZ**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MS. MANZ's** criminal records check to the Board. **MS. MANZ's** completed criminal records check, including the FBI check, must be received by the Board **within ninety (90) days of the effective date of this Order.**

Educational Requirements

4. **Within six (6) months of the effective date of this Order**, successfully complete and submit satisfactory documentation of successful completion of the following continuing education, or other comparable course(s) approved in advance by the Board or its designee: four (4) hours Professional Accountability & Legal Liability, and two (2) hours Ohio Nursing Law and Rules. Continuing education required by this Order **does not meet the continuing education requirements for license renewal.**

Evaluations

5. **Within ninety (90) days of the execution of the probationary period**, at **MS. MANZ's** expense, obtain a mental health evaluation from a Board approved evaluator and provide the Board with complete documentation of such evaluation. Prior to the evaluation, **MS. MANZ** shall provide the mental health evaluator with a copy of this Order and the Notice. **MS. MANZ** shall execute releases to permit the mental health evaluator to obtain any information deemed appropriate and necessary for the evaluation. The mental health evaluator shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on **MS. MANZ's** license, and a statement as to whether **MS. MANZ** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
6. Provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the mental health evaluator described above until released. Further, the Board may utilize the mental health evaluator's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on **MS. MANZ's** license.

Employment Conditions

7. **Upon the request of the Board or its designee**, complete and submit satisfactory documentation of completion of a nurse refresher course or an extensive orientation approved in advance by the Board or its designee.
8. Notify the Board, in writing, of the name and address of any current employer **within thirty (30) days following the effective date of this Order**, or any new employer **prior to accepting nursing employment**. Any period during which **MS. MANZ** does not work in a position within the State of Ohio for which a license to practice nursing is required **shall not count** toward fulfilling the probationary period imposed by this Order.
9. **Within fifteen (15) days of the effective date of this Order**, provide her current employer(s) with a copy of this Order, if working in a position in which a nursing license is required. **MS. MANZ** is under a continuing duty

- to provide a copy of this Order to any new employer(s) **prior to accepting employment as a nurse.**
10. Have current employer(s), if working in a position where a license to practice nursing is required, submit written reports regarding job performance **on a quarterly basis beginning within thirty (30) days of the effective date of this Order or beginning within thirty (30) days of working in a position as a nurse, whichever is later.**
 11. Have current employer(s) send documentation to the Board, along with the first employer report, of receipt of a copy of this Order, including the date this Order was received.

Reporting Requirements for Probationary Period

12. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
13. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
14. Submit any and all information that the Board may request regarding **MS. MANZ's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
15. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.
16. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: monitoring@nursing.ohio.gov or by mail to:

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17 South High Street, Suite 660
Columbus, OH 43215-3466**

17. Verify that the reports and documentation required by this Order are received in the Board office.
18. Inform the Board **within five (5) business days**, in writing, of any change in employment status or of any change in residential or home address or telephone number.

FAILURE TO COMPLY

The stay of **MS. MANZ's** suspension shall be lifted and **MS. MANZ's** license to practice nursing as a licensed practical nurse will be automatically suspended if it appears to the Board that **MS. MANZ** has violated or breached any terms or conditions of this Order. Following the automatic suspension, the Board shall notify **MS. MANZ** via certified mail of the specific nature of the charges and automatic suspension of **MS. MANZ's** license. **MS. MANZ** may request a hearing regarding the charges.

DURATION

The Board may only alter the probationary period imposed by this Order if: (1) the Board determines that **MS. MANZ** has complied with all aspects of this Order; and (2) the Board determines that **MS. MANZ** is able to practice nursing according to acceptable and prevailing standards of safe nursing care without Board monitoring, based upon an interview with **MS. MANZ** and review of the reports as required herein.

As indicated above under Employment Conditions, any period during which **MS. MANZ** does not work in a position within the State of Ohio for which a license to practice nursing is required shall not count toward fulfilling the probationary period imposed by this Order.

Motion adopted by a majority vote of the Board members present with Matthew Carle, Daniel Lehmann and Sandra Ranck abstaining.

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September 2018.

Stover, Pamela C. (fka "Pamela Terry"), P.N. 144299 (CASE #17-5004, #17-4555)

Action: It was moved by Erin Keels, seconded by Sandra Beidelschies, that upon consideration of the charges stated against **PAMELA C. STOVER** in the Notice of Immediate Suspension and Opportunity for Hearing (Notice) and evidence supporting the charges, the Board find that **MS. STOVER** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice, and that **MS. STOVER's** license to practice nursing as a licensed practical nurse be suspended for an indefinite period of time but not less than two (2) years with the conditions for reinstatement set forth below, and following reinstatement, **MS. STOVER's** license to practice nursing as a licensed practical nurse shall be subject to a stayed suspension under the probationary terms and restrictions set forth below for a minimum period of three (3) years including the **Temporary Narcotic and Temporary Practice Restrictions**, set forth below.

SUSPENSION OF LICENSE

MS. STOVER's license is suspended for an indefinite period of time but not less than two (2) years.

The Board may reinstate **MS. STOVER's** license if **MS. STOVER** submits a written request for reinstatement and is determined by the Board or its designee to have complied with the Conditions for Reinstatement.

CONDITIONS FOR REINSTATEMENT

MS. STOVER shall:

1. Be determined, by the Board or its designee, to be able to practice nursing according to acceptable and prevailing standards of safe nursing care based upon an interview and review of the documentation specified in this Order.
2. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
3. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
4. **Within ninety (90) days immediately prior to requesting reinstatement,** submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MS. STOVER**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MS. STOVER's** criminal records check to the Board. The Board will not consider a request for reinstatement until **MS. STOVER's** completed criminal records check, including the FBI check, is received by the Board.
5. Submit documentation of her full compliance with the requirements imposed by the Cuyahoga County Court of Common Pleas in Case Number CR-17-620569-A.

Educational Requirements

6. Successfully complete and submit satisfactory documentation of successful completion of the following continuing education, or other comparable course(s) approved in advance by the Board or its designee: five (5) hours Substance Use Disorder, and two (2) hours Ohio Nursing Law and Rules. Continuing education required by this Order **does not meet the continuing education requirements for license renewal.**

Evaluations

7. **Within ninety (90) days immediately prior to requesting reinstatement, at MS. STOVER's expense, obtain a chemical dependency evaluation by a chemical dependency professional approved by the Board or its designee and, prior to the evaluation, provide the chemical dependency professional with a copy of this Order and the Notice. MS. STOVER shall execute releases to permit the chemical dependency professional to obtain any information deemed appropriate and necessary for the evaluation. The chemical dependency professional shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on MS. STOVER's license, and a statement as to whether MS. STOVER is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.**
8. Provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the chemical dependency professional described above until released. Further, the Board may utilize the professional's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on **MS. STOVER's** license.

Monitoring

9. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. STOVER's** history. **MS. STOVER** shall self-administer the prescribed drugs only in the manner prescribed.
10. Abstain completely from the use of alcohol or any products containing alcohol.
11. **For a minimum, continuous period of one (1) year immediately prior to requesting reinstatement, submit, at MS. STOVER's expense and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Upon and after MS. STOVER's initiation of drug screening, refusal to submit such specimen, or failure to submit such specimen on the day she is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by MS. STOVER shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who has received a complete copy of this Order prior to prescribing for MS. STOVER.**
 - a. **Prior** to initiating drug screening:

- i. Provide a copy of this Order to all treating practitioners;
 - ii. Provide to the Board a list of all treating practitioners, including addresses and telephone numbers; and
 - iii. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. STOVER**, *and* submit the report directly to the Board.
- b. **After** initiating drug screening, be under a **continuing duty** to:
- i. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
 - ii. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;
 - iii. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and
 - iv. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. STOVER** *and* submit the report directly to the Board.

12. **Upon the request of the Board or its designee, for a minimum, continuous period of one (1) year immediately prior to requesting reinstatement**, attend a minimum of one (1) meeting per week of a support or peer group meeting approved in advance by the Board, or a Twelve Step program, and provide satisfactory documentation of such attendance to the Board prior to reinstatement.

Reporting Requirements for Suspension Period

13. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
14. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
15. Submit any and all information that the Board may request regarding **MS. STOVER's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.

16. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board.
17. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: monitoring@nursing.ohio.gov or by mail to:

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17 South High Street, Suite 660
Columbus, OH 43215-3466**

18. Verify that the reports and documentation required by this Order are received in the Board office.
19. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.
20. Submit to the Board a completed application for reinstatement on the form provided by the Board.

PROBATIONARY PERIOD

Following reinstatement, the suspension shall be stayed and **MS. STOVER's** license shall be subject to Probationary Terms and Restrictions for a minimum period of three (3) years.

PROBATIONARY TERMS AND RESTRICTIONS

MS. STOVER shall:

1. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
2. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
3. Submit documentation of her full compliance with the requirements imposed by the Cuyahoga County Court of Common Pleas in Case Number CR-17-620569-A.

Monitoring

4. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. STOVER's** history. **MS. STOVER** shall self-administer prescribed drugs only in the manner prescribed.

5. Abstain completely from the use of alcohol or any products containing alcohol.
6. Submit, at her expense, and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Refusal to submit such specimen, or failure to submit such specimen on the day she is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MS. STOVER** shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who has received a complete copy of this Order prior to prescribing for **MS. STOVER**.

MS. STOVER shall:

- a. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
 - b. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;
 - c. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and
 - d. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. STOVER** *and* submit the report directly to the Board.
7. **Upon the request of the Board or its designee**, attend a minimum of one (1) meeting per week of a support or peer group meeting approved in advance by the Board, or a Twelve Step program, and provide satisfactory documentation of such attendance to the Board every six (6) months.

Employment Conditions

8. **Upon the request of the Board or its designee, prior to working in a position where a license to practice nursing is required**, complete and submit satisfactory documentation of completion of a nurse refresher course or an extensive orientation approved in advance by the Board or its designee.

9. **Prior to accepting employment as a nurse**, each time with every employer, notify the Board, in writing. Any period during which **MS. STOVER** does not work in a position within the State of Ohio for which a license to practice nursing is required **shall not count** toward fulfilling the probationary period imposed by this Order.
10. Be under a continuing duty to provide a copy of this Order to any new employer **prior to accepting employment as a nurse**.
11. Have current employer(s), if working in a position where a license to practice nursing is required, submit written reports regarding job performance **on a quarterly basis beginning within thirty (30) days of the effective date of this Order or beginning within thirty (30) days of working in a position as a nurse, whichever is later**.
12. Have current employer(s) send documentation to the Board, along with the first employer report, of receipt of a copy of this Order, including the date this Order was received.

Reporting Requirements for Probationary Period

13. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
14. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
15. Submit any and all information that the Board may request regarding **MS. STOVER's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
16. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.
17. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: monitoring@nursing.ohio.gov or by mail to:

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Ohio Board of Nursing
17 South High Street, Suite 660
Columbus, OH 43215-3466**

18. Verify that the reports and documentation required by this Order are received in the Board office.

19. Inform the Board **within five (5) business days**, in writing, of any change in employment status or of any change in residential or home address or telephone number.

LICENSE RESTRICTIONS

In addition to Probationary Terms and Restrictions, MS. STOVER's license is subject to the following License Restrictions:

Temporary Narcotic Restriction

MS. STOVER shall not administer, have access to, or possess (except as prescribed for **MS. STOVER's** use by another so authorized by law who has full knowledge of **MS. STOVER's** history) any narcotics, other controlled substances, or mood altering drugs. In addition, **MS. STOVER** shall not count narcotics or possess or carry any work keys for locked medication carts, cabinets, drawers, or containers. **MS. STOVER** shall not call in or order prescriptions or prescription refills.

Temporary Practice Restrictions

MS. STOVER shall not practice nursing as a licensed practical nurse (1) in a patient's residence; (2) for staffing agencies or pools; (3) for an individual or group of individuals who directly engage **MS. STOVER** to provide nursing services for fees, compensation, or other consideration or who engage **MS. STOVER** as a volunteer; or (4) as an independent contractor or for *locum tenens* assignments.

MS. STOVER shall not function in a position or employment where the job duties or requirements involve management of nursing and nursing responsibilities. Such positions include, but are not limited to, the following: Director of Nursing, Assistant Director of Nursing, Nurse Manager, Vice President of Nursing.

FAILURE TO COMPLY

The stay of **MS. STOVER's** suspension shall be lifted and **MS. STOVER's** license to practice nursing as a licensed practical nurse will be automatically suspended if it appears to the Board that **MS. STOVER** has violated or breached any terms or conditions of this Order. Following the automatic suspension, the Board shall notify **MS. STOVER** via certified mail of the specific nature of the charges and automatic suspension of **MS. STOVER's** license. **MS. STOVER** may request a hearing regarding the charges.

DURATION

The Board may only alter the probationary period imposed by this Order if: (1) the Board determines that **MS. STOVER** has complied with all aspects of this Order;

and (2) the Board determines that **MS. STOVER** is able to practice nursing according to acceptable and prevailing standards of safe nursing care without Board monitoring, based upon an interview with **MS. STOVER** and review of the reports as required herein.

As indicated above under Employment Conditions, any period during which **MS. STOVER** does not work in a position within the State of Ohio for which a license to practice nursing is required shall not count toward fulfilling the probationary period imposed by this Order.

Motion adopted by a majority vote of the Board members present with Matthew Carle, Daniel Lehmann and Sandra Ranck abstaining.

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September 2018.

Donnally, Anna Louise, P.N. 146170 (CASE #17-6962)

Action: It was moved by Nancy Fellows, seconded by Barbara Douglas, that upon consideration of the charges stated against **ANNA LOUISE DONNALLY** in the Notice of Automatic Suspension and Opportunity for Hearing (Notice) and evidence supporting the charges, the Board find that **MS. DONNALLY** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice, and that **MS. DONNALLY's** license to practice nursing as a licensed practical nurse be suspended for an indefinite period of time with the conditions for reinstatement set forth below, and following reinstatement, **MS. DONNALLY's** license to practice nursing as a licensed practical nurse shall be subject to a stayed suspension under the probationary terms and restrictions set forth below for a minimum period of one (1) year including the **Temporary Narcotic Restrictions, unless otherwise approved in advance**, set forth below.

SUSPENSION OF LICENSE

MS. DONNALLY's license is suspended for an indefinite period of time.

The Board may reinstate **MS. DONNALLY's** license if **MS. DONNALLY** submits a written request for reinstatement and is determined by the Board or its designee to have complied with the Conditions for Reinstatement.

CONDITIONS FOR REINSTATEMENT

MS. DONNALLY shall:

1. Be determined, by the Board or its designee, to be able to practice nursing according to acceptable and prevailing standards of safe nursing care based upon an interview and review of the documentation specified in this Order.

2. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
3. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
4. **Within ninety (90) days immediately prior to requesting reinstatement**, submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MS. DONNALLY**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MS. DONNALLY's** criminal records check to the Board. The Board will not consider a request for reinstatement until **MS. DONNALLY's** completed criminal records check, including the FBI check, is received by the Board.

Evaluations

5. **Within ninety (90) days immediately prior to requesting reinstatement**, at **MS. DONNALLY's** expense, obtain a chemical dependency evaluation by a chemical dependency professional approved by the Board or its designee and, prior to the evaluation, provide the chemical dependency professional with a copy of this Order and the Notice. **MS. DONNALLY** shall execute releases to permit the chemical dependency professional to obtain any information deemed appropriate and necessary for the evaluation. The chemical dependency professional shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on **MS. DONNALLY's** license, and a statement as to whether **MS. DONNALLY** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
6. Provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the chemical dependency professional described above until released. Further, the Board may utilize the professional's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on **MS. DONNALLY's** license.

Monitoring

7. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. DONNALLY's** history. **MS. DONNALLY** shall self-administer the prescribed drugs only in the manner prescribed.
8. Abstain completely from the use of alcohol or any products containing alcohol.

9. **Within ninety (90) days of requesting reinstatement**, begin submitting, at **MS. DONNALLY's** expense and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Upon and after **MS. DONNALLY's** initiation of drug screening, refusal to submit such specimen, or failure to submit such specimen on the day she is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MS. DONNALLY** shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who has received a complete copy of this Order prior to prescribing for **MS. DONNALLY**.

a. **Prior** to initiating drug screening:

- i. Provide a copy of this Order to all treating practitioners;
- ii. Provide to the Board a list of all treating practitioners, including addresses and telephone numbers; and
- iii. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. DONNALLY**, **and** submit the report directly to the Board.

b. **After** initiating drug screening, be under a **continuing duty** to:

- i. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
- ii. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;
- iii. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and
- iv. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. DONNALLY** **and** submit the report directly to the Board.

Reporting Requirements for Suspension Period

10. Report to the Board, in writing, any violation of this Order within thirty (30)

days of the occurrence of the violation.

11. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
12. Submit any and all information that the Board may request regarding **MS. DONNALLY's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
13. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board.
14. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: monitoring@nursing.ohio.gov or by mail to:

**Compliance Unit
Ohio Board of Nursing
17 South High Street, Suite 660
Columbus, OH 43215-3466**

15. Verify that the reports and documentation required by this Order are received in the Board office.
16. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.
17. Submit to the Board a completed application for reinstatement on the form provided by the Board.

PROBATIONARY PERIOD

Following reinstatement, the suspension shall be stayed and **MS. DONNALLY's** license shall be subject to Probationary Terms and Restrictions for a minimum period of one (1) year.

PROBATIONARY TERMS AND RESTRICTIONS

MS. DONNALLY shall:

1. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
2. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.

Monitoring

3. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. DONNALLY's** history. **MS. DONNALLY** shall self-administer prescribed drugs only in the manner prescribed.
4. Abstain completely from the use of alcohol or any products containing alcohol.
5. Submit, at her expense, and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Refusal to submit such specimen, or failure to submit such specimen on the day she is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MS. DONNALLY** shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who has received a complete copy of this Order prior to prescribing for **MS. DONNALLY**.

MS. DONNALLY shall:

- a. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
- b. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;
- c. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and
- d. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. DONNALLY** *and* submit the report directly to the Board.

Employment Conditions

6. **Upon the request of the Board or its designee, prior to working in a position where a license to practice nursing is required**, complete and submit satisfactory documentation of completion of a nurse refresher course or an extensive orientation approved in advance by the Board or its designee.

7. **Prior to accepting employment as a nurse**, each time with every employer, notify the Board, in writing. Any period during which **MS. DONNALLY** does not work in a position within the State of Ohio for which a license to practice nursing is required **shall not count** toward fulfilling the probationary period imposed by this Order.
8. Be under a continuing duty to provide a copy of this Order to any new employer **prior to accepting employment as a nurse**.
9. Have current employer(s), if working in a position where a license to practice nursing is required, submit written reports regarding job performance **on a quarterly basis beginning within thirty (30) days of the effective date of this Order or beginning within thirty (30) days of working in a position as a nurse, whichever is later**.
10. Have current employer(s) send documentation to the Board, along with the first employer report, of receipt of a copy of this Order, including the date this Order was received.

Reporting Requirements for Probationary Period

11. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
12. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
13. Submit any and all information that the Board may request regarding **MS. DONNALLY's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
14. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.
15. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: monitoring@nursing.ohio.gov or by mail to:

**Compliance Unit
Ohio Board of Nursing
17 South High Street, Suite 660
Columbus, OH 43215-3466**

16. Verify that the reports and documentation required by this Order are received in the Board office.

17. Inform the Board **within five (5) business days**, in writing, of any change in employment status or of any change in residential or home address or telephone number.

LICENSE RESTRICTIONS

In addition to Probationary Terms and Restrictions, MS. DONNALLY's license is subject to the following License Restrictions:

Temporary Narcotic Restriction

Unless otherwise approved in advance, in writing, by the Board or its designee, MS. DONNALLY shall not administer, have access to, or possess (except as prescribed for **MS. DONNALLY's** use by another so authorized by law who has full knowledge of **MS. DONNALLY's** history) any narcotics, other controlled substances, or mood altering drugs. In addition, **MS. DONNALLY** shall not count narcotics or possess or carry any work keys for locked medication carts, cabinets, drawers, or containers. **MS. DONNALLY** shall not call in or order prescriptions or prescription refills.

FAILURE TO COMPLY

The stay of **MS. DONNALLY's** suspension shall be lifted and **MS. DONNALLY's** license to practice nursing as a licensed practical nurse will be automatically suspended if it appears to the Board that **MS. DONNALLY** has violated or breached any terms or conditions of this Order. Following the automatic suspension, the Board shall notify **MS. DONNALLY** via certified mail of the specific nature of the charges and automatic suspension of **MS. DONNALLY's** license. **MS. DONNALLY** may request a hearing regarding the charges.

DURATION

The Board may only alter the probationary period imposed by this Order if: (1) the Board determines that **MS. DONNALLY** has complied with all aspects of this Order; and (2) the Board determines that **MS. DONNALLY** is able to practice nursing according to acceptable and prevailing standards of safe nursing care without Board monitoring, based upon an interview with **MS. DONNALLY** and review of the reports as required herein.

As indicated above under Employment Conditions, any period during which **MS. DONNALLY** does not work in a position within the State of Ohio for which a license to practice nursing is required shall not count toward fulfilling the probationary period imposed by this Order.

Motion adopted by a majority vote of the Board members present with Matthew Carle, Daniel Lehmann and Sandra Ranck abstaining.

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September 2018.

Beverly, Stefanie M. (aka "Stefanie Price"), P.N. 119494 (CASE #17-6950)

Action: It was moved by Joanna Ridgeway, seconded by Barbara Douglas, that upon consideration of the charges stated against **STEFANIE M. BEVERLY** in the Notice of Opportunity for Hearing (Notice) and evidence supporting the charges, the Board find that **MS. BEVERLY** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice, and that **MS. BEVERLY's** license to practice nursing as a licensed practical nurse be suspended and that the suspension is stayed subject to the probationary terms and restrictions set forth below for a minimum period of two (2) years including the **Temporary Narcotic and Temporary Practice Restrictions**, set forth below.

PROBATIONARY PERIOD

MS. BEVERLY's license shall be subject to Probationary Terms and Restrictions for a minimum period of two (2) years.

PROBATIONARY TERMS AND RESTRICTIONS

MS. BEVERLY shall:

1. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
2. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
3. Submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MS. BEVERLY**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MS. BEVERLY's** criminal records check to the Board. **MS. BEVERLY's** completed criminal records check, including the FBI check, must be received by the Board **within ninety (90) days of the effective date of this Order.**

Educational Requirements

4. **Within six (6) months of the effective date of this Order**, successfully complete and submit satisfactory documentation of successful completion of the following continuing education, or other comparable course(s) approved in advance by the Board or its designee: five (5) hours Chemical Dependency, four (4) hours Professional Accountability & Legal Liability, and two (2) hours Ohio Nursing Law and Rules. Continuing education

required by this Order **does not meet the continuing education requirements for license renewal.**

Evaluations

5. **Within ninety (90) days of the execution of the probationary period, at MS. BEVERLY's expense, obtain a chemical dependency evaluation by a chemical dependency professional approved by the Board or its designee and, prior to the evaluation, provide the chemical dependency professional with a copy of this Order and the Notice. MS. BEVERLY shall execute releases to permit the chemical dependency professional to obtain any information deemed appropriate and necessary for the evaluation. The chemical dependency professional shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on MS. BEVERLY's license, and a statement as to whether MS. BEVERLY is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.**
6. Provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the chemical dependency professional described above until released. Further, the Board may utilize the professional's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on **MS. BEVERLY's** license.

Monitoring

7. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. BEVERLY's** history. **MS. BEVERLY** shall self-administer prescribed drugs only in the manner prescribed.
8. **If recommended by the chemical dependency evaluation, abstain completely from the use of alcohol or any products containing alcohol.**
9. **Within ninety (90) days of the effective date of this Order, begin submitting, at MS. BEVERLY's expense and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Upon and after MS. BEVERLY's initiation of drug screening, refusal to submit such specimen, or failure to submit such specimen on the day she is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by MS. BEVERLY shall be negative, except for substances prescribed, administered, or dispensed to her by**

another so authorized by law who has received a complete copy of this Order prior to prescribing for **MS. BEVERLY**.

- a. **Prior** to initiating drug screening:
 - i. Provide a copy of this Order to all treating practitioners;
 - ii. Provide to the Board a list of all treating practitioners, including addresses and telephone numbers; and
 - iii. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. BEVERLY**, **and** submit the report directly to the Board.

- b. **After** initiating drug screening, be under a **continuing duty** to:
 - i. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
 - ii. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;
 - iii. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and
 - iv. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. BEVERLY** **and** submit the report directly to the Board.

Employment Conditions

10. **Upon the request of the Board or its designee**, complete and submit satisfactory documentation of completion of a nurse refresher course or an extensive orientation approved in advance by the Board or its designee.

11. Notify the Board, in writing, of the name and address of any current employer **within thirty (30) days following the effective date of this Order**, or any new employer **prior to accepting nursing employment**. Any period during which **MS. BEVERLY** does not work in a position within the State of Ohio for which a license to practice nursing is required **shall not count** toward fulfilling the probationary period imposed by this Order.

12. **Within fifteen (15) days of the effective date of this Order**, provide her current employer(s) with a copy of this Order, if working in a position in

- which a nursing license is required. **MS. BEVERLY** is under a continuing duty to provide a copy of this Order to any new employer(s) **prior to accepting employment as a nurse.**
13. Have current employer(s), if working in a position where a license to practice nursing is required, submit written reports regarding job performance **on a quarterly basis beginning within thirty (30) days of the effective date of this Order or beginning within thirty (30) days of working in a position as a nurse, whichever is later.**
 14. Have current employer(s) send documentation to the Board, along with the first employer report, of receipt of a copy of this Order, including the date this Order was received.

Reporting Requirements for Probationary Period

15. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
16. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
17. Submit any and all information that the Board may request regarding **MS. BEVERLY's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
18. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.
19. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: monitoring@nursing.ohio.gov or by mail to:

**Compliance Unit
Ohio Board of Nursing
17 South High Street, Suite 660
Columbus, OH 43215-3466**

20. Verify that the reports and documentation required by this Order are received in the Board office.
21. Inform the Board **within five (5) business days**, in writing, of any change in employment status or of any change in residential or home address or telephone number.

LICENSE RESTRICTIONS

In addition to Probationary Terms and Restrictions, MS. BEVERLY's license is subject to the following License Restrictions:

Temporary Narcotic Restriction

MS. BEVERLY shall not administer, have access to, or possess (except as prescribed for **MS. BEVERLY's** use by another so authorized by law who has full knowledge of **MS. BEVERLY's** history) any narcotics, other controlled substances, or mood altering drugs. In addition, **MS. BEVERLY** shall not count narcotics or possess or carry any work keys for locked medication carts, cabinets, drawers, or containers. **MS. BEVERLY** shall not call in or order prescriptions or prescription refills.

Temporary Practice Restrictions

MS. BEVERLY shall not practice nursing as a licensed practical nurse (1) in a patient's residence; (2) for staffing agencies or pools; (3) for an individual or group of individuals who directly engage **MS. BEVERLY** to provide nursing services for fees, compensation, or other consideration or who engage **MS. BEVERLY** as a volunteer; or (4) as an independent contractor or for *locum tenens* assignments.

MS. BEVERLY shall not function in a position or employment where the job duties or requirements involve management of nursing and nursing responsibilities. Such positions include, but are not limited to, the following: Director of Nursing, Assistant Director of Nursing, Nurse Manager, Vice President of Nursing.

FAILURE TO COMPLY

The stay of **MS. BEVERLY's** suspension shall be lifted and **MS. BEVERLY's** license to practice nursing as a licensed practical nurse will be automatically suspended if it appears to the Board that **MS. BEVERLY** has violated or breached any terms or conditions of this Order. Following the automatic suspension, the Board shall notify **MS. BEVERLY** via certified mail of the specific nature of the charges and automatic suspension of **MS. BEVERLY's** license. **MS. BEVERLY** may request a hearing regarding the charges.

DURATION

The Board may only alter the probationary period imposed by this Order if: (1) the Board determines that **MS. BEVERLY** has complied with all aspects of this Order; and (2) the Board determines that **MS. BEVERLY** is able to practice nursing according to acceptable and prevailing standards of safe nursing care without Board monitoring, based upon an interview with **MS. BEVERLY** and review of the reports as required herein.

As indicated above under Employment Conditions, any period during which **MS. BEVERLY** does not work in a position within the State of Ohio for which a license to practice nursing is required shall not count toward fulfilling the probationary period imposed by this Order.

Motion adopted by a majority vote of the Board members present with Matthew Carle, Daniel Lehmann and Sandra Ranck abstaining.

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September 2018.

Callahan, Bobbie A., P.N. 089984 (CASE #17-6143)

Action: It was moved by Nancy Fellows, seconded by Barbara Douglas, that upon consideration of the charges stated against **BOBBIE A. CALLAHAN** in the Notice of Opportunity for Hearing (Notice) and evidence supporting the charges, the Board find that **MS. CALLAHAN** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice, and that **MS. CALLAHAN's** license to practice nursing as a licensed practical nurse be suspended and that the suspension is stayed subject to the probationary terms and restrictions set forth below for a minimum period of two (2) years including the **Permanent Narcotic Restrictions, unless otherwise approved in advance**, set forth below.

PROBATIONARY PERIOD

MS. CALLAHAN's license shall be subject to Probationary Terms and Restrictions for a minimum period of two (2) years.

PROBATIONARY TERMS AND RESTRICTIONS

MS. CALLAHAN shall:

1. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
2. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
3. Submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MS. CALLAHAN**, including a check of Federal Bureau of Investigation (FBI) records, and request that BCII submit **MS. CALLAHAN's** criminal records check to the Board. **MS. CALLAHAN's** completed criminal records check, including the FBI check, must be received by the Board **within ninety (90) days following the effective date of this Order.**

Educational Requirements

4. **Within six (6) months of the effective date of this Order**, successfully complete and submit satisfactory documentation of successful completion of the following continuing education, or other comparable course(s) approved in advance by the Board or its designee: six (6) hours Nurses and Addiction, and two (2) hours Ohio Nursing Law and Rules. Continuing education required by this Order **does not meet the continuing education requirements for license renewal**.

Evaluation

5. **Within ninety (90) days of the execution of the probationary period**, at **MS. CALLAHAN's** expense, obtain a chemical dependency evaluation by a chemical dependency professional approved by the Board or its designee and, prior to the evaluation, provide the chemical dependency professional with a copy of this Order and the Notice. **MS. CALLAHAN** shall execute releases to permit the chemical dependency professional to obtain any information deemed appropriate and necessary for the evaluation. The chemical dependency professional shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on **MS. CALLAHAN's** license, and a statement as to whether **MS. CALLAHAN** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
6. Provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the chemical dependency professional described above until released. Further, the Board may utilize the professional's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on **MS. CALLAHAN's** license.

Monitoring

7. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. CALLAHAN's** history. **MS. CALLAHAN** shall self-administer prescribed drugs only in the manner prescribed.
8. **Within ninety (90) days of the effective date of this Order**, begin submitting, at **MS. CALLAHAN's** expense and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Upon and after **MS. CALLAHAN's** initiation of drug screening, refusal to submit such specimen, or failure to submit such specimen on the day she is selected, or in such a manner as the Board may request, shall

constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MS. CALLAHAN** shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who has received a complete copy of this Order prior to prescribing for **MS. CALLAHAN**.

- a. **Prior** to initiating drug screening:
 - i. Provide a copy of this Order to all treating practitioners;
 - ii. Provide to the Board a list of all treating practitioners, including addresses and telephone numbers; and
 - iii. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. CALLAHAN**, **and** submit the report directly to the Board.

- b. **After** initiating drug screening, be under a **continuing duty** to:
 - i. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
 - ii. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;
 - iii. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and
 - iv. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. CALLAHAN** **and** submit the report directly to the Board.

Employment Conditions

9. **Upon the request of the Board or its designee**, complete and submit satisfactory documentation of completion of a nurse refresher course or an extensive orientation approved in advance by the Board or its designee.

10. Notify the Board, in writing, of the name and address of any current employer **within thirty (30) days following the effective date of this Order**, or any new employer prior to accepting nursing employment. Any period during which **MS. CALLAHAN** does not work in a position within the

State of Ohio for which a license to practice nursing is required **shall not count** toward fulfilling the probationary period imposed by this Order.

11. **Within fifteen (15) days of the effective date of this Order**, provide her current employer(s) with a copy of this Order, if working in a position in which a nursing license is required. **MS. CALLAHAN** is under a continuing duty to provide a copy of this Order to any new employer **prior to accepting employment as a nurse**.
12. Have current employer(s), if working in a position where a license to practice nursing is required, submit written reports regarding job performance **on a quarterly basis beginning within thirty (30) days of the effective date of this Order or beginning within thirty (30) days of working in a position as a nurse, whichever is later**.
13. Have current employer(s) send documentation to the Board, along with the first employer report, of receipt of a copy of this Order, including the date this Order was received.

Reporting Requirements for Probationary Period

14. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
15. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
16. Submit any and all information that the Board may request regarding **MS. CALLAHAN's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
17. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.
18. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: monitoring@nursing.ohio.gov or by mail to:

**Compliance Unit
Ohio Board of Nursing
17 South High Street, Suite 660
Columbus, OH 43215-3466**

19. Verify that the reports and documentation required by this Order are received in the Board office.

20. Inform the Board **within five (5) business days**, in writing, of any change in employment status or of any change in residential or home address or telephone number.

LICENSE RESTRICTIONS

In addition to Probationary Terms and Restrictions, MS. CALLAHAN's license is subject to the following License Restrictions:

Permanent Narcotic Restriction

Unless otherwise approved in advance, in writing, by the Board or its designee, MS. CALLAHAN shall not administer, have access to, or possess (except as prescribed for **MS. CALLAHAN's** use by another so authorized by law who has full knowledge of **MS. CALLAHAN's** history) any narcotics, other controlled substances, or mood altering drugs. In addition, **MS. CALLAHAN** shall not count narcotics or possess or carry any work keys for locked medication carts, cabinets, drawers, or containers. **MS. CALLAHAN** shall not call in or order prescriptions or prescription refills.

FAILURE TO COMPLY

The stay of **MS. CALLAHAN's** suspension shall be lifted and **MS. CALLAHAN's** license to practice nursing as a licensed practical nurse will be automatically suspended if it appears to the Board that **MS. CALLAHAN** has violated or breached any terms or conditions of this Order. Following the automatic suspension, the Board shall notify **MS. CALLAHAN** via certified mail of the specific nature of the charges and automatic suspension of **MS. CALLAHAN's** license. **MS. CALLAHAN** may request a hearing regarding the charges.

DURATION

The Board may only alter the probationary period imposed by this Order if: (1) the Board determines that **MS. CALLAHAN** has complied with all aspects of this Order; and (2) the Board determines that **MS. CALLAHAN** is able to practice nursing according to acceptable and prevailing standards of safe nursing care without Board monitoring, based upon an interview with **MS. CALLAHAN** and review of the reports as required herein.

As indicated above under Employment Conditions, any period during which **MS. CALLAHAN** does not work in a position within the State of Ohio for which a license to practice nursing is required shall not count toward fulfilling the probationary period imposed by this Order.

Motion adopted by a majority vote of the Board members present with Matthew Carle, Daniel Lehmann and Sandra Ranck abstaining.

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September 2018.

Duncan, Nicole E. (aka "Nicole E. Ziemkiewicz"), R.N. 349249 (CASE #18-0074, #17-5862)

Action: It was moved by Barbara Douglas, seconded by Nancy Fellows, that upon consideration of the charges stated against **NICOLE E. DUNCAN** in the Notice of Opportunity for Hearing (Notice) and evidence supporting the charges, the Board find that **MS. DUNCAN** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice, and that **MS. DUNCAN's** license to practice nursing as a registered nurse be suspended for an indefinite period of time with the conditions for reinstatement set forth below, and following reinstatement, **MS. DUNCAN's** license to practice nursing as a registered nurse shall be subject to a stayed suspension under the probationary terms and restrictions set forth below for a minimum period of three (3) years including the **Temporary Narcotic and Temporary Practice Restrictions**, set forth below.

SUSPENSION OF LICENSE

MS. DUNCAN's license is suspended for an indefinite period of time.

The Board may reinstate **MS. DUNCAN's** license if **MS. DUNCAN** submits a written request for reinstatement and is determined by the Board or its designee to have complied with the Conditions for Reinstatement.

CONDITIONS FOR REINSTATEMENT

MS. DUNCAN shall:

1. Be determined, by the Board or its designee, to be able to practice nursing according to acceptable and prevailing standards of safe nursing care based upon an interview and review of the documentation specified in this Order.
2. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
3. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
4. **Within ninety (90) days immediately prior to requesting reinstatement**, submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MS. DUNCAN**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MS. DUNCAN's** criminal records check to the Board. The

- Board will not consider a request for reinstatement until **MS. DUNCAN's** completed criminal records check, including the FBI check, is received by the Board.
5. Submit documentation of her full compliance with the requirements imposed by the Sylvania Municipal Court in Case Number CRA 1701725.

Evaluations

6. **Within ninety (90) days immediately prior to requesting reinstatement,** at **MS. DUNCAN's** expense, obtain a mental health evaluation from a Board approved evaluator and provide the Board with complete documentation of such evaluation. Prior to the evaluation, **MS. DUNCAN** shall provide the mental health evaluator with a copy of this Order and the Notice. **MS. DUNCAN** shall execute releases to permit the mental health evaluator to obtain any information deemed appropriate and necessary for the evaluation. The mental health evaluator shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on **MS. DUNCAN's** license, and a statement as to whether **MS. DUNCAN** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
7. Provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the mental health evaluator described above until released. Further, the Board may utilize the mental health evaluator's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on **MS. DUNCAN's** license.
8. **Within ninety (90) days immediately prior to requesting reinstatement,** at **MS. DUNCAN's** expense, obtain a comprehensive physical examination by a Board approved physician for the purposes of evaluating **MS. DUNCAN's** fitness for duty and safety to practice nursing as a registered nurse. This Board approved physician shall provide the Board with complete documentation of **MS. DUNCAN's** comprehensive physical examination and with a comprehensive assessment regarding **MS. DUNCAN's** fitness for duty and safety to practice nursing as a registered nurse. Prior to the examination, **MS. DUNCAN** shall provide the Board approved physician with a copy of this Order and the Notice. **MS. DUNCAN** shall execute releases to permit the Board approved physician performing the comprehensive physical examination, and assessment to obtain any information deemed appropriate and necessary for the assessment. The evaluating physician shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on **MS. DUNCAN's** license, and stating whether **MS. DUNCAN** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.

9. The Board may utilize the Board approved physician's recommendations and conclusions from the comprehensive physical examination and assessment as a basis for additional terms and restrictions on **MS. DUNCAN's** license.
10. **Within ninety (90) days immediately prior to requesting reinstatement,** at **MS. DUNCAN's** expense, obtain a chemical dependency evaluation by a chemical dependency professional approved by the Board or its designee and, prior to the evaluation, provide the chemical dependency professional with a copy of this Order and the Notice. **MS. DUNCAN** shall execute releases to permit the chemical dependency professional to obtain any information deemed appropriate and necessary for the evaluation. The chemical dependency professional shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on **MS. DUNCAN's** license, and a statement as to whether **MS. DUNCAN** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
11. Provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the chemical dependency professional described above until released. Further, the Board may utilize the professional's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on **MS. DUNCAN's** license.

Monitoring

12. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. DUNCAN's** history. **MS. DUNCAN** shall self-administer the prescribed drugs only in the manner prescribed.
13. Abstain completely from the use of alcohol or any products containing alcohol.
14. **For a minimum, continuous period of one (1) year immediately prior to requesting reinstatement,** submit, at **MS. DUNCAN's** expense and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Upon and after **MS. DUNCAN's** initiation of drug screening, refusal to submit such specimen, or failure to submit such specimen on the day she is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MS. DUNCAN** shall be negative, except for substances prescribed, administered, or dispensed to

her by another so authorized by law who has received a complete copy of this Order prior to prescribing for **MS. DUNCAN**.

- a. **Prior** to initiating drug screening:
 - i. Provide a copy of this Order to all treating practitioners;
 - ii. Provide to the Board a list of all treating practitioners, including addresses and telephone numbers; and
 - iii. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. DUNCAN**, *and* submit the report directly to the Board.

- b. **After** initiating drug screening, be under a **continuing duty** to:
 - i. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
 - ii. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;
 - iii. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and
 - iv. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. DUNCAN** *and* submit the report directly to the Board.

15. **For a minimum, continuous period of one (1) year immediately prior to requesting reinstatement**, attend a minimum of one (1) meeting per week of a support or peer group meeting approved in advance by the Board, or a Twelve Step program, and provide satisfactory documentation of such attendance to the Board prior to reinstatement.

Reporting Requirements for Suspension Period

16. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
17. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
18. Submit any and all information that the Board may request regarding **MS.**

DUNCAN's ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.

19. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board.
20. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: monitoring@nursing.ohio.gov or by mail to:

**Compliance Unit
Ohio Board of Nursing
17 South High Street, Suite 660
Columbus, OH 43215-3466**

21. Verify that the reports and documentation required by this Order are received in the Board office.
22. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.
23. Submit to the Board a completed application for reinstatement on the form provided by the Board.

PROBATIONARY PERIOD

Following reinstatement, the suspension shall be stayed and **MS. DUNCAN's** license shall be subject to Probationary Terms and Restrictions for a minimum period of three (3) years.

PROBATIONARY TERMS AND RESTRICTIONS

MS. DUNCAN shall:

1. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
2. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
3. Submit documentation of her full compliance with the requirements imposed by the Sylvania Municipal Court in Case Number CRA 1701725.

Monitoring

4. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by

- law who has full knowledge of **MS. DUNCAN's** history. **MS. DUNCAN** shall self-administer prescribed drugs only in the manner prescribed.
5. Abstain completely from the use of alcohol or any products containing alcohol.
 6. Submit, at her expense, and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Refusal to submit such specimen, or failure to submit such specimen on the day she is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MS. DUNCAN** shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who has received a complete copy of this Order prior to prescribing for **MS. DUNCAN**.

MS. DUNCAN shall:

- a. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
 - b. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;
 - c. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and
 - d. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. DUNCAN** *and* submit the report directly to the Board.
7. Attend a minimum of one (1) meeting per week of a support or peer group meeting approved in advance by the Board, or a Twelve Step program, and provide satisfactory documentation of such attendance to the Board every six (6) months.

Employment Conditions

8. **Upon the request of the Board or its designee, prior to working in a position where a license to practice nursing is required**, complete and submit satisfactory documentation of completion of a nurse refresher course or an extensive orientation approved in advance by the Board or its designee.

9. **Prior to accepting employment as a nurse**, each time with every employer, notify the Board, in writing. Any period during which **MS. DUNCAN** does not work in a position within the State of Ohio for which a license to practice nursing is required **shall not count** toward fulfilling the probationary period imposed by this Order.
10. Be under a continuing duty to provide a copy of this Order to any new employer **prior to accepting employment as a nurse**.
11. Have current employer(s), if working in a position where a license to practice nursing is required, submit written reports regarding job performance **on a quarterly basis beginning within thirty (30) days of the effective date of this Order or beginning within thirty (30) days of working in a position as a nurse, whichever is later**.
12. Have current employer(s) send documentation to the Board, along with the first employer report, of receipt of a copy of this Order, including the date this Order was received.

Reporting Requirements for Probationary Period

13. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
14. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
15. Submit any and all information that the Board may request regarding **MS. DUNCAN's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
16. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.
17. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: monitoring@nursing.ohio.gov or by mail to:

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Ohio Board of Nursing
17 South High Street, Suite 660
Columbus, OH 43215-3466**

18. Verify that the reports and documentation required by this Order are received in the Board office.

19. Inform the Board **within five (5) business days**, in writing, of any change in employment status or of any change in residential or home address or telephone number.

LICENSE RESTRICTIONS

In addition to Probationary Terms and Restrictions, MS. DUNCAN's license is subject to the following License Restrictions:

Temporary Narcotic Restriction

MS. DUNCAN shall not administer, have access to, or possess (except as prescribed for **MS. DUNCAN's** use by another so authorized by law who has full knowledge of **MS. DUNCAN's** history) any narcotics, other controlled substances, or mood altering drugs. In addition, **MS. DUNCAN** shall not count narcotics or possess or carry any work keys for locked medication carts, cabinets, drawers, or containers. **MS. DUNCAN** shall not call in or order prescriptions or prescription refills.

Temporary Practice Restrictions

MS. DUNCAN shall not practice nursing as a registered nurse (1) in a patient's residence; (2) for staffing agencies or pools; (3) for an individual or group of individuals who directly engage **MS. DUNCAN** to provide nursing services for fees, compensation, or other consideration or who engage **MS. DUNCAN** as a volunteer; or (4) as an independent contractor or for *locum tenens* assignments.

MS. DUNCAN shall not function in a position or employment where the job duties or requirements involve management of nursing and nursing responsibilities, or supervising and evaluating nursing practice. Such positions include, but are not limited to, the following: Director of Nursing, Assistant Director of Nursing, Nurse Manager, Vice President of Nursing.

FAILURE TO COMPLY

The stay of **MS. DUNCAN's** suspension shall be lifted and **MS. DUNCAN's** license to practice nursing as a registered nurse will be automatically suspended if it appears to the Board that **MS. DUNCAN** has violated or breached any terms or conditions of this Order. Following the automatic suspension, the Board shall notify **MS. DUNCAN** via certified mail of the specific nature of the charges and automatic suspension of **MS. DUNCAN's** license. **MS. DUNCAN** may request a hearing regarding the charges.

DURATION

The Board may only alter the probationary period imposed by this Order if: (1) the Board determines that **MS. DUNCAN** has complied with all aspects of this Order; and (2) the Board determines that **MS. DUNCAN** is able to practice nursing according to acceptable and prevailing standards of safe nursing care without Board monitoring, based upon an interview with **MS. DUNCAN** and review of the reports as required herein.

As indicated above under Employment Conditions, any period during which **MS. DUNCAN** does not work in a position within the State of Ohio for which a license to practice nursing is required shall not count toward fulfilling the probationary period imposed by this Order.

Motion adopted by a majority vote of the Board members present with Matthew Carle, Daniel Lehmann and Sandra Ranck abstaining.

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September 2018.

Edge, Alisa N., R.N. 414218 (CASE #18-0198)

Action: It was moved by Deborah Knueve, seconded by Barbara Douglas, that upon consideration of the charges stated against **ALISA N. EDGE** in the Notice of Opportunity for Hearing (Notice) and evidence supporting the charges, the Board find that **MS. EDGE** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice, and that **MS. EDGE's** license to practice nursing as a registered nurse be suspended for an indefinite period of time with the conditions for reinstatement set forth below.

SUSPENSION OF LICENSE

MS. EDGE's license is suspended for an indefinite period of time.

The Board may reinstate **MS. EDGE's** license if **MS. EDGE** submits a written request for reinstatement and is determined by the Board or its designee to have complied with the Conditions for Reinstatement.

CONDITIONS FOR REINSTATEMENT

MS. EDGE shall:

1. Be determined, by the Board or its designee, to be able to practice nursing according to acceptable and prevailing standards of safe nursing care based upon an interview and review of the documentation specified in this Order.
2. Obey all federal, state, and local laws, and all laws and rules governing the

practice of nursing in Ohio.

3. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
4. **Within ninety (90) days immediately prior to requesting reinstatement**, submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MS. EDGE**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MS. EDGE's** criminal records check to the Board. The Board will not consider a request for reinstatement until **MS. EDGE's** completed criminal records check, including the FBI check, is received by the Board.
5. Submit documentation of her full compliance with the requirements imposed by the Garfield Heights Municipal Court in Case Number CRB 1201502A.
6. **Upon the request of the Board or its designee, prior to working in a position where a license to practice nursing is required**, complete and submit satisfactory documentation of completion of a nurse refresher course or an extensive orientation approved in advance by the Board or its designee.

Evaluations

7. **Within ninety (90) days immediately prior to requesting reinstatement**, at **MS. EDGE's** expense, obtain a chemical dependency evaluation by a chemical dependency professional approved by the Board or its designee and, prior to the evaluation, provide the chemical dependency professional with a copy of this Order and the Notice. **MS. EDGE** shall execute releases to permit the chemical dependency professional to obtain any information deemed appropriate and necessary for the evaluation. The chemical dependency professional shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on **MS. EDGE's** license, and a statement as to whether **MS. EDGE** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
8. Provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the chemical dependency professional described above until released. Further, the Board may utilize the professional's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on **MS. EDGE's** license.

Reporting Requirements for Suspension Period

9. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.

10. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
11. Submit any and all information that the Board may request regarding **MS. EDGE's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
12. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board.
13. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: monitoring@nursing.ohio.gov or by mail to:

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Ohio Board of Nursing
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Columbus, OH 43215-3466**

14. Verify that the reports and documentation required by this Order are received in the Board office.
15. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.
16. Submit to the Board a completed application for reinstatement on the form provided by the Board.

Motion adopted by a majority vote of the Board members present with Matthew Carle, Daniel Lehmann and Sandra Ranck abstaining.

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September 2018.

Galloway, Joyce A., R.N. 174493 (CASE #17-3627)

Action: It was moved by Patricia Sharpnack, seconded by Deborah Knueve, that upon consideration of the charges stated against **JOYCE A. GALLOWAY** in the Notice of Opportunity for Hearing (Notice) and evidence supporting the charges, the Board find that **MS. GALLOWAY** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice, and that **MS. GALLOWAY's** license to practice nursing as a registered nurse be suspended for an indefinite period of time but not less than two (2) years with the conditions for reinstatement set forth below, and following reinstatement, **MS. GALLOWAY's** license to practice nursing as a registered nurse shall be subject to a stayed suspension under the probationary terms and restrictions set forth

below for a minimum period of two (2) years including the **Temporary Narcotic and Permanent Practice Restrictions**, set forth below.

SUSPENSION OF LICENSE

MS. GALLOWAY's license is suspended for an indefinite period of time but not less than two (2) years.

The Board may reinstate **MS. GALLOWAY's** license if **MS. GALLOWAY** submits a written request for reinstatement and is determined by the Board or its designee to have complied with the Conditions for Reinstatement.

CONDITIONS FOR REINSTATEMENT

MS. GALLOWAY shall:

1. Be determined, by the Board or its designee, to be able to practice nursing according to acceptable and prevailing standards of safe nursing care based upon an interview and review of the documentation specified in this Order.
2. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
3. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
4. **Within ninety (90) days immediately prior to requesting reinstatement**, submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MS. GALLOWAY**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MS. GALLOWAY's** criminal records check to the Board. The Board will not consider a request for reinstatement until **MS. GALLOWAY's** completed criminal records check, including the FBI check, is received by the Board.

Evaluation

5. **Within ninety (90) days immediately prior to requesting reinstatement**, at **MS. GALLOWAY's** expense, obtain a chemical dependency evaluation by a chemical dependency professional approved by the Board or its designee and, prior to the evaluation, provide the chemical dependency professional with a copy of this Order and the Notice. **MS. GALLOWAY** shall execute releases to permit the chemical dependency professional to obtain any information deemed appropriate and necessary for the evaluation. The chemical dependency professional shall submit a written opinion to the Board that includes diagnoses, recommendations for

- treatment and monitoring, any additional restrictions that should be placed on **MS. GALLOWAY's** license, and a statement as to whether **MS. GALLOWAY** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
6. Provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the chemical dependency professional described above until released. Further, the Board may utilize the professional's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on **MS. GALLOWAY's** license.

Monitoring

7. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. GALLOWAY's** history. **MS. GALLOWAY** shall self-administer the prescribed drugs only in the manner prescribed.
8. Abstain completely from the use of alcohol or any products containing alcohol.
9. **For a minimum, continuous period of one (1) year immediately prior to requesting reinstatement**, submit, at **MS. GALLOWAY's** expense and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Upon and after **MS. GALLOWAY's** initiation of drug screening, refusal to submit such specimen, or failure to submit such specimen on the day she is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MS. GALLOWAY** shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who has received a complete copy of this Order prior to prescribing for **MS. GALLOWAY**.
 - a. **Prior** to initiating drug screening:
 - i. Provide a copy of this Order to all treating practitioners;
 - ii. Provide to the Board a list of all treating practitioners, including addresses and telephone numbers; and
 - iii. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. GALLOWAY**, **and** submit

the report directly to the Board.

- b. **After** initiating drug screening, be under a **continuing duty** to:
- i. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
 - ii. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;
 - iii. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and
 - iv. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. GALLOWAY** and submit the report directly to the Board.

10. **For a minimum, continuous period of one (1) year immediately prior to requesting reinstatement**, attend a minimum of one (1) meeting per week of a support or peer group meeting approved in advance by the Board, or a Twelve Step program, and provide satisfactory documentation of such attendance to the Board prior to reinstatement.

Reporting Requirements for Suspension Period

11. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
12. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
13. Submit any and all information that the Board may request regarding **MS. GALLOWAY's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
14. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board.
15. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: monitoring@nursing.ohio.gov or by mail to:

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Ohio Board of Nursing
17 South High Street, Suite 660**

Columbus, OH 43215-3466

16. Verify that the reports and documentation required by this Order are received in the Board office.
17. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.
18. Submit to the Board a completed application for reinstatement on the form provided by the Board.

PROBATIONARY PERIOD

Following reinstatement, the suspension shall be stayed and **MS. GALLOWAY's** license shall be subject to Probationary Terms and Restrictions for a minimum period of two (2) years.

PROBATIONARY TERMS AND RESTRICTIONS

MS. GALLOWAY shall:

1. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
2. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.

Evaluations

3. **Upon the request of the Board or its designee and within sixty (60) days of that request**, at **MS. GALLOWAY's** expense, obtain a chemical dependency evaluation by a chemical dependency professional approved by the Board or its designee and, prior to the evaluation, provide the chemical dependency professional with a copy of this Order and the Notice. **MS. GALLOWAY** shall execute releases to permit the chemical dependency professional to obtain any information deemed appropriate and necessary for the evaluation. The chemical dependency professional shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on **MS. GALLOWAY's** license, and a statement as to whether **MS. GALLOWAY** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
4. **If a chemical dependency evaluation is requested**, provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the chemical dependency professional

described above until released. Further, the Board may utilize the professional's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on **MS. GALLOWAY's** license.

Monitoring

5. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. GALLOWAY's** history. **MS. GALLOWAY** shall self-administer prescribed drugs only in the manner prescribed.
6. Abstain completely from the use of alcohol or any products containing alcohol.
7. Submit, at her expense, and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Refusal to submit such specimen, or failure to submit such specimen on the day she is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MS. GALLOWAY** shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who has received a complete copy of this Order prior to prescribing for **MS. GALLOWAY**.

MS. GALLOWAY shall:

- a. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
 - b. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;
 - c. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and
 - d. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. GALLOWAY** *and* submit the report directly to the Board.
8. Attend a minimum of one (1) meeting per week of a support or peer group meeting approved in advance by the Board, or a Twelve Step program, and provide satisfactory documentation of such attendance to the Board every

six (6) months.

Employment Conditions

9. **Upon the request of the Board or its designee, prior to working in a position where a license to practice nursing is required**, complete and submit satisfactory documentation of completion of a nurse refresher course or an extensive orientation approved in advance by the Board or its designee.
10. **Prior to accepting employment as a nurse**, each time with every employer, notify the Board, in writing. Any period during which **MS. GALLOWAY** does not work in a position within the State of Ohio for which a license to practice nursing is required **shall not count** toward fulfilling the probationary period imposed by this Order.
11. Be under a continuing duty to provide a copy of this Order to any new employer **prior to accepting employment as a nurse**.
12. Have current employer(s), if working in a position where a license to practice nursing is required, submit written reports regarding job performance **on a quarterly basis beginning within thirty (30) days of the effective date of this Order or beginning within thirty (30) days of working in a position as a nurse, whichever is later**.
13. Have current employer(s) send documentation to the Board, along with the first employer report, of receipt of a copy of this Order, including the date this Order was received.

Reporting Requirements for Probationary Period

14. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
15. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
16. Submit any and all information that the Board may request regarding **MS. GALLOWAY's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
17. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.

18. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: monitoring@nursing.ohio.gov or by mail to:

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19. Verify that the reports and documentation required by this Order are received in the Board office.
20. Inform the Board **within five (5) business days**, in writing, of any change in employment status or of any change in residential or home address or telephone number.

LICENSE RESTRICTIONS

In addition to Probationary Terms and Restrictions, MS. GALLOWAY's license is subject to the following License Restrictions:

Temporary Narcotic Restriction

MS. GALLOWAY shall not administer, have access to, or possess (except as prescribed for **MS. GALLOWAY's** use by another so authorized by law who has full knowledge of **MS. GALLOWAY's** history) any narcotics, other controlled substances, or mood altering drugs. In addition, **MS. GALLOWAY** shall not count narcotics or possess or carry any work keys for locked medication carts, cabinets, drawers, or containers. **MS. GALLOWAY** shall not call in or order prescriptions or prescription refills.

Permanent Practice Restrictions

MS. GALLOWAY shall not practice nursing as a registered nurse (1) in a patient's residence; (2) for staffing agencies or pools; (3) for an individual or group of individuals who directly engage **MS. GALLOWAY** to provide nursing services for fees, compensation, or other consideration or who engage **MS. GALLOWAY** as a volunteer; or (4) as an independent contractor or for *locum tenens* assignments.

MS. GALLOWAY shall not function in a position or employment where the job duties or requirements involve management of nursing and nursing responsibilities, or supervising and evaluating nursing practice. Such positions include, but are not limited to, the following: Director of Nursing, Assistant Director of Nursing, Nurse Manager, Vice President of Nursing.

FAILURE TO COMPLY

The stay of **MS. GALLOWAY's** suspension shall be lifted and **MS. GALLOWAY's** license to practice nursing as a registered nurse will be automatically suspended if it appears to the Board that **MS. GALLOWAY** has violated or breached any terms or conditions of this Order. Following the automatic suspension, the Board shall notify **MS. GALLOWAY** via certified mail of the specific nature of the charges and automatic suspension of **MS. GALLOWAY's** license. **MS. GALLOWAY** may request a hearing regarding the charges.

DURATION

The Board may only alter the probationary period imposed by this Order if: (1) the Board determines that **MS. GALLOWAY** has complied with all aspects of this Order; and (2) the Board determines that **MS. GALLOWAY** is able to practice nursing according to acceptable and prevailing standards of safe nursing care without Board monitoring, based upon an interview with **MS. GALLOWAY** and review of the reports as required herein.

As indicated above under Employment Conditions, any period during which **MS. GALLOWAY** does not work in a position within the State of Ohio for which a license to practice nursing is required shall not count toward fulfilling the probationary period imposed by this Order.

Motion adopted by a majority vote of the Board members present with Matthew Carle, Daniel Lehmann and Sandra Ranck abstaining.

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September 2018.

Gilbert, Amy Lynn (fka "Amy Boerger"), R.N. 368843, P.N. 106408 (CASE #18-0422)

Action: It was moved by Brenda Boggs, seconded by Patricia Sharpnack, that upon consideration of the charges stated against **AMY LYNN GILBERT** in the Notice of Automatic Suspension and Opportunity for Hearing (Notice) and evidence supporting the charges, the Board find that **MS. GILBERT** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice, and that **MS. GILBERT's** licenses to practice nursing as a registered nurse and licensed practical nurse be **PERMANENTLY REVOKED**.

Motion adopted by a majority vote of the Board members present with Matthew Carle, Daniel Lehmann and Sandra Ranck abstaining.

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September 2018.

Lokar, Brian F., R.N. 312846 (CASE #17-3715)

Action: It was moved by Sandra Beidelschies, seconded by Brenda Boggs, that upon consideration of the charges stated against **BRIAN F. LOKAR** in the Notice of Opportunity for Hearing (Notice) and evidence supporting the charges, the Board find that **MR. LOKAR** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice, and that **MR. LOKAR's** license to practice nursing as a registered nurse be suspended for an indefinite period of time but not less than two (2) years with the conditions for reinstatement set forth below, and following reinstatement, **MR. LOKAR's** license to practice nursing as a registered nurse shall be subject to a stayed suspension under the probationary terms and restrictions set forth below for a minimum period of three (3) years including the **Temporary Narcotic and Temporary Practice Restrictions**, set forth below.

SUSPENSION OF LICENSE

MR. LOKAR's license is suspended for an indefinite period of time but not less than two (2) years.

The Board may reinstate **MR. LOKAR's** license if **MR. LOKAR** submits a written request for reinstatement and is determined by the Board or its designee to have complied with the Conditions for Reinstatement.

CONDITIONS FOR REINSTATEMENT

MR. LOKAR shall:

1. Be determined, by the Board or its designee, to be able to practice nursing according to acceptable and prevailing standards of safe nursing care based upon an interview and review of the documentation specified in this Order.
2. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
3. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
4. **Within ninety (90) days immediately prior to requesting reinstatement**, submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MR. LOKAR**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MR. LOKAR's** criminal records check to the Board. The Board will not consider a request for reinstatement until **MR. LOKAR's** completed criminal records check, including the FBI check, is received by the Board.

5. Submit documentation of his full compliance with the requirements imposed by the Euclid Municipal Court in Case Number 17CRB00620.

Educational Requirements

6. Successfully complete and submit satisfactory documentation of successful completion of the following continuing education, or other comparable course(s) approved in advance by the Board or its designee: five (5) hours Anger Management, and two (2) hours Ohio Nursing Law and Rules. Continuing education required by this Order **does not meet the continuing education requirements for license renewal.**

Evaluations

7. **Within ninety (90) days immediately prior to requesting reinstatement, at MR. LOKAR's expense, obtain a mental health evaluation from a Board approved evaluator and provide the Board with complete documentation of such evaluation. Prior to the evaluation, MR. LOKAR shall provide the mental health evaluator with a copy of this Order and the Notice. MR. LOKAR shall execute releases to permit the mental health evaluator to obtain any information deemed appropriate and necessary for the evaluation. The mental health evaluator shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on MR. LOKAR's license, and a statement as to whether MR. LOKAR is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.**
8. Provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the mental health evaluator described above until released. Further, the Board may utilize the mental health evaluator's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on **MR. LOKAR's** license.
9. **Within ninety (90) days immediately prior to requesting reinstatement, at MR. LOKAR's expense, obtain a comprehensive physical examination by a Board approved physician for the purposes of evaluating MR. LOKAR's fitness for duty and safety to practice nursing as a registered nurse. This Board approved physician shall provide the Board with complete documentation of MR. LOKAR's comprehensive physical examination and with a comprehensive assessment regarding MR. LOKAR's fitness for duty and safety to practice nursing as a registered nurse. Prior to the examination, MR. LOKAR shall provide the Board approved physician with a copy of this Order and the Notice. MR. LOKAR shall execute releases to permit the Board approved physician performing the comprehensive physical examination, and assessment to obtain any information deemed appropriate and necessary for the assessment. The**

- evaluating physician shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on **MR. LOKAR's** license, and stating whether **MR. LOKAR** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
10. The Board may utilize the Board approved physician's recommendations and conclusions from the comprehensive physical examination and assessment as a basis for additional terms and restrictions on **MR. LOKAR's** license.
 11. **Within ninety (90) days immediately prior to requesting reinstatement**, at **MR. LOKAR's** expense, obtain a chemical dependency evaluation by a chemical dependency professional approved by the Board or its designee and, prior to the evaluation, provide the chemical dependency professional with a copy of this Order and the Notice. **MR. LOKAR** shall execute releases to permit the chemical dependency professional to obtain any information deemed appropriate and necessary for the evaluation. The chemical dependency professional shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on **MR. LOKAR's** license, and a statement as to whether **MR. LOKAR** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
 12. Provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the chemical dependency professional described above until released. Further, the Board may utilize the professional's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on **MR. LOKAR's** license.

Monitoring

13. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to him by another so authorized by law who has full knowledge of **MR. LOKAR's** history. **MR. LOKAR** shall self-administer the prescribed drugs only in the manner prescribed.
14. Abstain completely from the use of alcohol or any products containing alcohol.
15. **For a minimum, continuous period of one (1) year immediately prior to requesting reinstatement**, submit, at **MR. LOKAR's** expense and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Upon and after **MR. LOKAR's** initiation of drug screening, refusal to submit such specimen, or failure to submit such

specimen on the day he is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MR. LOKAR** shall be negative, except for substances prescribed, administered, or dispensed to him by another so authorized by law who has received a complete copy of this Order prior to prescribing for **MR. LOKAR**.

- a. **Prior** to initiating drug screening:
 - i. Provide a copy of this Order to all treating practitioners;
 - ii. Provide to the Board a list of all treating practitioners, including addresses and telephone numbers; and
 - iii. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MR. LOKAR**, **and** submit the report directly to the Board.

- b. **After** initiating drug screening, be under a **continuing duty** to:
 - i. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
 - ii. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;
 - iii. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and
 - iv. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MR. LOKAR** **and** submit the report directly to the Board.

16. **For a minimum, continuous period of one (1) year immediately prior to requesting reinstatement**, attend a minimum of one (1) meeting per week of a support or peer group meeting approved in advance by the Board, or a Twelve Step program, and provide satisfactory documentation of such attendance to the Board prior to reinstatement.

Reporting Requirements for Suspension Period

17. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.

18. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
19. Submit any and all information that the Board may request regarding **MR. LOKAR's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
20. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board.
21. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: monitoring@nursing.ohio.gov or by mail to:

**Compliance Unit
Ohio Board of Nursing
17 South High Street, Suite 660
Columbus, OH 43215-3466**

22. Verify that the reports and documentation required by this Order are received in the Board office.
23. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.
24. Submit to the Board a completed application for reinstatement on the form provided by the Board.

PROBATIONARY PERIOD

Following reinstatement, the suspension shall be stayed and **MR. LOKAR's** license shall be subject to Probationary Terms and Restrictions for a minimum period of three (3) years.

PROBATIONARY TERMS AND RESTRICTIONS

MR. LOKAR shall:

1. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
2. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
3. Submit documentation of his full compliance with the requirements imposed by the Euclid Municipal Court in Case Number 17CRB00620.

Monitoring

4. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to him by another so authorized by law who has full knowledge of **MR. LOKAR's** history. **MR. LOKAR** shall self-administer prescribed drugs only in the manner prescribed.
5. Abstain completely from the use of alcohol or any products containing alcohol.
6. Submit, at his expense, and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Refusal to submit such specimen, or failure to submit such specimen on the day he is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MR. LOKAR** shall be negative, except for substances prescribed, administered, or dispensed to him by another so authorized by law who has received a complete copy of this Order prior to prescribing for **MR. LOKAR**.

MR. LOKAR shall:

- a. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
 - b. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;
 - c. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and
 - d. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MR. LOKAR** *and* submit the report directly to the Board.
7. Attend a minimum of one (1) meeting per week of a support or peer group meeting approved in advance by the Board, or a Twelve Step program, and provide satisfactory documentation of such attendance to the Board every six (6) months.

Employment Conditions

8. **Upon the request of the Board or its designee, prior to working in a position where a license to practice nursing is required**, complete and submit satisfactory documentation of completion of a nurse refresher course or an extensive orientation approved in advance by the Board or its designee.
9. **Prior to accepting employment as a nurse**, each time with every employer, notify the Board, in writing. Any period during which **MR. LOKAR** does not work in a position within the State of Ohio for which a license to practice nursing is required **shall not count** toward fulfilling the probationary period imposed by this Order.
10. Be under a continuing duty to provide a copy of this Order to any new employer **prior to accepting employment as a nurse**.
11. Have current employer(s), if working in a position where a license to practice nursing is required, submit written reports regarding job performance **on a quarterly basis beginning within thirty (30) days of the effective date of this Order or beginning within thirty (30) days of working in a position as a nurse, whichever is later**.
12. Have current employer(s) send documentation to the Board, along with the first employer report, of receipt of a copy of this Order, including the date this Order was received.

Reporting Requirements for Probationary Period

13. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
14. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
15. Submit any and all information that the Board may request regarding **MR. LOKAR's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
16. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.
17. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: monitoring@nursing.ohio.gov or by mail to:

**Compliance Unit
Ohio Board of Nursing
17 South High Street, Suite 660
Columbus, OH 43215-3466**

18. Verify that the reports and documentation required by this Order are received in the Board office.
19. Inform the Board **within five (5) business days**, in writing, of any change in employment status or of any change in residential or home address or telephone number.

LICENSE RESTRICTIONS

In addition to Probationary Terms and Restrictions, MR. LOKAR's license is subject to the following License Restrictions:

Temporary Narcotic Restriction

MR. LOKAR shall not administer, have access to, or possess (except as prescribed for **MR. LOKAR's** use by another so authorized by law who has full knowledge of **MR. LOKAR's** history) any narcotics, other controlled substances, or mood altering drugs. In addition, **MR. LOKAR** shall not count narcotics or possess or carry any work keys for locked medication carts, cabinets, drawers, or containers. **MR. LOKAR** shall not call in or order prescriptions or prescription refills.

Temporary Practice Restrictions

MR. LOKAR shall not practice nursing as a registered nurse (1) in a patient's residence; (2) for staffing agencies or pools; (3) for an individual or group of individuals who directly engage **MR. LOKAR** to provide nursing services for fees, compensation, or other consideration or who engage **MR. LOKAR** as a volunteer; (4) as an independent contractor or for *locum tenens* assignments; (5) shall not provide nursing care to pediatric patients; and (6) shall not prescribe medication.

MR. LOKAR shall not function in a position or employment where the job duties or requirements involve management of nursing and nursing responsibilities, or supervising and evaluating nursing practice. Such positions include, but are not limited to, the following: Director of Nursing, Assistant Director of Nursing, Nurse Manager, Vice President of Nursing.

FAILURE TO COMPLY

The stay of **MR. LOKAR's** suspension shall be lifted and **MR. LOKAR's** license to practice nursing as a registered nurse will be automatically suspended if it

appears to the Board that **MR. LOKAR** has violated or breached any terms or conditions of this Order. Following the automatic suspension, the Board shall notify **MR. LOKAR** via certified mail of the specific nature of the charges and automatic suspension of **MR. LOKAR's** license. **MR. LOKAR** may request a hearing regarding the charges.

DURATION

The Board may only alter the probationary period imposed by this Order if: (1) the Board determines that **MR. LOKAR** has complied with all aspects of this Order; and (2) the Board determines that **MR. LOKAR** is able to practice nursing according to acceptable and prevailing standards of safe nursing care without Board monitoring, based upon an interview with **MR. LOKAR** and review of the reports as required herein.

As indicated above under Employment Conditions, any period during which **MR. LOKAR** does not work in a position within the State of Ohio for which a license to practice nursing is required shall not count toward fulfilling the probationary period imposed by this Order.

Motion adopted by a majority vote of the Board members present with Matthew Carle, Daniel Lehmann, Sandra Ranck and Patricia Sharpnack abstaining.

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September 2018.

Neu, Frances C., R.N. 162372 (CASE #18-1269)

Action: It was moved by Erin Keels, seconded by Sandra Beidelschies, that upon consideration of the charges stated against **FRANCES C. NEU** in the Notice of Opportunity for Hearing (Notice) and evidence supporting the charges, the Board find that **MS. NEU** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice, and that **MS. NEU's** license to practice nursing as a registered nurse be **PERMANENTLY REVOKED**.

Motion adopted by a majority vote of the Board members present with Matthew Carle, Daniel Lehmann and Sandra Ranck abstaining.

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September 2018.

Stamler, Tatum E., P.N. 134463 (CASE #18-0335)

Action: It was moved by Barbara Douglas, seconded by Deborah Knueve, that upon consideration of the charges stated against **TATUM E. STAMLER** in the Notice of Opportunity for Hearing (Notice) and evidence supporting the charges, the Board find that **MS. STAMLER** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice, and that

MS. STAMLER's license to practice nursing as a licensed practical nurse be suspended for an indefinite period of time with the conditions for reinstatement set forth below, and following reinstatement, **MS. STAMLER's** license to practice nursing as a licensed practical nurse shall be subject to a stayed suspension under the probationary terms and restrictions set forth below for a minimum period of two (2) years.

SUSPENSION OF LICENSE

MS. STAMLER's license is suspended for an indefinite period of time.

The Board may reinstate **MS. STAMLER's** license if **MS. STAMLER** submits a written request for reinstatement and is determined by the Board or its designee to have complied with the Conditions for Reinstatement.

CONDITIONS FOR REINSTATEMENT

MS. STAMLER shall:

1. Be determined, by the Board or its designee, to be able to practice nursing according to acceptable and prevailing standards of safe nursing care based upon an interview and review of the documentation specified in this Order.
2. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
3. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
4. **Within ninety (90) days immediately prior to requesting reinstatement,** submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MS. STAMLER**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MS. STAMLER's** criminal records check to the Board. The Board will not consider a request for reinstatement until **MS. STAMLER's** completed criminal records check, including the FBI check, is received by the Board.
5. Pay a fine of five hundred dollars (\$500.00), payable: online by credit or debit card; or payable to the "Treasurer, State of Ohio," by certified check, cashier check, or money order mailed to the attention of the Compliance Unit, Ohio Board of Nursing, 17 South High Street, Suite 660, Columbus, OH 43215-3466.
6. Submit documentation of her full compliance with the requirements imposed by the Warren County Court of Common Pleas in Case Number

15CR30850.

Reporting Requirements for Suspension Period

7. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
8. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
9. Submit any and all information that the Board may request regarding **MS. STAMLER's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
10. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board.
11. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: monitoring@nursing.ohio.gov or by mail to:

**Compliance Unit
Ohio Board of Nursing
17 South High Street, Suite 660
Columbus, OH 43215-3466**

12. Verify that the reports and documentation required by this Order are received in the Board office.
13. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.
14. Submit to the Board a completed application for reinstatement on the form provided by the Board.

PROBATIONARY PERIOD

Following reinstatement, the suspension shall be stayed and **MS. STAMLER's** license shall be subject to Probationary Terms and Restrictions for a minimum period of two (2) years.

PROBATIONARY TERMS AND RESTRICTIONS

MS. STAMLER shall:

1. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.

2. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
3. Submit documentation of her full compliance with the requirements imposed by the Warren County Court of Common Pleas in Case Number 15CR30850.

Employment Conditions

4. **Upon the request of the Board or its designee, prior to working in a position where a license to practice nursing is required**, complete and submit satisfactory documentation of completion of a nurse refresher course or an extensive orientation approved in advance by the Board or its designee.
5. **Prior to accepting employment as a nurse**, each time with every employer, notify the Board, in writing. Any period during which **MS. STAMLER** does not work in a position within the State of Ohio for which a license to practice nursing is required **shall not count** toward fulfilling the probationary period imposed by this Order.
6. Be under a continuing duty to provide a copy of this Order to any new employer **prior to accepting employment as a nurse**.
7. Have current employer(s), if working in a position where a license to practice nursing is required, submit written reports regarding job performance **on a quarterly basis beginning within thirty (30) days of the effective date of this Order or beginning within thirty (30) days of working in a position as a nurse, whichever is later**.
8. Have current employer(s) send documentation to the Board, along with the first employer report, of receipt of a copy of this Order, including the date this Order was received.

Reporting Requirements for Probationary Period

9. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
10. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
11. Submit any and all information that the Board may request regarding **MS. STAMLER's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.

12. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.
13. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: monitoring@nursing.ohio.gov or by mail to:

**Compliance Unit
Ohio Board of Nursing
17 South High Street, Suite 660
Columbus, OH 43215-3466**

14. Verify that the reports and documentation required by this Order are received in the Board office.
15. Inform the Board **within five (5) business days**, in writing, of any change in employment status or of any change in residential or home address or telephone number.

FAILURE TO COMPLY

The stay of **MS. STAMLER's** suspension shall be lifted and **MS. STAMLER's** license to practice nursing as a licensed practical nurse will be automatically suspended if it appears to the Board that **MS. STAMLER** has violated or breached any terms or conditions of this Order. Following the automatic suspension, the Board shall notify **MS. STAMLER** via certified mail of the specific nature of the charges and automatic suspension of **MS. STAMLER's** license. **MS. STAMLER** may request a hearing regarding the charges.

DURATION

The Board may only alter the probationary period imposed by this Order if: (1) the Board determines that **MS. STAMLER** has complied with all aspects of this Order; and (2) the Board determines that **MS. STAMLER** is able to practice nursing according to acceptable and prevailing standards of safe nursing care without Board monitoring, based upon an interview with **MS. STAMLER** and review of the reports as required herein.

As indicated above under Employment Conditions, any period during which **MS. STAMLER** does not work in a position within the State of Ohio for which a license to practice nursing is required shall not count toward fulfilling the probationary period imposed by this Order.

Nancy Fellows voted no. Motion adopted by a majority vote of the Board members present with Matthew Carle, Daniel Lehmann and Sandra Ranck abstaining.

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September 2018.

Unger, Jacqueline Helene, R.N. 216315 (CASE #18-0641)

Action: It was moved by Patricia Sharpnack, seconded by Deborah Knueve, that upon consideration of the charges stated against **JACQUELINE HELENE UNGER** in the Notice of Automatic Suspension and Opportunity for Hearing (Notice) and evidence supporting the charges, the Board find that **MS. UNGER** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice, and that **MS. UNGER's** license to practice nursing as a registered nurse be suspended for an indefinite period of time with the conditions for reinstatement set forth below, and following reinstatement, **MS. UNGER's** license to practice nursing as a registered nurse shall be subject to a stayed suspension under the probationary terms and restrictions set forth below for a minimum period of two (2) years including the **Temporary Narcotic and Temporary Practice Restrictions**, set forth below.

SUSPENSION OF LICENSE

MS. UNGER's license is suspended for an indefinite period of time.

The Board may reinstate **MS. UNGER's** license if **MS. UNGER** submits a written request for reinstatement and is determined by the Board or its designee to have complied with the Conditions for Reinstatement.

CONDITIONS FOR REINSTATEMENT

MS. UNGER shall:

1. Be determined, by the Board or its designee, to be able to practice nursing according to acceptable and prevailing standards of safe nursing care based upon an interview and review of the documentation specified in this Order.
2. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
3. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
4. **Within ninety (90) days immediately prior to requesting reinstatement**, submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MS. UNGER**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MS. UNGER's** criminal records check to the Board. The Board will not consider a request for reinstatement until **MS. UNGER's** completed criminal records check, including the FBI check, is received by

the Board.

5. Pay a fine of five hundred dollars (\$500.00), payable: online by credit or debit card; or payable to the "Treasurer, State of Ohio," by certified check, cashier check, or money order mailed to the attention of the Compliance Unit, Ohio Board of Nursing, 17 South High Street, Suite 660, Columbus, OH 43215-3466.

Evaluations

6. **Within ninety (90) days immediately prior to requesting reinstatement**, at **MS. UNGER's** expense, obtain a chemical dependency evaluation by a chemical dependency professional approved by the Board or its designee and, prior to the evaluation, provide the chemical dependency professional with a copy of this Order and the Notice. **MS. UNGER** shall execute releases to permit the chemical dependency professional to obtain any information deemed appropriate and necessary for the evaluation. The chemical dependency professional shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on **MS. UNGER's** license, and a statement as to whether **MS. UNGER** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
7. Provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the chemical dependency professional described above until released. Further, the Board may utilize the professional's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on **MS. UNGER's** license.

Monitoring

8. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. UNGER's** history. **MS. UNGER** shall self-administer the prescribed drugs only in the manner prescribed.
9. Abstain completely from the use of alcohol or any products containing alcohol.
10. **Within ninety (90) days immediately prior to requesting reinstatement**, submit, at **MS. UNGER's** expense and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Upon and after **MS. UNGER's** initiation of drug screening, refusal to submit such specimen, or failure to submit such specimen on the day she is selected, or in such a manner as the Board may request, shall constitute a violation of

a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MS. UNGER** shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who has received a complete copy of this Order prior to prescribing for **MS. UNGER**.

a. **Prior** to initiating drug screening:

- i. Provide a copy of this Order to all treating practitioners;
- ii. Provide to the Board a list of all treating practitioners, including addresses and telephone numbers; and
- iii. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. UNGER**, **and** submit the report directly to the Board.

b. **After** initiating drug screening, be under a **continuing duty** to:

- i. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
- ii. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;
- iii. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and
- iv. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. UNGER** **and** submit the report directly to the Board.

11. **Prior to requesting reinstatement**, begin attending a minimum of one (1) meeting per week of a support or peer group meeting approved in advance by the Board, or a Twelve Step program, and provide satisfactory documentation of such attendance to the Board prior to reinstatement.

Reporting Requirements for Suspension Period

12. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.

13. Sign release of information forms allowing health professionals and other

organizations to submit the requested documentation directly to the Board.

14. Submit any and all information that the Board may request regarding **MS. UNGER's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
15. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board.
16. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: monitoring@nursing.ohio.gov or by mail to:

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Ohio Board of Nursing
17 South High Street, Suite 660
Columbus, OH 43215-3466**

17. Verify that the reports and documentation required by this Order are received in the Board office.
18. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.
19. Submit to the Board a completed application for reinstatement on the form provided by the Board.

PROBATIONARY PERIOD

Following reinstatement, the suspension shall be stayed and **MS. UNGER's** license shall be subject to Probationary Terms and Restrictions for a minimum period of two (2) years.

PROBATIONARY TERMS AND RESTRICTIONS

MS. UNGER shall:

1. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
2. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.

Monitoring

3. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by

- law who has full knowledge of **MS. UNGER's** history. **MS. UNGER** shall self-administer prescribed drugs only in the manner prescribed.
4. Abstain completely from the use of alcohol or any products containing alcohol.
 5. Submit, at her expense, and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Refusal to submit such specimen, or failure to submit such specimen on the day she is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MS. UNGER** shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who has received a complete copy of this Order prior to prescribing for **MS. UNGER**.

MS. UNGER shall:

- a. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
 - b. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;
 - c. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and
 - d. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. UNGER** *and* submit the report directly to the Board.
6. Attend a minimum of one (1) meeting per week of a support or peer group meeting approved in advance by the Board, or a Twelve Step program, and provide satisfactory documentation of such attendance to the Board every six (6) months.

Employment Conditions

7. **Upon the request of the Board or its designee, prior to working in a position where a license to practice nursing is required**, complete and submit satisfactory documentation of completion of a nurse refresher course or an extensive orientation approved in advance by the Board or its designee.

8. **Prior to accepting employment as a nurse**, each time with every employer, notify the Board, in writing. Any period during which **MS. UNGER** does not work in a position within the State of Ohio for which a license to practice nursing is required **shall not count** toward fulfilling the probationary period imposed by this Order.
9. Be under a continuing duty to provide a copy of this Order to any new employer **prior to accepting employment as a nurse**.
10. Have current employer(s), if working in a position where a license to practice nursing is required, submit written reports regarding job performance **on a quarterly basis beginning within thirty (30) days of the effective date of this Order or beginning within thirty (30) days of working in a position as a nurse, whichever is later**.
11. Have current employer(s) send documentation to the Board, along with the first employer report, of receipt of a copy of this Order, including the date this Order was received.

Reporting Requirements for Probationary Period

12. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
13. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
14. Submit any and all information that the Board may request regarding **MS. UNGER's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
15. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.
16. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: monitoring@nursing.ohio.gov or by mail to:

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17 South High Street, Suite 660
Columbus, OH 43215-3466**

17. Verify that the reports and documentation required by this Order are received in the Board office.

18. Inform the Board **within five (5) business days**, in writing, of any change in employment status or of any change in residential or home address or telephone number.

LICENSE RESTRICTIONS

In addition to Probationary Terms and Restrictions, MS. UNGER's license is subject to the following License Restrictions:

Temporary Narcotic Restriction

MS. UNGER shall not administer, have access to, or possess (except as prescribed for **MS. UNGER's** use by another so authorized by law who has full knowledge of **MS. UNGER's** history) any narcotics, other controlled substances, or mood altering drugs. In addition, **MS. UNGER** shall not count narcotics or possess or carry any work keys for locked medication carts, cabinets, drawers, or containers. **MS. UNGER** shall not call in or order prescriptions or prescription refills.

Temporary Practice Restrictions

MS. UNGER shall not practice nursing as a registered nurse (1) in a patient's residence; (2) for staffing agencies or pools; (3) for an individual or group of individuals who directly engage **MS. UNGER** to provide nursing services for fees, compensation, or other consideration or who engage **MS. UNGER** as a volunteer; or (4) as an independent contractor or for *locum tenens* assignments.

MS. UNGER shall not function in a position or employment where the job duties or requirements involve management of nursing and nursing responsibilities, or supervising and evaluating nursing practice. Such positions include, but are not limited to, the following: Director of Nursing, Assistant Director of Nursing, Nurse Manager, Vice President of Nursing.

FAILURE TO COMPLY

The stay of **MS. UNGER's** suspension shall be lifted and **MS. UNGER's** license to practice nursing as a registered nurse will be automatically suspended if it appears to the Board that **MS. UNGER** has violated or breached any terms or conditions of this Order. Following the automatic suspension, the Board shall notify **MS. UNGER** via certified mail of the specific nature of the charges and automatic suspension of **MS. UNGER's** license. **MS. UNGER** may request a hearing regarding the charges.

DURATION

The Board may only alter the probationary period imposed by this Order if: (1) the Board determines that **MS. UNGER** has complied with all aspects of this Order; and (2) the Board determines that **MS. UNGER** is able to practice nursing according to acceptable and prevailing standards of safe nursing care without Board monitoring, based upon an interview with **MS. UNGER** and review of the reports as required herein.

As indicated above under Employment Conditions, any period during which **MS. UNGER** does not work in a position within the State of Ohio for which a license to practice nursing is required shall not count toward fulfilling the probationary period imposed by this Order.

Motion adopted by a majority vote of the Board members present with Matthew Carle, Daniel Lehmann, Sandra Ranck and Joanna Ridgeway abstaining.

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September 2018.

Wills, Jessica I., P.N. 134981 (CASE #18-0415)

Action: It was moved by Nancy Fellows, seconded by Barbara Douglas, that upon consideration of the charges stated against **JESSICA I. WILLS** in the Notice of Opportunity for Hearing (Notice) and evidence supporting the charges, the Board find that **MS. WILLS** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice, and that **MS. WILLS's** license to practice nursing as a licensed practical nurse be suspended and that the suspension is stayed subject to the probationary terms and restrictions set forth below for a minimum period of two (2) years.

PROBATIONARY PERIOD

MS. WILLS's license shall be subject to Probationary Terms and Restrictions for a minimum period of two (2) years.

PROBATIONARY TERMS AND RESTRICTIONS

MS. WILLS shall:

1. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
2. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
3. Submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MS. WILLS**, including a check

of Federal Bureau of Investigation (FBI) records, and request that BCII submit **MS. WILLIS's** criminal records check to the Board. **MS. WILLIS's** completed criminal records check, including the FBI check, must be received by the Board **within ninety (90) days following the effective date of this Order.**

Educational Requirements

4. **Within six (6) months of the effective date of this Order**, successfully complete and submit satisfactory documentation of successful completion of the following continuing education, or other comparable course(s) approved in advance by the Board or its designee: five (5) hours Ethics, and two (2) hours Ohio Nursing Law and Rules. Continuing education required by this Order **does not meet the continuing education requirements for license renewal.**

Evaluations

5. **Within ninety (90) days of the execution of the probationary period**, at **MS. WILLIS's** expense, obtain a mental health evaluation from a Board approved evaluator and provide the Board with complete documentation of such evaluation. Prior to the evaluation, **MS. WILLIS** shall provide the mental health evaluator with a copy of this Order and the Notice. **MS. WILLIS** shall execute releases to permit the mental health evaluator to obtain any information deemed appropriate and necessary for the evaluation. The mental health evaluator shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on **MS. WILLIS's** license, and a statement as to whether **MS. WILLIS** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
6. Provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the mental health evaluator described above until released. Further, the Board may utilize the mental health evaluator's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on **MS. WILLIS's** license.
7. **Within ninety (90) days of the execution of the probationary period**, at **MS. WILLIS's** expense, obtain a chemical dependency evaluation by a chemical dependency professional approved by the Board or its designee and, prior to the evaluation, provide the chemical dependency professional with a copy of this Order and the Notice. **MS. WILLIS** shall execute releases to permit the chemical dependency professional to obtain any information deemed appropriate and necessary for the evaluation. The chemical dependency professional shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any

additional restrictions that should be placed on **MS. WILLS's** license, and a statement as to whether **MS. WILLS** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.

8. Provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the chemical dependency professional described above until released. Further, the Board may utilize the professional's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on **MS. WILLS's** license.

Monitoring

9. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. WILLS's** history. **MS. WILLS** shall self-administer prescribed drugs only in the manner prescribed.
10. **Within ninety (90) days of the effective date of this Order**, begin submitting, at **MS. WILLS's** expense and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Upon and after **MS. WILLS's** initiation of drug screening, refusal to submit such specimen, or failure to submit such specimen on the day she is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MS. WILLS** shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who has received a complete copy of this Order prior to prescribing for **MS. WILLS**.
 - a. ***Prior*** to initiating drug screening:
 - i. Provide a copy of this Order to all treating practitioners;
 - ii. Provide to the Board a list of all treating practitioners, including addresses and telephone numbers; and
 - iii. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. WILLS**, ***and*** submit the report directly to the Board.
 - b. ***After*** initiating drug screening, be under a ***continuing duty*** to:
 - i. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;

- ii. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;
- iii. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and
- iv. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. WILLIS** and submit the report directly to the Board.

Employment Conditions

11. **Upon the request of the Board or its designee**, complete and submit satisfactory documentation of completion of a nurse refresher course or an extensive orientation approved in advance by the Board or its designee.
12. Notify the Board, in writing, of the name and address of any current employer **within thirty (30) days following the effective date of this Order**, or any new employer prior to accepting nursing employment. Any period during which **MS. WILLIS** does not work in a position within the State of Ohio for which a license to practice nursing is required **shall not count** toward fulfilling the probationary period imposed by this Order.
13. **Within fifteen (15) days of the effective date of this Order**, provide her current employer(s) with a copy of this Order, if working in a position in which a nursing license is required. **MS. WILLIS** is under a continuing duty to provide a copy of this Order to any new employer **prior to accepting employment as a nurse**.
14. Have current employer(s), if working in a position where a license to practice nursing is required, submit written reports regarding job performance **on a quarterly basis beginning within thirty (30) days of the effective date of this Order or beginning within thirty (30) days of working in a position as a nurse, whichever is later**.
15. Have current employer(s) send documentation to the Board, along with the first employer report, of receipt of a copy of this Order, including the date this Order was received.

Reporting Requirements for Probationary Period

16. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.

17. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
18. Submit any and all information that the Board may request regarding **MS. WILLS's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
19. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.
20. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: monitoring@nursing.ohio.gov or by mail to:

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21. Verify that the reports and documentation required by this Order are received in the Board office.
22. Inform the Board **within five (5) business days**, in writing, of any change in employment status or of any change in residential or home address or telephone number.

FAILURE TO COMPLY

The stay of **MS. WILLS's** suspension shall be lifted and **MS. WILLS's** license to practice nursing as a licensed practical nurse will be automatically suspended if it appears to the Board that **MS. WILLS** has violated or breached any terms or conditions of this Order. Following the automatic suspension, the Board shall notify **MS. WILLS** via certified mail of the specific nature of the charges and automatic suspension of **MS. WILLS's** license. **MS. WILLS** may request a hearing regarding the charges.

DURATION

The Board may only alter the probationary period imposed by this Order if: (1) the Board determines that **MS. WILLS** has complied with all aspects of this Order; and (2) the Board determines that **MS. WILLS** is able to practice nursing according to acceptable and prevailing standards of safe nursing care without Board monitoring, based upon an interview with **MS. WILLS** and review of the reports as required herein.

As indicated above under Employment Conditions, any period during which **MS.**

WILLS does not work in a position within the State of Ohio for which a license to practice nursing is required shall not count toward fulfilling the probationary period imposed by this Order.

Motion adopted by a majority vote of the Board members present with Matthew Carle, Daniel Lehmann and Sandra Ranck abstaining.

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September 2018.

Todd, Teia M., P.N. 139597 (CASE #18-0611)

Action: It was moved by Patricia Sharpnack, seconded by Deborah Knueve, that upon consideration of the charges stated against **TEIA M. TODD** in the Notice of Opportunity for Hearing (Notice) and evidence supporting the charges, the Board find that **MS. TODD** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice, and that **MS. TODD's** license to practice nursing as a licensed practical nurse be suspended and that the suspension is stayed subject to the probationary terms and restrictions set forth below for a minimum period of three (3) years including the **Permanent Practice and Financial Restrictions**, set forth below.

PROBATIONARY PERIOD

MS. TODD's license shall be subject to Probationary Terms and Restrictions for a minimum period of three (3) years.

PROBATIONARY TERMS AND RESTRICTIONS

MS. TODD shall:

1. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
2. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
3. Submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MS. TODD**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MS. TODD's** criminal records check to the Board. **MS. TODD's** completed criminal records check, including the FBI check, must be received by the Board **within ninety (90) days of the effective date of this Order**.
4. Submit documentation of her full compliance with the requirements imposed by the Franklin County Court of Common Pleas in Case Number 17CR 3908.

Educational Requirements

5. **Within six (6) months of the effective date of this Order**, successfully complete and submit satisfactory documentation of successful completion of the following continuing education, or other comparable course(s) approved in advance by the Board or its designee: four (4) hours Professional Accountability and Legal Liability for Nurses, five (5) hours Ethics, five (5) hours Record Keeping, and two (2) hours Ohio Nursing Law and Rules. Continuing education required by this Order **does not meet the continuing education requirements for license renewal**.

Employment Conditions

6. **Upon the request of the Board or its designee**, complete and submit satisfactory documentation of completion of a nurse refresher course or an extensive orientation approved in advance by the Board or its designee.
7. Notify the Board, in writing, of the name and address of any current employer **within thirty (30) days following the effective date of this Order**, or any new employer **prior to accepting nursing employment**. Any period during which **MS. TODD** does not work in a position within the State of Ohio for which a license to practice nursing is required **shall not count** toward fulfilling the probationary period imposed by this Order.
8. **Within fifteen (15) days of the effective date of this Order**, provide her current employer(s) with a copy of this Order, if working in a position in which a nursing license is required. **MS. TODD** is under a continuing duty to provide a copy of this Order to any new employer(s) **prior to accepting employment as a nurse**.
9. Have current employer(s), if working in a position where a license to practice nursing is required, submit written reports regarding job performance **on a quarterly basis beginning within thirty (30) days of the effective date of this Order or beginning within thirty (30) days of working in a position as a nurse, whichever is later**.
10. Have current employer(s) send documentation to the Board, along with the first employer report, of receipt of a copy of this Order, including the date this Order was received.

Reporting Requirements for Probationary Period

11. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.

12. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
13. Submit any and all information that the Board may request regarding **MS. TODD's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
14. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.
15. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: monitoring@nursing.ohio.gov or by mail to:

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Ohio Board of Nursing
17 South High Street, Suite 660
Columbus, OH 43215-3466**

16. Verify that the reports and documentation required by this Order are received in the Board office.
17. Inform the Board **within five (5) business days**, in writing, of any change in employment status or of any change in residential or home address or telephone number.

LICENSE RESTRICTIONS

In addition to Probationary Terms and Restrictions, MS. TODD's license is subject to the following License Restrictions:

Permanent Practice Restrictions

MS. TODD shall not practice nursing as a licensed practical nurse (1) in a patient's residence; (2) for staffing agencies or pools; (3) for an individual or group of individuals who directly engage **MS. TODD** to provide nursing services for fees, compensation, or other consideration or who engage **MS. TODD** as a volunteer; or (4) as an independent contractor or for *locum tenens* assignments.

MS. TODD shall not function in a position or employment where the job duties or requirements involve management of nursing and nursing responsibilities. Such positions include, but are not limited to, the following: Director of Nursing, Assistant Director of Nursing, Nurse Manager, Vice President of Nursing.

MS. TODD shall not be involved in financial activities or supervise financial activities in any position that requires a license as a licensed practical nurse.

FAILURE TO COMPLY

The stay of **MS. TODD's** suspension shall be lifted and **MS. TODD's** license to practice nursing as a licensed practical nurse will be automatically suspended if it appears to the Board that **MS. TODD** has violated or breached any terms or conditions of this Order. Following the automatic suspension, the Board shall notify **MS. TODD** via certified mail of the specific nature of the charges and automatic suspension of **MS. TODD's** license. **MS. TODD** may request a hearing regarding the charges.

DURATION

The Board may only alter the probationary period imposed by this Order if: (1) the Board determines that **MS. TODD** has complied with all aspects of this Order; and (2) the Board determines that **MS. TODD** is able to practice nursing according to acceptable and prevailing standards of safe nursing care without Board monitoring, based upon an interview with **MS. TODD** and review of the reports as required herein.

As indicated above under Employment Conditions, any period during which **MS. TODD** does not work in a position within the State of Ohio for which a license to practice nursing is required shall not count toward fulfilling the probationary period imposed by this Order.

Motion adopted by a majority vote of the Board members present with Matthew Carle, Daniel Lehmann and Sandra Ranck abstaining.

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September 2018.

Hubler, Regina S. (aka "Regina S. Nickell; Regina Young-Hubler"), R.N. 423376 (CASE #16-3093)

Action: It was moved by Deborah Knueve, seconded by Barbara Douglas, that upon Upon consideration of the charges stated against **REGINA S. HUBLER** in the Notice of Opportunity for Hearing (Notice) and evidence supporting the charges, the Board find that **MS. HUBLER** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice, and that **MS. HUBLER's** license to practice nursing as a registered nurse be suspended and that the suspension is stayed subject to the probationary terms and restrictions set forth below for a minimum period of eighteen (18) months including the **Temporary Practice Restrictions**, set forth below.

PROBATIONARY PERIOD

MS. HUBLER's license shall be subject to Probationary Terms and Restrictions for a minimum period of eighteen (18) months.

PROBATIONARY TERMS AND RESTRICTIONS

MS. HUBLER shall:

1. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
2. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
3. Submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MS. HUBLER**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MS. HUBLER's** criminal records check to the Board. **MS. HUBLER's** completed criminal records check, including the FBI check, must be received by the Board **within ninety (90) days of the effective date of this Order.**

Educational Requirements

4. **Within six (6) months of the effective date of this Order**, successfully complete and submit satisfactory documentation of successful completion of the following continuing education, or other comparable course(s) approved in advance by the Board or its designee: five (5) hours Substance Use Disorder, four (4) hours Professional Accountability & Legal Liability, and two (2) hours Ohio Nursing Law and Rules. Continuing education required by this Order **does not meet the continuing education requirements for license renewal.**

Evaluations

5. **Within ninety (90) days of the execution of the probationary period**, at **MS. HUBLER's** expense, obtain a chemical dependency evaluation by a chemical dependency professional approved by the Board or its designee and, prior to the evaluation, provide the chemical dependency professional with a copy of this Order and the Notice. **MS. HUBLER** shall execute releases to permit the chemical dependency professional to obtain any information deemed appropriate and necessary for the evaluation. The chemical dependency professional shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on **MS. HUBLER's** license, and a statement as to whether **MS. HUBLER** is capable

of practicing nursing according to acceptable and prevailing standards of safe nursing care.

6. Provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the chemical dependency professional described above until released. Further, the Board may utilize the professional's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on **MS. HUBLER's** license.

Monitoring

7. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. HUBLER's** history. **MS. HUBLER** shall self-administer prescribed drugs only in the manner prescribed.
8. Abstain completely from the use of alcohol or any products containing alcohol.
9. **Within ninety (90) days of the effective date of this Order**, begin submitting, at **MS. HUBLER's** expense and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Upon and after **MS. HUBLER's** initiation of drug screening, refusal to submit such specimen, or failure to submit such specimen on the day she is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MS. HUBLER** shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who has received a complete copy of this Order prior to prescribing for **MS. HUBLER**.
 - a. **Prior** to initiating drug screening:
 - i. Provide a copy of this Order to all treating practitioners;
 - ii. Provide to the Board a list of all treating practitioners, including addresses and telephone numbers; and
 - iii. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. HUBLER**, **and** submit the report directly to the Board.
 - b. **After** initiating drug screening, be under a **continuing duty** to:

- i. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
- ii. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;
- iii. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and
- iv. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. HUBLER** and submit the report directly to the Board.

Employment Conditions

10. **Upon the request of the Board or its designee**, complete and submit satisfactory documentation of completion of a nurse refresher course or an extensive orientation approved in advance by the Board or its designee.
11. Notify the Board, in writing, of the name and address of any current employer **within thirty (30) days following the effective date of this Order**, or any new employer **prior to accepting nursing employment**. Any period during which **MS. HUBLER** does not work in a position within the State of Ohio for which a license to practice nursing is required **shall not count** toward fulfilling the probationary period imposed by this Order.
12. **Within fifteen (15) days of the effective date of this Order**, provide her current employer(s) with a copy of this Order, if working in a position in which a nursing license is required. **MS. HUBLER** is under a continuing duty to provide a copy of this Order to any new employer(s) **prior to accepting employment as a nurse**.
13. Have current employer(s), if working in a position where a license to practice nursing is required, submit written reports regarding job performance **on a quarterly basis beginning within thirty (30) days of the effective date of this Order or beginning within thirty (30) days of working in a position as a nurse, whichever is later**.
14. Have current employer(s) send documentation to the Board, along with the first employer report, of receipt of a copy of this Order, including the date this Order was received.

Reporting Requirements for Probationary Period

15. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
16. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
17. Submit any and all information that the Board may request regarding **MS. HUBLER's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
18. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.
19. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: monitoring@nursing.ohio.gov or by mail to:

**Compliance Unit
Ohio Board of Nursing
17 South High Street, Suite 660
Columbus, OH 43215-3466**

20. Verify that the reports and documentation required by this Order are received in the Board office.
21. Inform the Board **within five (5) business days**, in writing, of any change in employment status or of any change in residential or home address or telephone number.

LICENSE RESTRICTIONS

In addition to Probationary Terms and Restrictions, MS. HUBLER's license is subject to the following License Restrictions:

Temporary Practice Restrictions

MS. HUBLER shall not practice nursing as a registered nurse (1) in a patient's residence; (2) for staffing agencies or pools; (3) for an individual or group of individuals who directly engage **MS. HUBLER** to provide nursing services for fees, compensation, or other consideration or who engage **MS. HUBLER** as a volunteer; or (4) as an independent contractor or for *locum tenens* assignments.

MS. HUBLER shall not function in a position or employment where the job duties or requirements involve management of nursing and nursing responsibilities, or supervising and evaluating nursing practice. Such positions include, but are not limited to, the following: Director of Nursing, Assistant Director of Nursing, Nurse

Manager, Vice President of Nursing.

FAILURE TO COMPLY

The stay of **MS. HUBLER's** suspension shall be lifted and **MS. HUBLER's** license to practice nursing as a registered nurse will be automatically suspended if it appears to the Board that **MS. HUBLER** has violated or breached any terms or conditions of this Order. Following the automatic suspension, the Board shall notify **MS. HUBLER** via certified mail of the specific nature of the charges and automatic suspension of **MS. HUBLER's** license. **MS. HUBLER** may request a hearing regarding the charges.

DURATION

The Board may only alter the probationary period imposed by this Order if: (1) the Board determines that **MS. HUBLER** has complied with all aspects of this Order; and (2) the Board determines that **MS. HUBLER** is able to practice nursing according to acceptable and prevailing standards of safe nursing care without Board monitoring, based upon an interview with **MS. HUBLER** and review of the reports as required herein.

As indicated above under Employment Conditions, any period during which **MS. HUBLER** does not work in a position within the State of Ohio for which a license to practice nursing is required shall not count toward fulfilling the probationary period imposed by this Order.

Motion adopted by a majority vote of the Board members present with Matthew Carle, Daniel Lehmann and Sandra Ranck abstaining.

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September 2018.

Ruiz, Megan M. (aka "Megan Smith"), P.N. 101531 (CASE #17-1817)

Action: It was moved by Patricia Sharpnack, seconded by Brenda Boggs, that upon consideration of the charges stated against **MEGAN M. RUIZ** in the Notice of Immediate Suspension and Opportunity for Hearing (Notice) and evidence supporting the charges, the Board find that **MS. RUIZ** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notice, and that **MS. RUIZ's** license to practice nursing as a licensed practical nurse be suspended for an indefinite period of time but not less than two (2) years with the conditions for reinstatement set forth below, and following reinstatement, **MS. RUIZ's** license to practice nursing as a licensed practical nurse shall be subject to a stayed suspension under the probationary terms and restrictions set forth below for a minimum period of three (3) years including the **Temporary Narcotic and Permanent Practice Restrictions**, set forth below.

SUSPENSION OF LICENSE

MS. RUIZ's license is suspended for an indefinite period of time but not less than two (2) years.

The Board may reinstate **MS. RUIZ's** license if **MS. RUIZ** submits a written request for reinstatement and is determined by the Board or its designee to have complied with the Conditions for Reinstatement.

CONDITIONS FOR REINSTATEMENT

MS. RUIZ shall:

1. Be determined, by the Board or its designee, to be able to practice nursing according to acceptable and prevailing standards of safe nursing care based upon an interview and review of the documentation specified in this Order.
2. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
3. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
4. **Within ninety (90) days immediately prior to requesting reinstatement**, submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MS. RUIZ**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MS. RUIZ's** criminal records check to the Board. The Board will not consider a request for reinstatement until **MS. RUIZ's** completed criminal records check, including the FBI check, is received by the Board.

Educational Requirements

5. Successfully complete and submit satisfactory documentation of successful completion of the following continuing education, or other comparable course(s) approved in advance by the Board or its designee: five (5) hours Substance Use Disorder, and two (2) hours Ohio Nursing Law and Rules. Continuing education required by this Order **does not meet the continuing education requirements for license renewal.**

Evaluations

6. **Within ninety (90) days immediately prior to requesting reinstatement**, at **MS. RUIZ's** expense, obtain a mental health evaluation from a Board approved evaluator and provide the Board with complete documentation of such evaluation. Prior to the evaluation, **MS. RUIZ** shall provide the mental

- health evaluator with a copy of this Order and the Notice. **MS. RUIZ** shall execute releases to permit the mental health evaluator to obtain any information deemed appropriate and necessary for the evaluation. The mental health evaluator shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on **MS. RUIZ's** license, and a statement as to whether **MS. RUIZ** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
7. Provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the mental health evaluator described above until released. Further, the Board may utilize the mental health evaluator's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on **MS. RUIZ's** license.
 8. **Within ninety (90) days immediately prior to requesting reinstatement**, at **MS. RUIZ's** expense, obtain a chemical dependency evaluation by a chemical dependency professional approved by the Board or its designee and, prior to the evaluation, provide the chemical dependency professional with a copy of this Order and the Notice. **MS. RUIZ** shall execute releases to permit the chemical dependency professional to obtain any information deemed appropriate and necessary for the evaluation. The chemical dependency professional shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on **MS. RUIZ's** license, and a statement as to whether **MS. RUIZ** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
 9. Provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the chemical dependency professional described above until released. Further, the Board may utilize the professional's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on **MS. RUIZ's** license.

Monitoring

10. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. RUIZ's** history. **MS. RUIZ** shall self-administer the prescribed drugs only in the manner prescribed.
11. Abstain completely from the use of alcohol or any products containing alcohol.
12. **For a minimum, continuous period of one (1) year immediately prior to requesting reinstatement**, submit, at **MS. RUIZ's** expense and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol

analysis at a collection site specified by the Board at such times as the Board may request. Upon and after **MS. RUIZ's** initiation of drug screening, refusal to submit such specimen, or failure to submit such specimen on the day she is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MS. RUIZ** shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who has received a complete copy of this Order prior to prescribing for **MS. RUIZ**.

a. **Prior** to initiating drug screening:

- i. Provide a copy of this Order to all treating practitioners;
- ii. Provide to the Board a list of all treating practitioners, including addresses and telephone numbers; and
- iii. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. RUIZ**, **and** submit the report directly to the Board.

b. **After** initiating drug screening, be under a **continuing duty** to:

- i. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
- ii. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;
- iii. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and
- iv. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. RUIZ and** submit the report directly to the Board.

13. **For a minimum, continuous period of one (1) year immediately prior to requesting reinstatement**, attend a minimum of one (1) meeting per week of a support or peer group meeting approved in advance by the Board, or a Twelve Step program, and provide satisfactory documentation of such attendance to the Board prior to reinstatement.

Reporting Requirements for Suspension Period

14. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
15. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
16. Submit any and all information that the Board may request regarding **MS. RUIZ's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
17. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board.
18. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: monitoring@nursing.ohio.gov or by mail to:

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Ohio Board of Nursing
17 South High Street, Suite 660
Columbus, OH 43215-3466**

19. Verify that the reports and documentation required by this Order are received in the Board office.
20. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.
21. Submit to the Board a completed application for reinstatement on the form provided by the Board.

PROBATIONARY PERIOD

Following reinstatement, the suspension shall be stayed and **MS. RUIZ's** license shall be subject to Probationary Terms and Restrictions for a minimum period of three (3) years.

PROBATIONARY TERMS AND RESTRICTIONS

MS. RUIZ shall:

1. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.

2. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.

Evaluations

3. **Upon the request of the Board or its designee and within sixty (60) days of that request, at MS. RUIZ's expense, obtain a chemical dependency evaluation by a chemical dependency professional approved by the Board or its designee and, prior to the evaluation, provide the chemical dependency professional with a copy of this Order and the Notice. MS. RUIZ shall execute releases to permit the chemical dependency professional to obtain any information deemed appropriate and necessary for the evaluation. The chemical dependency professional shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on MS. RUIZ's license, and a statement as to whether MS. RUIZ is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.**
4. **If a chemical dependency evaluation is requested, provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the chemical dependency professional described above until released. Further, the Board may utilize the professional's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on MS. RUIZ's license.**

Monitoring

5. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. RUIZ's** history. **MS. RUIZ** shall self-administer prescribed drugs only in the manner prescribed.
6. Abstain completely from the use of alcohol or any products containing alcohol.
7. Submit, at her expense, and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Refusal to submit such specimen, or failure to submit such specimen on the day she is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MS. RUIZ** shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who has received a complete copy of this Order prior to prescribing for **MS. RUIZ**.

MS. RUIZ shall:

- a. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
 - b. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;
 - c. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and
 - d. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. RUIZ** and submit the report directly to the Board.
8. Attend a minimum of one (1) meeting per week of a support or peer group meeting approved in advance by the Board, or a Twelve Step program, and provide satisfactory documentation of such attendance to the Board every six (6) months.

Employment Conditions

9. **Upon the request of the Board or its designee, prior to working in a position where a license to practice nursing is required**, complete and submit satisfactory documentation of completion of a nurse refresher course or an extensive orientation approved in advance by the Board or its designee.
10. **Prior to accepting employment as a nurse**, each time with every employer, notify the Board, in writing. Any period during which **MS. RUIZ** does not work in a position within the State of Ohio for which a license to practice nursing is required **shall not count** toward fulfilling the probationary period imposed by this Order.
11. Be under a continuing duty to provide a copy of this Order to any new employer **prior to accepting employment as a nurse**.
12. Have current employer(s), if working in a position where a license to practice nursing is required, submit written reports regarding job performance **on a quarterly basis beginning within thirty (30) days of the effective date of this Order or beginning within thirty (30) days of working in a position as a nurse, whichever is later**.
13. Have current employer(s) send documentation to the Board, along with the first employer report, of receipt of a copy of this Order, including the date this Order was received.

Reporting Requirements for Probationary Period

14. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
15. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
16. Submit any and all information that the Board may request regarding **MS. RUIZ's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
17. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.
18. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: monitoring@nursing.ohio.gov or by mail to:

**Compliance Unit
Ohio Board of Nursing
17 South High Street, Suite 660
Columbus, OH 43215-3466**

19. Verify that the reports and documentation required by this Order are received in the Board office.
20. Inform the Board **within five (5) business days**, in writing, of any change in employment status or of any change in residential or home address or telephone number.

LICENSE RESTRICTIONS

In addition to Probationary Terms and Restrictions, MS. RUIZ's license is subject to the following License Restrictions:

Temporary Narcotic Restriction

MS. RUIZ shall not administer, have access to, or possess (except as prescribed for **MS. RUIZ's** use by another so authorized by law who has full knowledge of **MS. RUIZ's** history) any narcotics, other controlled substances, or mood altering drugs. In addition, **MS. RUIZ** shall not count narcotics or possess or carry any work keys for locked medication carts, cabinets, drawers, or containers. **MS. RUIZ** shall not call in or order prescriptions or prescription refills.

Permanent Practice Restrictions

MS. RUIZ shall not practice nursing as a licensed practical nurse (1) in a patient's residence; (2) for staffing agencies or pools; (3) for an individual or group of individuals who directly engage **MS. RUIZ** to provide nursing services for fees, compensation, or other consideration or who engage **MS. RUIZ** as a volunteer; or (4) as an independent contractor or for *locum tenens* assignments.

MS. RUIZ shall not function in a position or employment where the job duties or requirements involve management of nursing and nursing responsibilities. Such positions include, but are not limited to, the following: Director of Nursing, Assistant Director of Nursing, Nurse Manager, Vice President of Nursing.

FAILURE TO COMPLY

The stay of **MS. RUIZ's** suspension shall be lifted and **MS. RUIZ's** license to practice nursing as a licensed practical nurse will be automatically suspended if it appears to the Board that **MS. RUIZ** has violated or breached any terms or conditions of this Order. Following the automatic suspension, the Board shall notify **MS. RUIZ** via certified mail of the specific nature of the charges and automatic suspension of **MS. RUIZ's** license. **MS. RUIZ** may request a hearing regarding the charges.

DURATION

The Board may only alter the probationary period imposed by this Order if: (1) the Board determines that **MS. RUIZ** has complied with all aspects of this Order; and (2) the Board determines that **MS. RUIZ** is able to practice nursing according to acceptable and prevailing standards of safe nursing care without Board monitoring, based upon an interview with **MS. RUIZ** and review of the reports as required herein.

As indicated above under Employment Conditions, any period during which **MS. RUIZ** does not work in a position within the State of Ohio for which a license to practice nursing is required shall not count toward fulfilling the probationary period imposed by this Order.

Motion adopted by a majority vote of the Board members present with Matthew Carle, Daniel Lehmann and Sandra Ranck abstaining.

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September 2018.

Sheridan, Deanna M., R.N. 143118 (CASE #17-5931, #17-3843)

Action: It was moved by Brenda Boggs, seconded by Patricia Sharpnack, that upon consideration of the charges stated against **DEANNA M. SHERIDAN** in the

Notice of Immediate Suspension and Opportunity for Hearing; and Notice of Opportunity for Hearing (“Notices”) and evidence supporting the charges, the Board find that **MS. SHERIDAN** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notices, and that **MS. SHERIDAN’s** license to practice nursing as a registered nurse be suspended for an indefinite period of time but not less than two (2) years with the conditions for reinstatement set forth below, and following reinstatement, **MS. SHERIDAN’s** license to practice nursing as a registered nurse shall be subject to a stayed suspension under the probationary terms and restrictions set forth below for a minimum period of three (3) years including the **Temporary Narcotic and Temporary Practice Restrictions, unless otherwise approved in advance**, set forth below.

SUSPENSION OF LICENSE

MS. SHERIDAN’s license is suspended for an indefinite period of time but not less than two (2) years.

The Board may reinstate **MS. SHERIDAN’s** license if **MS. SHERIDAN** submits a written request for reinstatement and is determined by the Board or its designee to have complied with the Conditions for Reinstatement.

CONDITIONS FOR REINSTATEMENT

MS. SHERIDAN shall:

1. Be determined, by the Board or its designee, to be able to practice nursing according to acceptable and prevailing standards of safe nursing care based upon an interview and review of the documentation specified in this Order.
2. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
3. Appear in person for interviews with the Board’s designated representative, as requested by the Board or its designee.
4. **Within ninety (90) days immediately prior to requesting reinstatement**, submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MS. SHERIDAN**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MS. SHERIDAN’s** criminal records check to the Board. The Board will not consider a request for reinstatement until **MS. SHERIDAN’s** completed criminal records check, including the FBI check, is received by the Board.
5. Submit documentation of her full compliance with the requirements imposed

by the Greene County Court of Common Pleas in Case Number 17 CR 0421.

Educational Requirements

6. Successfully complete and submit satisfactory documentation of successful completion of the following continuing education, or other comparable course(s) approved in advance by the Board or its designee: fifteen (15) hours Substance Abuse, four (4) hours Professional Accountability and Legal Liability for Nurses, and two (2) hours Ohio Nursing Law and Rules. Continuing education required by this Order **does not meet the continuing education requirements for license renewal.**

Evaluations

7. **Within ninety (90) days immediately prior to requesting reinstatement, at MS. SHERIDAN's expense, obtain a chemical dependency evaluation by a chemical dependency professional approved by the Board or its designee and, prior to the evaluation, provide the chemical dependency professional with a copy of this Order and the Notices. MS. SHERIDAN shall execute releases to permit the chemical dependency professional to obtain any information deemed appropriate and necessary for the evaluation. The chemical dependency professional shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on MS. SHERIDAN's license, and a statement as to whether MS. SHERIDAN is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.**
8. Provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the chemical dependency professional described above until released. Further, the Board may utilize the professional's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on **MS. SHERIDAN's** license.

Monitoring

9. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. SHERIDAN's** history. **MS. SHERIDAN** shall self-administer the prescribed drugs only in the manner prescribed.
10. Abstain completely from the use of alcohol or any products containing alcohol.
11. **For a minimum, continuous period of one (1) year immediately prior to**

requesting reinstatement, submit, at **MS. SHERIDAN's** expense and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Upon and after **MS. SHERIDAN's** initiation of drug screening, refusal to submit such specimen, or failure to submit such specimen on the day she is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MS. SHERIDAN** shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who has received a complete copy of this Order prior to prescribing for **MS. SHERIDAN**.

a. **Prior** to initiating drug screening:

- i. Provide a copy of this Order to all treating practitioners;
- ii. Provide to the Board a list of all treating practitioners, including addresses and telephone numbers; and
- iii. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. SHERIDAN**, **and** submit the report directly to the Board.

b. **After** initiating drug screening, be under a **continuing duty** to:

- i. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
- ii. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;
- iii. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and
- iv. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. SHERIDAN** **and** submit the report directly to the Board.

12. **For a minimum, continuous period of one (1) year immediately prior to requesting reinstatement**, attend a minimum of one (1) meeting per week of a support or peer group meeting approved in advance by the Board, or a Twelve Step program, and provide satisfactory documentation of such attendance to the Board prior to reinstatement.

Reporting Requirements for Suspension Period

13. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
14. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
15. Submit any and all information that the Board may request regarding **MS. SHERIDAN's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
16. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board.
17. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: monitoring@nursing.ohio.gov or by mail to:

**Compliance Unit
Ohio Board of Nursing
17 South High Street, Suite 660
Columbus, OH 43215-3466**

18. Verify that the reports and documentation required by this Order are received in the Board office.
19. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.
20. Submit to the Board a completed application for reinstatement on the form provided by the Board.

PROBATIONARY PERIOD

Following reinstatement, the suspension shall be stayed and **MS. SHERIDAN's** license shall be subject to Probationary Terms and Restrictions for a minimum period of three (3) years.

PROBATIONARY TERMS AND RESTRICTIONS

MS. SHERIDAN shall:

1. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.

2. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
3. Submit documentation of her full compliance with the requirements imposed by the Greene County Court of Common Pleas in Case Number 17 CR 0421.

Monitoring

4. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. SHERIDAN's** history. **MS. SHERIDAN** shall self-administer prescribed drugs only in the manner prescribed.
5. Abstain completely from the use of alcohol or any products containing alcohol.
6. Submit, at her expense, and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Refusal to submit such specimen, or failure to submit such specimen on the day she is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MS. SHERIDAN** shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who has received a complete copy of this Order prior to prescribing for **MS. SHERIDAN**.

MS. SHERIDAN shall:

- a. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
 - b. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;
 - c. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and
 - d. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. SHERIDAN** *and* submit the report directly to the Board.
7. Attend a minimum of one (1) meeting per week of a support or peer group

meeting approved in advance by the Board, or a Twelve Step program, and provide satisfactory documentation of such attendance to the Board every six (6) months.

Employment Conditions

8. **Upon the request of the Board or its designee, prior to working in a position where a license to practice nursing is required**, complete and submit satisfactory documentation of completion of a nurse refresher course or an extensive orientation approved in advance by the Board or its designee.
9. **Prior to accepting employment as a nurse**, each time with every employer, notify the Board, in writing. Any period during which **MS. SHERIDAN** does not work in a position within the State of Ohio for which a license to practice nursing is required **shall not count** toward fulfilling the probationary period imposed by this Order.
10. Be under a continuing duty to provide a copy of this Order to any new employer **prior to accepting employment as a nurse**.
11. Have current employer(s), if working in a position where a license to practice nursing is required, submit written reports regarding job performance **on a quarterly basis beginning within thirty (30) days of the effective date of this Order or beginning within thirty (30) days of working in a position as a nurse, whichever is later**.
12. Have current employer(s) send documentation to the Board, along with the first employer report, of receipt of a copy of this Order, including the date this Order was received.

Reporting Requirements for Probationary Period

13. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
14. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
15. Submit any and all information that the Board may request regarding **MS. SHERIDAN's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
16. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.

17. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: monitoring@nursing.ohio.gov or by mail to:

**Compliance Unit
Ohio Board of Nursing
17 South High Street, Suite 660
Columbus, OH 43215-3466**

18. Verify that the reports and documentation required by this Order are received in the Board office.
19. Inform the Board **within five (5) business days**, in writing, of any change in employment status or of any change in residential or home address or telephone number.

LICENSE RESTRICTIONS

In addition to Probationary Terms and Restrictions, MS. SHERIDAN's license is subject to the following License Restrictions:

Temporary Narcotic Restriction

Unless otherwise approved in advance, in writing, by the Board or its designee, MS. SHERIDAN shall not administer, have access to, or possess (except as prescribed for **MS. SHERIDAN's** use by another so authorized by law who has full knowledge of **MS. SHERIDAN's** history) any narcotics, other controlled substances, or mood altering drugs. In addition, **MS. SHERIDAN** shall not count narcotics or possess or carry any work keys for locked medication carts, cabinets, drawers, or containers. **MS. SHERIDAN** shall not call in or order prescriptions or prescription refills.

Temporary Practice Restrictions

Unless otherwise approved in advance, in writing, by the Board or its designee, MS. SHERIDAN shall not practice nursing as a registered nurse (1) in a patient's residence; (2) for staffing agencies or pools; (3) for an individual or group of individuals who directly engage **MS. SHERIDAN** to provide nursing services for fees, compensation, or other consideration or who engage **MS. SHERIDAN** as a volunteer; or (4) as an independent contractor or for *locum tenens* assignments.

Unless otherwise approved in advance, in writing, by the Board or its designee, MS. SHERIDAN shall not function in a position or employment where the job duties or requirements involve management of nursing and nursing responsibilities, or supervising and evaluating nursing practice. Such positions include, but are not limited to, the following: Director of Nursing, Assistant Director

of Nursing, Nurse Manager, Vice President of Nursing.

FAILURE TO COMPLY

The stay of **MS. SHERIDAN's** suspension shall be lifted and **MS. SHERIDAN's** license to practice nursing as a registered nurse will be automatically suspended if it appears to the Board that **MS. SHERIDAN** has violated or breached any terms or conditions of this Order. Following the automatic suspension, the Board shall notify **MS. SHERIDAN** via certified mail of the specific nature of the charges and automatic suspension of **MS. SHERIDAN's** license. **MS. SHERIDAN** may request a hearing regarding the charges.

DURATION

The Board may only alter the probationary period imposed by this Order if: (1) the Board determines that **MS. SHERIDAN** has complied with all aspects of this Order; and (2) the Board determines that **MS. SHERIDAN** is able to practice nursing according to acceptable and prevailing standards of safe nursing care without Board monitoring, based upon an interview with **MS. SHERIDAN** and review of the reports as required herein.

As indicated above under Employment Conditions, any period during which **MS. SHERIDAN** does not work in a position within the State of Ohio for which a license to practice nursing is required shall not count toward fulfilling the probationary period imposed by this Order.

Motion adopted by a majority vote of the Board members present with Matthew Carle, Daniel Lehmann and Sandra Ranck abstaining.

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September 2018.

McDermott, Angela D., R.N. 283817 (CASE #17-5902)

Action: It was moved by Sandra Beidelschies, seconded by Brenda Boggs, that upon consideration of the charges stated against **ANGELA D. MCDERMOTT** in the Notice of Immediate Suspension and Opportunity for Hearing and a Notice of Opportunity for Hearing (Notices) and evidence supporting the charges, the Board find that **MS. MCDERMOTT** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notices, and that **MS. MCDERMOTT's** license to practice nursing as a registered nurse be suspended for an indefinite period of time but not less than two (2) years retroactive to October 11, 2017, with the conditions for reinstatement set forth below, and following reinstatement, **MS. MCDERMOTT's** license to practice nursing as a registered nurse shall be subject to a stayed suspension under the probationary terms and restrictions set forth below for a minimum period of three (3) years including the **Temporary Narcotic and Temporary Practice Restrictions**, set forth below.

SUSPENSION OF LICENSE

MS. MCDERMOTT's license is suspended for an indefinite period of time but not less than two (2) years retroactive to October 11, 2017.

The Board may reinstate **MS. MCDERMOTT's** license if **MS. MCDERMOTT** submits a written request for reinstatement and is determined by the Board or its designee to have complied with the Conditions for Reinstatement.

CONDITIONS FOR REINSTATEMENT

MS. MCDERMOTT shall:

1. Be determined, by the Board or its designee, to be able to practice nursing according to acceptable and prevailing standards of safe nursing care based upon an interview and review of the documentation specified in this Order.
2. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
3. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
4. **Within ninety (90) days immediately prior to requesting reinstatement**, submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MS. MCDERMOTT**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MS. MCDERMOTT's** criminal records check to the Board. The Board will not consider a request for reinstatement until **MS. MCDERMOTT's** completed criminal records check, including the FBI check, is received by the Board.
5. Submit documentation of her full compliance with the requirements imposed by the Stark County Court of Common Pleas in Case Number 2017 CR 2225.

Educational Requirements

6. Successfully complete and submit satisfactory documentation of successful completion of the following continuing education, or other comparable course(s) approved in advance by the Board or its designee: five (5) hours Substance Use Disorder, and two (2) hours Ohio Nursing Law and Rules. Continuing education required by this Order **does not meet the continuing education requirements for license renewal.**

Evaluations

7. **Within ninety (90) days immediately prior to requesting reinstatement,** at **MS. MCDERMOTT's** expense, obtain a comprehensive physical examination by a Board approved physician for the purposes of evaluating **MS. MCDERMOTT's** fitness for duty and safety to practice nursing as a registered nurse. This Board approved physician shall provide the Board with complete documentation of **MS. MCDERMOTT's** comprehensive physical examination and with a comprehensive assessment regarding **MS. MCDERMOTT's** fitness for duty and safety to practice nursing as a registered nurse. Prior to the examination, **MS. MCDERMOTT** shall provide the Board approved physician with a copy of this Order and the Notice. **MS. MCDERMOTT** shall execute releases to permit the Board approved physician performing the comprehensive physical examination, and assessment to obtain any information deemed appropriate and necessary for the assessment. The evaluating physician shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on **MS. MCDERMOTT's** license, and stating whether **MS. MCDERMOTT** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
8. The Board may utilize the Board approved physician's recommendations and conclusions from the comprehensive physical examination and assessment as a basis for additional terms and restrictions on **MS. MCDERMOTT's** license.
9. **Within ninety (90) days immediately prior to requesting reinstatement,** at **MS. MCDERMOTT's** expense, obtain a chemical dependency evaluation by a chemical dependency professional approved by the Board or its designee and, prior to the evaluation, provide the chemical dependency professional with a copy of this Order and the Notice. **MS. MCDERMOTT** shall execute releases to permit the chemical dependency professional to obtain any information deemed appropriate and necessary for the evaluation. The chemical dependency professional shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on **MS. MCDERMOTT's** license, and a statement as to whether **MS. MCDERMOTT** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
10. Provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the chemical dependency professional described above until released. Further, the Board may utilize the professional's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on **MS. MCDERMOTT's** license.

Monitoring

11. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. MCDERMOTT's** history. **MS. MCDERMOTT** shall self-administer the prescribed drugs only in the manner prescribed.
12. **If recommended by the chemical dependency evaluation**, abstain completely from the use of alcohol or any products containing alcohol.
13. **For a minimum, continuous period of one (1) year immediately prior to requesting reinstatement**, submit, at **MS. MCDERMOTT's** expense and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Upon and after **MS. MCDERMOTT's** initiation of drug screening, refusal to submit such specimen, or failure to submit such specimen on the day she is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MS. MCDERMOTT** shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who has received a complete copy of this Order prior to prescribing for **MS. MCDERMOTT**.
 - a. **Prior** to initiating drug screening:
 - i. Provide a copy of this Order to all treating practitioners;
 - ii. Provide to the Board a list of all treating practitioners, including addresses and telephone numbers; and
 - iii. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. MCDERMOTT**, **and** submit the report directly to the Board.
 - b. **After** initiating drug screening, be under a **continuing duty** to:
 - i. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
 - ii. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;
 - iii. Notify the Board of any and all medication(s) or prescription(s)

received within twenty-four (24) hours of release from hospitalization or medical treatment; and

- iv. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. MCDERMOTT** *and* submit the report directly to the Board.

Reporting Requirements for Suspension Period

14. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
15. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
16. Submit any and all information that the Board may request regarding **MS. MCDERMOTT's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
17. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board.
18. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: monitoring@nursing.ohio.gov or by mail to:

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Ohio Board of Nursing
17 South High Street, Suite 660
Columbus, OH 43215-3466**

19. Verify that the reports and documentation required by this Order are received in the Board office.
20. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.
21. Submit to the Board a completed application for reinstatement on the form provided by the Board.

PROBATIONARY PERIOD

Following reinstatement, the suspension shall be stayed and **MS. MCDERMOTT's** license shall be subject to Probationary Terms and Restrictions for a minimum period of three (3) years.

PROBATIONARY TERMS AND RESTRICTIONS

MS. MCDERMOTT shall:

1. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
2. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
3. Submit documentation of her full compliance with the requirements imposed by the Stark County Court of Common Pleas in Case Number 2017 CR 2225.

Evaluations

4. **Upon the request of the Board or its designee and within sixty (60) days of that request, at MS. MCDERMOTT's expense, obtain a chemical dependency evaluation by a chemical dependency professional approved by the Board or its designee and, prior to the evaluation, provide the chemical dependency professional with a copy of this Order and the Notice. MS. MCDERMOTT shall execute releases to permit the chemical dependency professional to obtain any information deemed appropriate and necessary for the evaluation. The chemical dependency professional shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on MS. MCDERMOTT's license, and a statement as to whether MS. MCDERMOTT is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.**
5. **If a chemical dependency evaluation is requested, provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the chemical dependency professional described above until released. Further, the Board may utilize the professional's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on MS. MCDERMOTT's license.**

Monitoring

6. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. MCDERMOTT's** history. **MS. MCDERMOTT** shall self-administer prescribed drugs only in the manner prescribed.
7. **If recommended by the chemical dependency evaluation, abstain completely from the use of alcohol or any products containing alcohol.**

8. Submit, at her expense, and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Refusal to submit such specimen, or failure to submit such specimen on the day she is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MS. MCDERMOTT** shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who has received a complete copy of this Order prior to prescribing for **MS. MCDERMOTT**.

MS. MCDERMOTT shall:

- a. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
- b. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;
- c. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and
- d. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. MCDERMOTT** *and* submit the report directly to the Board.

Employment Conditions

9. **Upon the request of the Board or its designee, prior to working in a position where a license to practice nursing is required**, complete and submit satisfactory documentation of completion of a nurse refresher course or an extensive orientation approved in advance by the Board or its designee.
10. **Prior to accepting employment as a nurse**, each time with every employer, notify the Board, in writing. Any period during which **MS. MCDERMOTT** does not work in a position within the State of Ohio for which a license to practice nursing is required **shall not count** toward fulfilling the probationary period imposed by this Order.
11. Be under a continuing duty to provide a copy of this Order to any new employer **prior to accepting employment as a nurse**.

12. Have current employer(s), if working in a position where a license to practice nursing is required, submit written reports regarding job performance **on a quarterly basis beginning within thirty (30) days of the effective date of this Order or beginning within thirty (30) days of working in a position as a nurse, whichever is later.**
13. Have current employer(s) send documentation to the Board, along with the first employer report, of receipt of a copy of this Order, including the date this Order was received.

Reporting Requirements for Probationary Period

14. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
15. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
16. Submit any and all information that the Board may request regarding **MS. MCDERMOTT's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
17. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.
18. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: monitoring@nursing.ohio.gov or by mail to:

**Compliance Unit
Ohio Board of Nursing
17 South High Street, Suite 660
Columbus, OH 43215-3466**

19. Verify that the reports and documentation required by this Order are received in the Board office.
20. Inform the Board **within five (5) business days**, in writing, of any change in employment status or of any change in residential or home address or telephone number.

LICENSE RESTRICTIONS

In addition to Probationary Terms and Restrictions, MS. MCDERMOTT's license is subject to the following License Restrictions:

Temporary Narcotic Restriction

MS. MCDERMOTT shall not administer, have access to, or possess (except as prescribed for **MS. MCDERMOTT's** use by another so authorized by law who has full knowledge of **MS. MCDERMOTT's** history) any narcotics, other controlled substances, or mood altering drugs. In addition, **MS. MCDERMOTT** shall not count narcotics or possess or carry any work keys for locked medication carts, cabinets, drawers, or containers. **MS. MCDERMOTT** shall not call in or order prescriptions or prescription refills.

Temporary Practice Restrictions

MS. MCDERMOTT shall not practice nursing as a registered nurse (1) in a patient's residence; (2) for staffing agencies or pools; (3) for an individual or group of individuals who directly engage **MS. MCDERMOTT** to provide nursing services for fees, compensation, or other consideration or who engage **MS. MCDERMOTT** as a volunteer; or (4) as an independent contractor or for *locum tenens* assignments.

MS. MCDERMOTT shall not function in a position or employment where the job duties or requirements involve management of nursing and nursing responsibilities, or supervising and evaluating nursing practice. Such positions include, but are not limited to, the following: Director of Nursing, Assistant Director of Nursing, Nurse Manager, Vice President of Nursing.

FAILURE TO COMPLY

The stay of **MS. MCDERMOTT's** suspension shall be lifted and **MS. MCDERMOTT's** license to practice nursing as a registered nurse will be automatically suspended if it appears to the Board that **MS. MCDERMOTT** has violated or breached any terms or conditions of this Order. Following the automatic suspension, the Board shall notify **MS. MCDERMOTT** via certified mail of the specific nature of the charges and automatic suspension of **MS. MCDERMOTT's** license. **MS. MCDERMOTT** may request a hearing regarding the charges.

DURATION

The Board may only alter the probationary period imposed by this Order if: (1) the Board determines that **MS. MCDERMOTT** has complied with all aspects of this Order; and (2) the Board determines that **MS. MCDERMOTT** is able to practice nursing according to acceptable and prevailing standards of safe nursing care without Board monitoring, based upon an interview with **MS. MCDERMOTT** and review of the reports as required herein.

As indicated above under Employment Conditions, any period during which **MS. MCDERMOTT** does not work in a position within the State of Ohio for which a license to practice nursing is required shall not count toward fulfilling the

probationary period imposed by this Order.

Motion adopted by a majority vote of the Board members present with Matthew Carle, Daniel Lehmann and Sandra Ranck abstaining.

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September 2018.

Sapp, Bethany Renee (aka "Bethany Renee Mize"), R.N. 308189 (CASE #17-2569, #17-2517)

Action: It was moved by Erin Keels, seconded by Sandra Beidelschies, that upon consideration of the charges stated against **BETHANY RENEE SAPP** in the Notice of Immediate Suspension and Opportunity for Hearing, and Notice of Opportunity for Hearing (Notices) and evidence supporting the charges, the Board find that **MS. SAPP** has committed acts in violation of the Nurse Practice Act, Ohio Revised Code Chapter 4723, as stated in the Notices, and that **MS. SAPP's** license to practice nursing as a registered nurse be suspended for an indefinite period of time but not less than one (1) year with the conditions for reinstatement set forth below, and following reinstatement, **MS. SAPP's** license to practice nursing as a registered nurse shall be subject to a stayed suspension under the probationary terms and restrictions set forth below for a minimum period of three (3) years including the **Temporary Narcotic and Temporary Practice Restrictions**, set forth below.

SUSPENSION OF LICENSE

MS. SAPP's license is suspended for an indefinite period of time but not less than one (1) year.

The Board may reinstate **MS. SAPP's** license if **MS. SAPP** submits a written request for reinstatement and is determined by the Board or its designee to have complied with the Conditions for Reinstatement.

CONDITIONS FOR REINSTATEMENT

MS. SAPP shall:

1. Be determined, by the Board or its designee, to be able to practice nursing according to acceptable and prevailing standards of safe nursing care based upon an interview and review of the documentation specified in this Order.
2. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
3. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.

4. **Within ninety (90) days immediately prior to requesting reinstatement**, submit a request to the Bureau of Criminal Identification and Investigation (BCII) to conduct a criminal records check of **MS. SAPP**, including a check of Federal Bureau of Investigation (FBI) records, and shall request that BCII submit **MS. SAPP's** criminal records check to the Board. The Board will not consider a request for reinstatement until **MS. SAPP's** completed criminal records check, including the FBI check, is received by the Board.
5. Submit documentation of her full compliance with the requirements imposed by the Hamilton County Court of Common Pleas in Case Number B-1703424.

Educational Requirements

6. Successfully complete and submit satisfactory documentation of successful completion of the following continuing education, or other comparable course(s) approved in advance by the Board or its designee: five (5) hours Substance Use Disorder, and two (2) hours Ohio Nursing Law and Rules. Continuing education required by this Order **does not meet the continuing education requirements for license renewal**.

Evaluations

7. **Within ninety (90) days immediately prior to requesting reinstatement**, at **MS. SAPP's** expense, obtain a chemical dependency evaluation by a chemical dependency professional approved by the Board or its designee and, prior to the evaluation, provide the chemical dependency professional with a copy of this Order and the Notices. **MS. SAPP** shall execute releases to permit the chemical dependency professional to obtain any information deemed appropriate and necessary for the evaluation. The chemical dependency professional shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on **MS. SAPP's** license, and a statement as to whether **MS. SAPP** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
8. Provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the chemical dependency professional described above until released. Further, the Board may utilize the professional's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on **MS. SAPP's** license.

Monitoring

9. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by

law who has full knowledge of **MS. SAPP's** history. **MS. SAPP** shall self-administer the prescribed drugs only in the manner prescribed.

10. Abstain completely from the use of alcohol or any products containing alcohol.

11. **For a minimum, continuous period of one (1) year immediately prior to requesting reinstatement**, submit, at **MS. SAPP's** expense and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Upon and after **MS. SAPP's** initiation of drug screening, refusal to submit such specimen, or failure to submit such specimen on the day she is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MS. SAPP** shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who has received a complete copy of this Order prior to prescribing for **MS. SAPP**.

a. **Prior** to initiating drug screening:

- i. Provide a copy of this Order to all treating practitioners;
- ii. Provide to the Board a list of all treating practitioners, including addresses and telephone numbers; and
- iii. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. SAPP**, **and** submit the report directly to the Board.

b. **After** initiating drug screening, be under a **continuing duty** to:

- i. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
- ii. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;
- iii. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and
- iv. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. SAPP and** submit the

report directly to the Board.

12. **Upon the request of the Board or its designee, for a minimum, continuous period of one (1) year immediately prior to requesting reinstatement**, attend a minimum of one (1) meeting per week of a support or peer group meeting approved in advance by the Board, or a Twelve Step program, and provide satisfactory documentation of such attendance to the Board prior to reinstatement.

Reporting Requirements for Suspension Period

13. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
14. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
15. Submit any and all information that the Board may request regarding **MS. SAPP's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
16. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board.
17. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: monitoring@nursing.ohio.gov or by mail to:

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Ohio Board of Nursing
17 South High Street, Suite 660
Columbus, OH 43215-3466**

18. Verify that the reports and documentation required by this Order are received in the Board office.
19. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.
20. Submit to the Board a completed application for reinstatement on the form provided by the Board.

PROBATIONARY PERIOD

Following reinstatement, the suspension shall be stayed and **MS. SAPP's** license shall be subject to Probationary Terms and Restrictions for a minimum period of three (3) years.

PROBATIONARY TERMS AND RESTRICTIONS

MS. SAPP shall:

1. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
2. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
3. Submit documentation of her full compliance with the requirements imposed by the Hamilton County Court of Common Pleas in Case Number B-1703424.

Monitoring

4. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. SAPP's** history. **MS. SAPP** shall self-administer prescribed drugs only in the manner prescribed.
5. Abstain completely from the use of alcohol or any products containing alcohol.
6. Submit, at her expense, and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Refusal to submit such specimen, or failure to submit such specimen on the day she is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MS. SAPP** shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who has received a complete copy of this Order prior to prescribing for **MS. SAPP**.

MS. SAPP shall:

- a. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
- b. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;
- c. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization

or medical treatment; and

- d. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. SAPP** and submit the report directly to the Board.
7. **Upon the request of the Board or its designee**, attend a minimum of one (1) meeting per week of a support or peer group meeting approved in advance by the Board, or a Twelve Step program, and provide satisfactory documentation of such attendance to the Board every six (6) months.

Employment Conditions

8. **Upon the request of the Board or its designee, prior to working in a position where a license to practice nursing is required**, complete and submit satisfactory documentation of completion of a nurse refresher course or an extensive orientation approved in advance by the Board or its designee.
9. **Prior to accepting employment as a nurse**, each time with every employer, notify the Board, in writing. Any period during which **MS. SAPP** does not work in a position within the State of Ohio for which a license to practice nursing is required **shall not count** toward fulfilling the probationary period imposed by this Order.
10. Be under a continuing duty to provide a copy of this Order to any new employer **prior to accepting employment as a nurse**.
11. Have current employer(s), if working in a position where a license to practice nursing is required, submit written reports regarding job performance **on a quarterly basis beginning within thirty (30) days of the effective date of this Order or beginning within thirty (30) days of working in a position as a nurse, whichever is later**.
12. Have current employer(s) send documentation to the Board, along with the first employer report, of receipt of a copy of this Order, including the date this Order was received.

Reporting Requirements for Probationary Period

13. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
14. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.

15. Submit any and all information that the Board may request regarding **MS. SAPP's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
16. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.
17. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: monitoring@nursing.ohio.gov or by mail to:

**Compliance Unit
Ohio Board of Nursing
17 South High Street, Suite 660
Columbus, OH 43215-3466**

18. Verify that the reports and documentation required by this Order are received in the Board office.
19. Inform the Board **within five (5) business days**, in writing, of any change in employment status or of any change in residential or home address or telephone number.

LICENSE RESTRICTIONS

In addition to Probationary Terms and Restrictions, MS. SAPP's license is subject to the following License Restrictions:

Temporary Narcotic Restriction

MS. SAPP shall not administer, have access to, or possess (except as prescribed for **MS. SAPP's** use by another so authorized by law who has full knowledge of **MS. SAPP's** history) any narcotics, other controlled substances, or mood altering drugs. In addition, **MS. SAPP** shall not count narcotics or possess or carry any work keys for locked medication carts, cabinets, drawers, or containers. **MS. SAPP** shall not call in or order prescriptions or prescription refills.

Temporary Practice Restrictions

MS. SAPP shall not practice nursing as a registered nurse (1) in a patient's residence; (2) for staffing agencies or pools; (3) for an individual or group of individuals who directly engage **MS. SAPP** to provide nursing services for fees, compensation, or other consideration or who engage **MS. SAPP** as a volunteer; or (4) as an independent contractor or for *locum tenens* assignments.

MS. SAPP shall not function in a position or employment where the job duties or

requirements involve management of nursing and nursing responsibilities, or supervising and evaluating nursing practice. Such positions include, but are not limited to, the following: Director of Nursing, Assistant Director of Nursing, Nurse Manager, Vice President of Nursing.

FAILURE TO COMPLY

The stay of **MS. SAPP's** suspension shall be lifted and **MS. SAPP's** license to practice nursing as a registered nurse will be automatically suspended if it appears to the Board that **MS. SAPP** has violated or breached any terms or conditions of this Order. Following the automatic suspension, the Board shall notify **MS. SAPP** via certified mail of the specific nature of the charges and automatic suspension of **MS. SAPP's** license. **MS. SAPP** may request a hearing regarding the charges.

DURATION

The Board may only alter the probationary period imposed by this Order if: (1) the Board determines that **MS. SAPP** has complied with all aspects of this Order; and (2) the Board determines that **MS. SAPP** is able to practice nursing according to acceptable and prevailing standards of safe nursing care without Board monitoring, based upon an interview with **MS. SAPP** and review of the reports as required herein.

As indicated above under Employment Conditions, any period during which **MS. SAPP** does not work in a position within the State of Ohio for which a license to practice nursing is required shall not count toward fulfilling the probationary period imposed by this Order.

Motion adopted by a majority vote of the Board members present with Matthew Carle, Daniel Lehmann and Sandra Ranck abstaining.

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September 2018.

DEFAULT ORDERS

Rutan, Amanda Hope, MA-C Applicant (CASE #17-5259)

Action: It was moved by Patricia Sharpnack, seconded by Sandra Beidelschies, that upon consideration of the allegations contained in the December 4, 2017 examination order and the findings contained in the May 2018 Default Order, the Board find that **MS. RUTAN** has committed acts in violation of the Nurse Practice Act, as set forth in the May 2018 Default Order, and that **MS. RUTAN's** application for certification as a medication aide in the State of Ohio be denied, with conditions for reapplication set forth in the May 2018 Default Order.

Motion adopted by a majority vote of the Board members present with Sandra Ranck abstaining.

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September 2018.

Diem, Natalie Lynn, P.N. 111492 (CASE #16-4108)

Action: It was moved by Brenda Boggs, seconded by Matthew Carle, that upon consideration of the allegations contained in the December 4, 2017 examination order and the findings contained in the March 2018 Default Order, the Board find that **MS. DIEM** has committed acts in violation of the Nurse Practice Act, as set forth in the March 2018 Default Order, and that **MS. DIEM's** license to practice nursing as a licensed practical nurse in the State of Ohio be suspended, as of March 22, 2018, with conditions for reinstatement set forth in the March 2018 Default Order.

Motion adopted by a majority vote of the Board members present with Sandra Ranck abstaining.

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September 2018.

Lyons, Kimberly Sue, P.N. 128493 (CASE #16-7245)

Action: It was moved by Erin Keels, seconded by Sandra Beidelschies, that the Board find that **MS. LYONS** has failed to submit to an examination when directed, that the failure was not due to circumstances beyond her control, and that in accordance with Section 4723.28(G) ORC, **MS. LYONS** has admitted the truth of the allegations set forth in the January 10, 2018 Examination Order issued to **MS. LYONS** and that **MS. LYONS** has an impairment affecting her ability to provide safe nursing care. It was further moved that **MS. LYONS's** license to practice nursing as a licensed practical nurse in the State of Ohio be suspended for an indefinite period of time with conditions for reinstatement set forth below:

CONDITIONS FOR REINSTATEMENT

1. **MS. LYONS** shall obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
2. **MS. LYONS** shall appear in person for interviews before the full Board or its designated representative as requested by the Board and prior to reinstatement.
3. **MS. LYONS** shall, at her own expense, submit to a chemical dependency examination specifically addressing her ability to safely function in a clinical nursing capacity, by Scott Dagenfield, CCDC-III, 691 South Fifth Street, Columbus, Ohio 43206, or another examiner approved in advance, in writing, by the Board or its designee (hereinafter "Examiner"). Prior to the evaluation, **MS. LYONS** shall notify the Board Monitoring Agent of the appointment date, so that the Monitoring Agent can send the necessary records to the Examiner. **MS. LYONS** shall execute releases to permit the

Examiner to obtain any information deemed appropriate and necessary for the evaluation. The Examiner shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, and any restrictions that should be placed on **MS. LYONS's** practice. The Examiner shall provide an opinion to the Board regarding whether **MS. LYONS** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.

4. **MS. LYONS** shall enter into a Consent Agreement with the Board for terms and restrictions determined by the Board for a minimum period of time determined by the Board. The terms and restrictions determined by the Board shall include, but not be limited to, completion or continuation of mental health and/or chemical dependency treatment, or other treatment recommended, and/or restrictions specified by the Examiner, as set forth in paragraph 3., above. If the Board and **MS. LYONS** are unable to agree to terms and restrictions in a Consent Agreement, the terms and restrictions shall be determined after a hearing is held.

Reporting Requirements of Licensee

5. **MS. LYONS** shall sign release of information forms allowing health professionals and other organizations to submit requested documentation or information directly to the Board.
6. **MS. LYONS** shall submit any and all information that the Board may request regarding her ability to practice according to acceptable and prevailing standards of safe nursing practice.
7. **MS. LYONS** shall not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.
8. **MS. LYONS** shall submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be made to the Monitoring Unit of the Board.
9. **MS. LYONS** shall submit the reports and documentation required by this Order to the attention of the Compliance Unit, Ohio Board of Nursing, 17 South High Street, Suite 660, Columbus, OH 43215-3466.
10. **MS. LYONS** shall verify that the reports and documentation required by this Order are received in the Board office.
11. **MS. LYONS** shall inform the Board within three (3) business days, in writing, of any change in address and/or telephone number.

Motion adopted by a majority vote of the Board members present with Sandra Ranck abstaining.

This ORDER shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September 2018.

New, Ladeea Marie, P.N. 132563 (CASE #17-4461)

Action: It was moved by Nancy Fellows, seconded by Joanna Ridgeway, that the Board find that **MS. NEW** has failed to submit to an examination when directed, that the failure was not due to circumstances beyond her control, and that in accordance Section 4723.28(G) ORC, **MS. NEW** has admitted the truth of the allegations set forth in the February 16, 2018 Examination Order issued to **MS. NEW** and that **MS. NEW** has an impairment affecting her ability to provide safe nursing care. It was further moved that **MS. NEW's** license to practice nursing as a licensed practical nurse in the State of Ohio be suspended for an indefinite period of time with conditions for reinstatement set forth below:

CONDITIONS FOR REINSTATEMENT

1. **MS. NEW** shall obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
2. **MS. NEW** shall appear in person for interviews before the full Board or its designated representative as requested by the Board and prior to reinstatement.
3. **MS. NEW** shall, at her own expense, submit to a chemical dependency examination specifically addressing her ability to safely function in a clinical nursing capacity, by Scott Dagenfield, CCDC-III, 691 South Fifth Street, Columbus, Ohio 43206, or another examiner approved in advance, in writing, by the Board or its designee (hereinafter "Examiner"). Prior to the evaluation, **MS. NEW** shall notify the Board Monitoring Agent of the appointment date, so that the Monitoring Agent can send the necessary records to the Examiner. **MS. NEW** shall execute releases to permit the Examiner to obtain any information deemed appropriate and necessary for the evaluation. The Examiner shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, and any restrictions that should be placed on **MS. NEW's** practice. The Examiner shall provide an opinion to the Board regarding whether **MS. NEW** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
4. **MS. NEW** shall enter into a Consent Agreement with the Board for terms and restrictions determined by the Board for a minimum period of time determined by the Board. The terms and restrictions determined by the Board shall include, but not be limited to, completion or continuation of mental health and/or chemical dependency treatment, or other treatment

recommended, and/or restrictions specified by the Examiner, as set forth in paragraph 3., above. If the Board and **MS. NEW** are unable to agree to terms and restrictions in a Consent Agreement, the terms and restrictions shall be determined after a hearing is held.

Reporting Requirements of Licensee

5. **MS. NEW** shall sign release of information forms allowing health professionals and other organizations to submit requested documentation or information directly to the Board.
6. **MS. NEW** shall submit any and all information that the Board may request regarding her ability to practice according to acceptable and prevailing standards of safe nursing practice.
7. **MS. NEW** shall not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.
8. **MS. NEW** shall submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be made to the Monitoring Unit of the Board.
9. **MS. NEW** shall submit the reports and documentation required by this Order to the attention of the Compliance Unit, Ohio Board of Nursing, 17 South High Street, Suite 660, Columbus, OH 43215-3466.
10. **MS. NEW** shall verify that the reports and documentation required by this Order are received in the Board office.
11. **MS. NEW** shall inform the Board within three (3) business days, in writing, of any change in address and/or telephone number.

Motion adopted by a majority vote of the Board members present with Sandra Ranck abstaining.

This Order shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September 2018.

Paoloni, Heather R., R.N. 367813, P.N. 113835 (CASE #17-3062)

Action: It was moved by Barbara Douglas, seconded by Nancy Fellows, that the Board find that **MS. PAOLONI** has failed to submit to an examination when directed, that the failure was not due to circumstances beyond her control, and that in accordance with Section 4723.28(G) ORC, **MS. PAOLONI** has admitted the truth of the allegations set forth in the February 20, 2018 Examination Order issued to **MS. PAOLONI** and that **MS. PAOLONI** has an impairment affecting her ability to provide safe nursing care. It was further moved that **MS. PAOLONI's** licenses

to practice nursing as a registered nurse and licensed practical nurse in the State of Ohio be suspended for an indefinite period of time with conditions for reinstatement set forth below:

CONDITIONS FOR REINSTATEMENT

1. **MS. PAOLONI** shall obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
2. **MS. PAOLONI** shall appear in person for interviews before the full Board or its designated representative as requested by the Board and prior to reinstatement.
3. **MS. PAOLONI** shall, at her own expense, submit to a chemical dependency examination specifically addressing her ability to safely function in a clinical nursing capacity, by the Cleveland Clinic Foundation, Alcohol and Drug Recovery Center, 1730 West 25th Street, Cleveland, Ohio 44113, or another examiner approved in advance, in writing, by the Board or its designee (hereinafter "Examiner"). Prior to the evaluation, **MS. PAOLONI** shall notify the Board Monitoring Agent of the appointment date, so that the Monitoring Agent can send the necessary records to the Examiner. **MS. PAOLONI** shall execute releases to permit the Examiner to obtain any information deemed appropriate and necessary for the evaluation. The Examiner shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, and any restrictions that should be placed on **MS. PAOLONI's** practice. The Examiner shall provide an opinion to the Board regarding whether **MS. PAOLONI** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
4. **MS. PAOLONI** shall enter into a Consent Agreement with the Board for terms and restrictions determined by the Board for a minimum period of time determined by the Board. The terms and restrictions determined by the Board shall include, but not be limited to, completion or continuation of mental health and/or chemical dependency treatment, or other treatment recommended, and/or restrictions specified by the Examiner, as set forth in paragraph 3., above. If the Board and **MS. PAOLONI** are unable to agree to terms and restrictions in a Consent Agreement, the terms and restrictions shall be determined after a hearing is held.

Reporting Requirements of Licensee

5. **MS. PAOLONI** shall sign release of information forms allowing health professionals and other organizations to submit requested documentation or information directly to the Board.

6. **MS. PAOLONI** shall submit any and all information that the Board may request regarding her ability to practice according to acceptable and prevailing standards of safe nursing practice.
7. **MS. PAOLONI** shall not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.
8. **MS. PAOLONI** shall submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be made to the Monitoring Unit of the Board.
9. **MS. PAOLONI** shall submit the reports and documentation required by this Order to the attention of the Compliance Unit, Ohio Board of Nursing, 17 South High Street, Suite 660, Columbus, OH 43215-3466.
10. **MS. PAOLONI** shall verify that the reports and documentation required by this Order are received in the Board office.
11. **MS. PAOLONI** shall inform the Board within three (3) business days, in writing, of any change in address and/or telephone number.

Motion adopted by a majority vote of the Board members present with Sandra Ranck abstaining.

This Order shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September 2018.

Lute, Amanda L., R.N. 309646 (CASE #17-5094)

Action: It was moved by Patricia Sharpnack, seconded by Brenda Boggs, that the Board find that **MS. LUTE** has failed to submit to an examination when directed, that the failure was not due to circumstances beyond her control, and that in accordance with Section 4723.28(G) ORC, **MS. LUTE** has admitted the truth of the allegations set forth in the April 23, 2018 Examination Order issued to **MS. LUTE** and that **MS. LUTE** has an impairment affecting her ability to provide safe nursing care. It was further moved that **MS. LUTE's** license to practice nursing as a registered nurse in the State of Ohio be suspended for an indefinite period of time with conditions for reinstatement set forth below:

CONDITIONS FOR REINSTATEMENT

1. **MS. LUTE** shall obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
2. **MS. LUTE** shall appear in person for interviews before the full Board or its designated representative as requested by the Board and prior to reinstatement.

3. **MS. LUTE** shall, at her own expense, submit to a chemical dependency/mental health examination specifically addressing her ability to safely function in a clinical nursing capacity, by OSU Harding Hospital, Neuroscience Facility, 1670 Upham Drive, Columbus, Ohio 43210, or another examiner approved in advance, in writing, by the Board or its designee (hereinafter "Examiner"). Prior to the evaluation, **MS. LUTE** shall notify the Board Monitoring Agent of the appointment date, so that the Monitoring Agent can send the necessary records to the Examiner. **MS. LUTE** shall execute releases to permit the Examiner to obtain any information deemed appropriate and necessary for the evaluation. The Examiner shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, and any restrictions that should be placed on **MS. LUTE's** practice. The Examiner shall provide an opinion to the Board regarding whether **MS. LUTE** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
4. **MS. LUTE** shall enter into a Consent Agreement with the Board for terms and restrictions determined by the Board for a minimum period of time determined by the Board. The terms and restrictions determined by the Board shall include, but not be limited to, completion or continuation of mental health and/or chemical dependency treatment, or other treatment recommended, and/or restrictions specified by the Examiner, as set forth in paragraph 3., above. If the Board and **MS. LUTE** are unable to agree to terms and restrictions in a Consent Agreement, the terms and restrictions shall be determined after a hearing is held.

Reporting Requirements of Licensee

5. **MS. LUTE** shall sign release of information forms allowing health professionals and other organizations to submit requested documentation or information directly to the Board.
6. **MS. LUTE** shall submit any and all information that the Board may request regarding her ability to practice according to acceptable and prevailing standards of safe nursing practice.
7. **MS. LUTE** shall not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.
8. **MS. LUTE** shall submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be made to the Monitoring Unit of the Board.

9. **MS. LUTE** shall submit the reports and documentation required by this Order to the attention of the Compliance Unit, Ohio Board of Nursing, 17 South High Street, Suite 660, Columbus, OH 43215-3466.
10. **MS. LUTE** shall verify that the reports and documentation required by this Order are received in the Board office.
11. **MS. LUTE** shall inform the Board within three (3) business days, in writing, of any change in address and/or telephone number.

Motion adopted by a majority vote of the Board members present with Sandra Ranck abstaining.

This Order shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September 2018.

Eicher, Nicole Leandre, R.N. 408877 (CASE #17-5066, #17-4288, #17-3406, #17-2931, #17-2759, #17-2524, #16-2029)

Action: It was moved by Joanna Ridgeway, seconded by Nancy Fellows, that the Board find that **MS. EICHER** has failed to submit to an examination when directed, that the failure was not due to circumstances beyond her control, and in accordance with Section 4723.28(G) ORC, **MS. EICHER** has admitted the truth of the allegations set forth in the April 6, 2018 Examination Order issued to **MS. EICHER** and that **MS. EICHER** has an impairment affecting her ability to provide safe nursing care. It was further moved that **MS. EICHER's** license to practice nursing as a registered nurse in the State of Ohio be suspended for an indefinite period of time with conditions for reinstatement set forth below:

CONDITIONS FOR REINSTATEMENT

1. **MS. EICHER** shall obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
2. **MS. EICHER** shall appear in person for interviews before the full Board or its designated representative as requested by the Board and prior to reinstatement.
3. **MS. EICHER** shall, at her own expense, submit to a professional examination specifically addressing her ability to safely function in a clinical nursing capacity, by the University of Cincinnati Physicians Company ("UC"), 260 Stetson Street, Suite 3200, Cincinnati, Ohio 45219, or another examiner approved in advance, in writing, by the Board or its designee (hereinafter "Examiner"). Prior to the evaluation, **MS. EICHER** shall notify the Board Monitoring Agent of the appointment date, so that the Monitoring Agent can send the necessary records to the Examiner. **MS. EICHER** shall execute releases to permit the Examiner to obtain any information deemed appropriate and necessary for the evaluation. The Examiner shall submit a

- written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, and any restrictions that should be placed on **MS. EICHER's** practice. The Examiner shall provide an opinion to the Board regarding whether **MS. EICHER** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
4. **MS. EICHER** shall enter into a Consent Agreement with the Board for terms and restrictions determined by the Board for a minimum period of time determined by the Board. The terms and restrictions determined by the Board shall include, but not be limited to, completion or continuation of mental health and/or chemical dependency treatment, or other treatment recommended, and/or restrictions specified by the Examiner, as set forth in paragraph 3., above. If the Board and **MS. EICHER** are unable to agree to terms and restrictions in a Consent Agreement, the terms and restrictions shall be determined after a hearing is held.

Reporting Requirements of Licensee

5. **MS. EICHER** shall sign release of information forms allowing health professionals and other organizations to submit requested documentation or information directly to the Board.
6. **MS. EICHER** shall submit any and all information that the Board may request regarding her ability to practice according to acceptable and prevailing standards of safe nursing practice.
7. **MS. EICHER** shall not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.
8. **MS. EICHER** shall submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be made to the Monitoring Unit of the Board.
9. **MS. EICHER** shall submit the reports and documentation required by this Order to the attention of the Compliance Unit, Ohio Board of Nursing, 17 South High Street, Suite 660, Columbus, OH 43215-3466.
10. **MS. EICHER** shall verify that the reports and documentation required by this Order are received in the Board office.
11. **MS. EICHER** shall inform the Board within three (3) business days, in writing, of any change in address and/or telephone number.

Motion adopted by a majority vote of the Board members present with Sandra Ranck abstaining.

This Order shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September 2018.

Mallett, Renee Margaret, R.N. 247106 (CASE #17-4795)

Action: It was moved by Deborah Knueve, seconded by Matthew Carle, that the Board find that **MS. MALLETT** has failed to submit to an examination when directed, that the failure was not due to circumstances beyond her control, and that in accordance with Section 4723.28(G) ORC, **MS. MALLETT** has admitted the truth of the allegations set forth in the November 30, 2017 Examination Order issued to **MS. MALLETT** and that **MS. MALLETT** has an impairment affecting her ability to provide safe nursing care. It was further moved that **MS. MALLETT's** license to practice nursing as a registered nurse in the State of Ohio be suspended for an indefinite period of time with conditions for reinstatement set forth below:

CONDITIONS FOR REINSTATEMENT

1. **MS. MALLETT** shall obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
2. **MS. MALLETT** shall appear in person for interviews before the full Board or its designated representative as requested by the Board and prior to reinstatement.
3. **MS. MALLETT** shall, at her own expense, submit to a chemical dependency examination specifically addressing her ability to safely function in a clinical nursing capacity, by Scott Dagenfield, CCDC-III, 691 South Fifth Street, Columbus, Ohio 43206, or another examiner approved in advance, in writing, by the Board or its designee (hereinafter "Examiner"). Prior to the evaluation, **MS. MALLETT** shall notify the Board Monitoring Agent of the appointment date, so that the Monitoring Agent can send the necessary records to the Examiner. **MS. MALLETT** shall execute releases to permit the Examiner to obtain any information deemed appropriate and necessary for the evaluation. The Examiner shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, and any restrictions that should be placed on **MS. MALLETT's** practice. The Examiner shall provide an opinion to the Board regarding whether **MS. MALLETT** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
4. **MS. MALLETT** shall enter into a Consent Agreement with the Board for terms and restrictions determined by the Board for a minimum period of time determined by the Board. The terms and restrictions determined by the Board shall include, but not be limited to, completion or continuation of mental health and/or chemical dependency treatment, or other treatment recommended, and/or restrictions specified by the Examiner, as set forth in paragraph 3., above. If the Board and **MS. MALLETT** are unable to agree

to terms and restrictions in a Consent Agreement, the terms and restrictions shall be determined after a hearing is held.

Reporting Requirements of Licensee

5. **MS. MALLET** shall sign release of information forms allowing health professionals and other organizations to submit requested documentation or information directly to the Board.
6. **MS. MALLET** shall submit any and all information that the Board may request regarding her ability to practice according to acceptable and prevailing standards of safe nursing practice.
7. **MS. MALLET** shall not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.
8. **MS. MALLET** shall submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be made to the Monitoring Unit of the Board.
9. **MS. MALLET** shall submit the reports and documentation required by this Order to the attention of the Compliance Unit, Ohio Board of Nursing, 17 South High Street, Suite 660, Columbus, OH 43215-3466.
10. **MS. MALLET** shall verify that the reports and documentation required by this Order are received in the Board office.
11. **MS. MALLET** shall inform the Board within three (3) business days, in writing, of any change in address and/or telephone number.

Motion adopted by a majority vote of the Board members present with Sandra Ranck abstaining.

This Order shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September 2018.

VOLUNTARY RETIREMENT

Action: It was moved by Sandra Beidelschies, seconded by Erin Keels, that the Board accept the Permanent Voluntary Retirement from the practice of nursing for the following case:

Smith, Richard, R.N. 290242 (CASE #18-3800); Smith, Brenda, R.N. 208222 (CASE #15-8570).

Motion adopted by a majority vote of the Board members present with Sandra Ranck abstaining.

SUMMARY SUSPENSION AND NOTICE OF OPPORTUNITY FOR HEARING

Moreno, Jessica, R.N. 445391 (CASE #18-3737)

Action: It was moved by Daniel Lehmann, seconded by Erin Keels, that there is clear and convincing evidence that continued practice by **JESSICA MORENO, R.N. 445391 (CASE #18-3737)**, presents a danger of immediate and serious harm to the public. It was further moved that the Board Summarily Suspend the license of **JESSICA MORENO, R.N. 445391**, and issue a Notice of Opportunity for Hearing for violations of Chapter 4723, ORC, retroactive to the date it was issued on August 6, 2018.

Motion adopted by a majority vote of the Board members present with Sandra Ranck abstaining.

CONSOLIDATION HEARING/NO REQUEST HEARING

Lyell, Christine A., R.N. 369615 (CASE #17-6005, 17-005842; 17-005623; 17-001170; 17-001169)

Action: It was moved by Barbara Douglas, seconded by Deborah Knueve, that the Board consolidate for purposes of consideration Case Number 17-006005 and Cases Number 17-001169, 17-001170, 17-005623, and 17-005842. It was further moved that the Board accept all of the Findings of Fact, Conclusions of Law, and the Recommendation in the Hearing Examiner's Report and Recommendation, and that **MS. LYELL's** license to practice nursing as a registered nurse in the State of Ohio be revoked with the conditions for reapplication set forth below, and following successful reapplication, **MS. LYELL** shall be issued a license to practice as a registered nurse, the license shall be indefinitely suspended, and the suspension stayed, subject to the probationary terms and restrictions set forth below for a minimum period of three (3) years including the **Permanent Practice and Temporary Narcotic Restrictions**, set forth below.

CONDITIONS FOR REAPPLICATION

The Board may grant **MS. LYELL** a license to practice nursing in the State of Ohio as a registered nurse if **MS. LYELL** completes the requirements to be licensed as a registered nurse in the state of Ohio, submits an application for licensure and is determined by the Board or its designee to have complied with the Conditions for Reapplication.

MS. LYELL shall:

1. Be determined, by the Board or its designee, to be able to practice nursing according to acceptable and prevailing standards of safe nursing care based upon an interview and review of the documentation specified in this Order.
2. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.

3. Appear in person for an interview with the Board's designated representative, as requested by the Board or its designee.
4. Submit documentation of her full compliance with the requirements imposed by the Summit County Court of Common Pleas in Case Number CR-2017-10-3636.

Evaluations

5. **Within three (3) months immediately prior to reapplication, at MS. LYELL's expense, obtain a mental health evaluation from a Board approved evaluator and provide the Board with complete documentation of such evaluation. Prior to the evaluation, MS. LYELL shall provide the mental health evaluator with a copy of this Order. MS. LYELL shall execute releases to permit the mental health evaluator to obtain any information deemed appropriate and necessary for the evaluation. The mental health evaluator shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on MS. LYELL's license, and a statement as to whether MS. LYELL is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.**
6. Provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the mental health evaluator described above until released. Further, the Board may utilize the mental health evaluator's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on a license issued to **MS. LYELL.**
7. **Within three (3) months immediately prior to reapplication, at MS. LYELL's expense, obtain a comprehensive physical examination by a Board approved physician for the purposes of evaluating MS. LYELL's fitness for duty and safety to practice nursing as a registered nurse. This Board approved physician shall provide the Board with complete documentation of MS. LYELL's comprehensive physical examination and with a comprehensive assessment regarding MS. LYELL's fitness for duty and safety to practice nursing as a registered nurse. Prior to the examination, MS. LYELL shall provide the Board approved physician with a copy of this Order. MS. LYELL shall execute releases to permit the Board approved physician performing the comprehensive physical examination, and assessment to obtain any information deemed appropriate and necessary for the assessment. The evaluating physician shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on MS. LYELL's license, and stating whether MS. LYELL is capable of practicing nursing according to acceptable and prevailing standards of safe**

nursing care.

8. The Board may utilize the Board approved physician's recommendations and conclusions from the comprehensive physical examination and assessment as a basis for additional terms and restrictions on a license issued to **MS. LYELL**.
9. **Within three (3) months immediately prior to reapplication**, at **MS. LYELL's** expense, obtain a chemical dependency evaluation by a chemical dependency professional approved by the Board or its designee and, prior to the evaluation, provide the chemical dependency professional with a copy of this Order. **MS. LYELL** shall execute releases to permit the chemical dependency professional to obtain any information deemed appropriate and necessary for the evaluation. The chemical dependency professional shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on **MS. LYELL's** license, and a statement as to whether **MS. LYELL** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
10. Provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the chemical dependency professional described above until released. Further, the Board may utilize the professional's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on a license issued to **MS. LYELL**.

Monitoring

11. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. LYELL's** history. **MS. LYELL** shall self-administer the prescribed drugs only in the manner prescribed.
12. Abstain completely from the use of alcohol or any products containing alcohol.
13. **For a minimum, continuous period of one (1) year immediately prior to reapplication**, submit, at **MS. LYELL's** expense and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Upon and after **MS. LYELL's** initiation of drug screening, refusal to submit such specimen, or failure to submit such specimen on the day she is selected, or in such a manner as the Board may request, shall not count for purposes of determining the continuous one (1) year period. This screening shall require a daily call-in process. The specimens submitted by **MS. LYELL** shall be negative, except for substances prescribed,

administered, or dispensed to her by another so authorized by law who has received a complete copy of this Order prior to prescribing for **MS. LYELL**.

a. **Prior** to initiating drug screening:

- i. Provide a copy of this Order to all treating practitioners;
- ii. Provide to the Board a list of all treating practitioners, including addresses and telephone numbers; and
- iii. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. LYELL**, **and** submit the report directly to the Board.

b. **After** initiating drug screening, be under a **continuing duty** to:

- i. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
- ii. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;
- iii. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and
- iv. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. LYELL** **and** submit the report directly to the Board.

14. **For a minimum, continuous period of one (1) year immediately prior to reapplication**, attend a minimum of two (2) meetings per week of a support or peer group meeting approved in advance by the Board, or a Twelve Step program, and provide satisfactory documentation of such attendance to the Board prior to reinstatement.

Reporting Requirements for Reapplication

15. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.

16. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.

17. Submit any and all information that the Board may request regarding **MS**.

LYELL's ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.

18. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board.
19. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: monitoring@nursing.ohio.gov or by mail to:

**Compliance Unit
Ohio Board of Nursing
17 South High Street, Suite 660
Columbus, OH 43215-3466**

20. Verify that the reports and documentation required by this Order are received in the Board office.
21. Inform the Board **within five (5) business days**, in writing, of any change in residential or home address or telephone number.
22. Submit to the Board a completed application for reinstatement on the form provided by the Board.

PROBATIONARY PERIOD

Following licensure, **MS. LYELL's** license to practice nursing as a registered nurse shall be indefinitely suspended, and such suspension shall be stayed subject to Probationary Terms and Restrictions for a minimum period of three (3) years.

PROBATIONARY TERMS AND RESTRICTIONS

MS. LYELL shall:

1. Obey all federal, state, and local laws, and all laws and rules governing the practice of nursing in Ohio.
2. Appear in person for interviews with the Board's designated representative, as requested by the Board or its designee.
3. Submit documentation of her full compliance with the requirements imposed by the Summit County Court of Common Pleas in Case Number CR-2017-10-3636.

Evaluations

4. **Upon the request of the Board or its designee and within sixty (60) days of that request,** at **MS. LYELL's** expense, obtain a mental health evaluation from a Board approved evaluator and provide the Board with complete documentation of such evaluation. Prior to the evaluation, **MS. LYELL** shall provide the mental health evaluator with a copy of this Order. **MS. LYELL** shall execute releases to permit the mental health evaluator to obtain any information deemed appropriate and necessary for the evaluation. The mental health evaluator shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on **MS. LYELL's** license, and a statement as to whether **MS. LYELL** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
5. **If a mental health evaluation is requested,** provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the mental health evaluator described above until released. Further, the Board may utilize the mental health evaluator's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on **MS. LYELL's** license.
6. **Upon the request of the Board or its designee and within sixty (60) days of that request,** at **MS. LYELL's** expense, obtain a chemical dependency evaluation by a chemical dependency professional approved by the Board or its designee and, prior to the evaluation, provide the chemical dependency professional with a copy of this Order. **MS. LYELL** shall execute releases to permit the chemical dependency professional to obtain any information deemed appropriate and necessary for the evaluation. The chemical dependency professional shall submit a written opinion to the Board that includes diagnoses, recommendations for treatment and monitoring, any additional restrictions that should be placed on **MS. LYELL's** license, and a statement as to whether **MS. LYELL** is capable of practicing nursing according to acceptable and prevailing standards of safe nursing care.
7. **If a chemical dependency evaluation is requested,** provide the Board with satisfactory documentation of compliance with all aspects of the treatment plan developed by the chemical dependency professional described above until released. Further, the Board may utilize the professional's recommendations and conclusions from the evaluation as a basis for additional terms and restrictions on **MS. LYELL's** license.

Monitoring

8. Abstain completely from personal use or possession of drugs, except those prescribed, administered, or dispensed to her by another so authorized by law who has full knowledge of **MS. LYELL's** history. **MS. LYELL** shall self-administer prescribed drugs only in the manner prescribed.
9. Abstain completely from the use of alcohol or any products containing alcohol.
10. Submit, at her expense, and on the day selected, blood, breath, hair or urine specimens for drug and/or alcohol analysis at a collection site specified by the Board at such times as the Board may request. Refusal to submit such specimen, or failure to submit such specimen on the day she is selected, or in such a manner as the Board may request, shall constitute a violation of a restriction placed on a license for purposes of Section 4723.28(B), ORC. This screening shall require a daily call-in process. The specimens submitted by **MS. LYELL** shall be negative, except for substances prescribed, administered, or dispensed to her by another so authorized by law who has received a complete copy of this Order prior to prescribing for **MS. LYELL**.

MS. LYELL shall:

- a. Provide a copy of this Order, prior to initiating treatment, to additional treating practitioners;
 - b. Update the list of treating practitioners with the Board within forty-eight (48) hours of being treated by another practitioner;
 - c. Notify the Board of any and all medication(s) or prescription(s) received within twenty-four (24) hours of release from hospitalization or medical treatment; and
 - d. Cause all treating practitioners to complete a medication prescription report for any and all substances prescribed, administered, or dispensed to **MS. LYELL and** submit the report directly to the Board.
11. Attend a minimum of two (2) meetings per week of a support or peer group meeting approved in advance by the Board, or a Twelve Step program, and provide satisfactory documentation of such attendance to the Board every six (6) months.

Employment Conditions

12. **Upon the request of the Board or its designee, prior to working in a position where a license to practice nursing is required, complete and**

submit satisfactory documentation of completion of a nurse refresher course or an extensive orientation approved in advance by the Board or its designee.

13. **Prior to accepting employment as a nurse**, each time with every employer, notify the Board, in writing. Any period during which **MS. LYELL** does not work in a position within the State of Ohio for which a license to practice nursing is required **shall not count** toward fulfilling the probationary period imposed by this Order.
14. Be under a continuing duty to provide a copy of this Order to any new employer **prior to accepting employment as a nurse**.
15. Have current employer(s), if working in a position where a license to practice nursing is required, submit written reports regarding job performance **on a quarterly basis beginning within thirty (30) days of the effective date of this Order or beginning within thirty (30) days of working in a position as a nurse, whichever is later**.
16. Have current employer(s) send documentation to the Board, along with the first employer report, of receipt of a copy of this Order, including the date this Order was received.

Reporting Requirements for Probationary Period

17. Report to the Board, in writing, any violation of this Order within thirty (30) days of the occurrence of the violation.
18. Sign release of information forms allowing health professionals and other organizations to submit the requested documentation directly to the Board.
19. Submit any and all information that the Board may request regarding **MS. LYELL's** ability to practice nursing according to acceptable and prevailing standards of safe nursing practice.
20. Not submit or cause to be submitted any false, misleading, or deceptive statements, information, or documentation to the Board or to employers or potential employers.
21. Submit the reports and documentation required by this Order on forms specified by the Board. All reporting and communications required by this Order shall be sent by email to: monitoring@nursing.ohio.gov or by mail to:

**Compliance Unit
Ohio Board of Nursing
17 South High Street, Suite 660
Columbus, OH 43215-3466**

22. Verify that the reports and documentation required by this Order are received in the Board office.
23. Inform the Board **within five (5) business days**, in writing, of any change in employment status or of any change in residential or home address or telephone number.

LICENSE RESTRICTIONS

In addition to Probationary Terms and Restrictions, MS. LYELL's license will be subject to the following License Restrictions:

Temporary Narcotic Restriction

MS. LYELL shall not administer, have access to, or possess (except as prescribed for **MS. LYELL's** use by another so authorized by law who has full knowledge of **MS. LYELL's** history) any narcotics, other controlled substances, or mood altering drugs. In addition, **MS. LYELL** shall not count narcotics or possess or carry any work keys for locked medication carts, cabinets, drawers, or containers. **MS. LYELL** shall not call in or order prescriptions or prescription refills.

Permanent Practice Restrictions

Unless otherwise approved in advance, in writing, by the Board or its designee, MS. LYELL shall not practice nursing as a registered nurse (1) in a patient's residence; (2) for staffing agencies or pools; (3) for an individual or group of individuals who directly engage **MS. LYELL** to provide nursing services for fees, compensation, or other consideration or who engage **MS. LYELL** as a volunteer; or (4) as an independent contractor or for *locum tenens* assignments.

Unless otherwise approved in advance, in writing, by the Board or its designee, MS. LYELL shall not function in a position or employment where the job duties or requirements involve management of nursing and nursing responsibilities, or supervising and evaluating nursing practice. Such positions include, but are not limited to, the following: Director of Nursing, Assistant Director of Nursing, Nurse Manager, Vice President of Nursing.

FAILURE TO COMPLY

The stay of **MS. LYELL's** suspension shall be lifted and **MS. LYELL's** license to practice nursing as a registered nurse will be automatically suspended if it appears to the Board that **MS. LYELL** has violated or breached any terms or conditions of this Order. Following the automatic suspension, the Board shall notify **MS. LYELL** via certified mail of the specific nature of the charges and automatic suspension of **MS. LYELL's** license. **MS. LYELL** may request a hearing regarding the charges.

DURATION

The Board may only alter the probationary period imposed by this Order if: (1) the Board determines that **MS. LYELL** has complied with all aspects of this Order; and (2) the Board determines that **MS. LYELL** is able to practice nursing according to acceptable and prevailing standards of safe nursing care without Board monitoring, based upon an interview with **MS. LYELL** and review of the reports as required herein.

As indicated above under Employment Conditions, any period during which **MS. LYELL** does not work in a position within the State of Ohio for which a license to practice nursing is required shall not count toward fulfilling the probationary period imposed by this Order.

Motion adopted by a majority vote of the Board members present with Sandra Ranck abstaining.

This Order shall become effective immediately and is hereby entered upon the Journal of the Board for the 27th day of September 2018.

MONITORING

RELEASE FROM SUSPENSION/PROBATION

Action: It was moved by Matthew Carle, seconded by Deborah Knueve, that the following, with the recommendation by Sandra Ranck, Supervising Member for Disciplinary Matters, be released from their Consent Agreement and/or Adjudication Order(s):

Mihalek, Shannon, R.N. 376721 (CASE #13-4317); Schaefer, Olivia, R.N. 382155 (CASE #14-4689); Doe, Bernadette, R.N. 285770 (CASE #15-7905); Lemaster, Andrew, R.N. 359743, P.N. 129167 (CASE #15-5752); Yost, Yvonne, R.N. 351267 (CASE #15-7136); Krohmer, Lydia, P.N. 079137 (CASE #15-0909); Wilson, Crystall, R.N. 364682 (CASE #16-0868); Casas, Irma, R.N. 444760, P.N. 147135 (CASE #16-6131); Ash, Briahna, P.N. 157592 (CASE #16-2087); LaCourse, Shannon, R.N. 324795 (CASE #16-4408); Bjorling, Benjamin, R.N. 412395 (CASE #14-4000); Roth, Jennifer, R.N. 304789 (CASE #17-0197); Moeritz, April, R.N. 394551, P.N. 123898 (CASE #14-0792); Milburn, II, John, R.N. 341255, APRN-CNP 15213 (CASE #15-2875); Leonard, Michelle, P.N. 103586 (CASE #15-0094); Carte, Leslie, P.N. 128088 (CASE #17-0906); Breuer, Carl, R.N. 414766 (CASE #16-0468); Reynolds, Kristine, R.N. 340514 (CASE #15-4070); Butzer, Candas, P.N. 129524 (CASE #14-4132).

Motion adopted by a majority vote of the Board members present with Sandra Ranck abstaining.

RELEASE OF SUSPENSION/PROBATION – EARLY RELEASE

Action: It was moved by Patricia Sharpnack, seconded by Matthew Carle, that the following, with the recommendation by Sandra Ranck, Supervising Member for Disciplinary Matters, be released early from their Consent Agreement(s):

Bond, Chambrell, R.N. 409499, P.N. 147739 (CASE #15-7210); Sheets, Meghan, R.N. 351498 (CASE #15-5497); Anderson, Ella, R.N. 302050 (CASE #16-1433).

Motion adopted by a majority vote of the Board members present with Sandra Ranck abstaining.

RELEASE FROM SUSPENSION/PROBATION - PERMANENT PRACTICE RESTRICTIONS REMAIN

Action: It was moved by Brenda Boggs, seconded by Patricia Sharpnack, that the following, with the recommendation by Sandra Ranck, Supervising Member for Disciplinary Matters, be released from their Consent Agreement(s) with the exception of the permanent practice restrictions that will remain in effect:

McGinty, Jacqueline, R.N. 334186 (CASE #15-0040); Sturdivant, Sharlonn, P.N. 152978 (CASE #12-7047); Hill, Edward, R.N. 373519 (CASE #15-6337); Weatherford, Paulette, R.N. 410025 (CASE #14-5122).

Motion adopted by a majority vote of the Board members present with Sandra Ranck abstaining.

RELEASE FROM SUSPENSION/PROBATION – EARLY RELEASE – PERMANENT PRACTICE RESTRICTIONS REMAIN

Action: It was moved by Sandra Beidelschies, seconded by Brenda Boggs, that the following, with the recommendation by Sandra Ranck, Supervising Member for Disciplinary Matters, be released early from the Consent Agreement with the exception of the permanent practice restrictions that will remain in effect:

Hoppes, Tiffany, R.N. 287099, P.N. 102487 (CASE #10-4713).

Motion adopted by a majority vote of the Board members present with Sandra Ranck abstaining.

RELEASE FROM SUSPENSION/PROBATION – PERMANENT PRACTICE AND NARCOTIC RESTRICTIONS REMAIN

Action: It was moved by Erin Keels, seconded by Matthew Carle, that the following with the recommendation by Sandra Ranck, Supervising Member for Disciplinary Matters, be released from the Consent Agreement(s) with the exception of the Permanent Practice Restriction and the Permanent Narcotic Restriction(s) remaining:

Burgess, Patricia, R.N. 261520 (CASE #15-0042).

Motion adopted by a majority vote of the Board members present with Sandra Ranck abstaining.

RELEASE FROM TEMPORARY NARCOTIC RESTRICTION

Action: It was moved by Daniel Lehmann, seconded by Joanna Ridgeway, that the following, with the recommendation by Sandra Ranck, Supervising Member for Disciplinary Matters, be released from the temporary narcotic restriction within their Consent Agreement(s):

Starrett, Amanda, P.N. 131330 (CASE #16-5361); Adams, Lisa, P.N. 094210 (CASE #17-6432); Eller, Deanna, R.N. 385020 (CASE #16-7260); Fowler, Mary, P.N. 137260 (CASE #16-4497).

Motion adopted by a majority vote of the Board members present with Sandra Ranck abstaining.

REINSTATEMENT REQUEST PER CONDITIONS OF CONSENT AGREEMENT

Action: It was moved by Joanna Ridgeway, seconded by Daniel Lehmann, that the following, with the recommendation by Sandra Ranck, Supervising Member for Disciplinary Matters, be reinstated subject to the probationary terms and restrictions of their Consent Agreement(s):

Williams, Melissa, P.N. 134980 (CASE #18-1172); Wiczen, Sarah, R.N. 369828, P.N. 112802 (CASE #16-0198); Peirson, Staci, R.N. 319684 (CASE #17-4846); Hutchinson, Marian, P.N. 095939 (CASE #17-6390); Curry, Kathy, R.N. 378255 (CASE #17-7273); Beach, Dionna, P.N. 126622 (CASE #18-0527).

Motion adopted by a majority vote of the Board members present with Sandra Ranck abstaining.

REINSTATEMENT REQUEST PER CONDITIONS OF ADJUDICATION ORDER

Action: It was moved by Nancy Fellows, seconded by Joanna Ridgeway, that the following, with the recommendation by Sandra Ranck, Supervising Member for Disciplinary Matters, be reinstated subject to the probationary terms and restrictions of their Adjudication Order(s):

Mendenhall, Kari, R.N. 322321 (CASE #12-1580); Rogers, LaShonda, P.N. 153566 (CASE #13-7841); Sprague, Troy, R.N. 351953 (CASE #14-2348).

Motion adopted by a majority vote of the Board members present with Sandra Ranck abstaining.

MOTION TO APPROVE

Action: It was moved by Barbara Douglas, seconded by Deborah Knueve, that the Board accept the following approvals made by Sandra Ranck, Supervising Member for Disciplinary Matters:

Brannon, Sabrina, P.N. 156022 (CASE #12-7367) – Accept a nursing position with Rogers Home Care in South Euclid, Ohio.

Cornell, Gregory, P.N. 160772 (CASE #17-2190) – Accept Michael Prystash, LPCC to complete the chemical dependency treatment.

Griggs, Holly, P.N. 145855 (CASE #11-1784) – Accept a nursing position with Care Core at Westmoreland in Chillicothe, Ohio.

Clifford, Hayley, R.N. 450185 (CASE #18-0400) – Accept Michelle Dineen to complete the chemical dependency evaluation.

Cope, Misti, P.N. 128229 (CASE #08-2821) – Accept Margaret Scholle LICDC to complete the chemical dependency evaluation.

Payette, Pamela, R.N. 387015, P.N. 141894 (CASE #17-6684) – Accept a nursing position with Capitol Gardens Rehabilitation in Columbus, Ohio.

Johnson, Dawn, R.N. 291264 (CASE #08-3347) – Accept a nursing position with Candlewood Healthcare & Rehabilitation in East Cleveland, Ohio.

Thier, Penny, R.N. 178450 (CASE #17-2761) – Accept Margaret Scholle, LISW-S, LICDC to complete the chemical dependency evaluation.

Matusiak, Alicja, R.N. 359101, APRN-CNP 16032 (CASE #15-7924) – Accept the Standard Care Arrangement with Dr. Lisa Werner dated 8/5/2018 and with Dr. Abdul Hasan dated 7/18/2018.

Swartz, Hannah, R.N. 412850, P.N. 150611 (CASE #17-7004) – Accept Christopher Robinson, LCDC II to complete the chemical dependency evaluation.

Smith, Theodore, P.N. 168854 (CASE #18-2227) – Accept David Logan, LICDC to complete the chemical dependency evaluation.

Caserta, Amy, R.N. 454311 (CASE #18-3069) – Accept Luran Gibert, LISW, MSW to complete the chemical dependency evaluation.

Holmes, Camille, R.N. 384238 (CASE #17-2198) – Accept Linda Hritz, LISW-S, MSW to complete the mental health evaluation.

Moore Sims, Barbara, P.N. 079504 (CASE #14-0442) – Accept a nursing position with Englewood Health and Rehab in Englewood, Ohio.

Ward, Jessica, R.N. 362748 (CASE #15-4283) – Accept an Interim Director of Nursing position at Eagle Pointe Post Acute Rehab and Living Center in Orwell, Ohio, effective September 6, 2018.

Binion, LaWanda, R.N. 424815 (CASE #15-8768) – Accept an Interim Director of Nursing position at University Hospitals Rehab Hospital in Beachwood, Ohio, effective August 21, 2018.

Jones, Diane, R.N. 418441 (CASE #17-5595) – Accept the learning plan submitted by Luann Snyder, MSN, RN.

Rimac, Helen, R.N. 269159 (CASE #15-3489) – Accept Karal Stern, LISW-S, LICDC-CS to provide mental health counseling.

Webber, Rosalia, P.N. 152160 (CASE #16-3355) – Approval to work as a nurse.

Morrison, April, R.N. 294508 (CASE #06-1497) – Approval to administer, have access to, or to possess (except as prescribed for Ms. Morrison's use by another so authorized by law who has full knowledge of Ms. Morrison's history) any narcotics, other controlled substances, or mood-altering drugs, count narcotics or possess or carry any work keys for locked medication carts, cabinets, drawers, or containers at Mercy Health Jewish Hospital in Cincinnati, Ohio.

Johnson, Simone, R.N. 322175, P.N. 106593 (CASE #12-6407) – Accept a nursing position with McCullough Hyde Hospital in Oxford, Ohio.

Fannon, Elyn, R.N. 352186 (CASE #15-1821) – Accept a nursing position with Nationwide Children's Hospital as a Nurse Clinician in Columbus, Ohio.

Deran, Jennifer, P.N. 137078 (CASE #17-6015) – Accept Nicole Kimble, LISW to complete the chemical dependency evaluation.

Christner, Ashley, P.N. 155932 (CASE #17-5399) – Accept Amy Gale, Med, PC to complete the chemical dependency evaluation.

Buescher, Lysa, RN 243517 (CASE #17-4858) – Accept Dr. Abe Soliman as the addiction psychiatrist and to provide mental health counseling.

Booker, Mark, R.N. 311649, APRN-CRNA 16616 (CASE #17-1762) – Accept Teresa Sibert, LPCC-S to complete the chemical dependency evaluation.

Lynch, Kenya, R.N. 422153, P.N. 123408 (CASE #18-0279) – Approval to work as a nurse.

Leeson, Cara, R.N. 390608 (CASE #16-4227) – Accept Samantha Mishne, LICDC-CS, LISW-S to complete the mental health evaluation.

Hidalgo, Kathleen, R.N. 201746 (CASE #15-6358) – Accept Joseph Humphries, LPCC-S, LSW to complete the mental health evaluation.

Powell, Aubrey, R.N. 398306 (CASE #15-4463) – Accept Diana Pierce, LPC to complete the chemical dependency evaluation.

Drapola, Kristin, R.N. 242459 (CASE #13-4565; #14-0426; #14-2343) – Accept Carol Henderson, LICDC, LSW to complete the chemical dependency evaluation.

Baldwin, Tharner, P.N. 130754 (CASE #16-4471) – Accept Darla Menz, LPCC-S to complete the mental health counseling.

Flynn, Maureen, R.N. 322587 (CASE #16-4904) – Accept Michele Cash, DNP to complete the mental health evaluation.

Ricci, Jessica, R.N. 341181 (CASE #17-7404) – Approval to work as a nurse.

Reid, Patrick, R.N. 413307 (CASE #18-1850) – Accept Elizabeth McCreedy, LISW to complete the chemical dependency evaluation.

Nelson, Shelbi, R.N. 402915 (CASE #17-0240) – Accept Jan Zachrich, MSN, RN to complete the Educational Needs Assessment and accept the learning plan submitted.

Jones, Leslie, R.N. 366274 (CASE #17-3341) – Accept John Harvey, LPC-Supervisor, LCDC to complete the chemical dependency evaluation.

Erin Keels abstained on Fannon, Elyn, R.N. 352186 (Case #15-1821); Joanna Ridgeway abstained on Flynn, Maureen, R.N. 322587 (Case #16-4904).

Motion adopted by a majority vote of the Board members present with Sandra Ranck abstaining.

MISCELLANEOUS MONITORING MOTIONS

Action: It was moved by Deborah Knueve, seconded by Barbara Douglas, the Board approve the following, as recommended by Sandra Ranck, Supervising Member for Disciplinary Matters:

Skufca, Cherise, R.N. 373489 (CASE #18-1118) – License reinstatement and to accept Linda Hritz, LICDC to complete the chemical dependency evaluation.

Rankin, Pamela, R.N. 320541 (CASE #16-5086) – Completion of requirements in the November 16, 2017 Consent Agreement and license reinstatement.

Moline, Sara, R.N. 355719 (CASE #17-1324) – Completion of requirements in the March 22, 2018 Consent Agreement.

Flynn, Natalie, R.N. 266263, CNP 09772 (Closed) (CASE #17-4699) – Issuance of APRN-CNP 023418 license pursuant to the terms of the January 25, 2018 Consent Agreement.

Moore, Valerie, R.N. 303185 (CASE #18-0578) – Completion of 12-week Professional AfterCare Group at Glenbeigh as required by paragraph 1 of the March 22, 2018 Consent Agreement.

Bosner, Kelsie, P.N. 159951 (CASE #18-0344) – Completion of outpatient chemical dependency treatment as required by paragraph 1 of the July 26, 2018 Addendum to Consent Agreement.

Waters, Latasha, P.N. 160369 (CASE #15-8729) – Release from drug testing in the May 18, 2017 Adjudication Order.

Munn, Susan, P.N. 106305 (CASE #07-3486) – Early release from probation with permanent practice restrictions to remain in effect and approval to accept nursing employment with Primary Care Nursing Services in Dublin, Ohio providing nursing care to any patients.

Clayton, Beverly, R.N. 207605, APRN-CNP 11218 (CASE #15-8409) – Release from the probationary terms and restrictions set forth in the March 17, 2016 Consent Agreement and September 21, 2012 Adjudication Order. The indefinite temporary acute and critical care restrictions in the March 2016 Consent Agreement remain in effect.

Durinka, Kelly, P.N. 102412 (CASE #18-0955) – Reinstatement per the May 17, 2018 Addendum to January 25, 2018 Consent Agreement and approval to work as a nurse.

Motion adopted by a majority vote of the Board members present with Sandra Ranck abstaining.

COMPLETION OF REQUIREMENTS

Action: It was moved by Matthew Carle, seconded by Deborah Knueve, that the Board approve prior completion of Reprimand Consent Agreement(s) terms and restrictions for the following:

Berenics, Sherri, P.N. 089007 (CASE #16-0641); Pack, Heather, R.N. 410859 (CASE #17-6314); Case, Kimberly, R.N. 394852 (CASE #15-2524); Shick, Roxanne, P.N. 165216 (CASE #17-5301); Stratton, Cody, R.N. 315060 (CASE #17-1411); Haas-Dugan, Marylynn, R.N. 196980 (CASE #15-4016); Terrell, Ashley, P.N. 148126 (CASE #17-4975); Cameron, Kathleen, R.N. 410836 (CASE #17-5633); Spicer, Kelly, R.N. 284402 (CASE #14-6465); Caraveo, Dawn, D.T. 001054 (CASE #17-1825); Pierce, Tammy, P.N. 111308 (CASE #17-0110); Monroe, Erica, P.N. 121893 (CASE #17-4582); Nzisabira, Nicodeme, R.N. 425395, P.N. 141635 (CASE #16-6702); Adedipe, Adebimpe, R.N. 262813, APRN-CNS 019387 (CASE #18-0391); Hosking, Mary, P.N. 093998 (CASE #17-5914); Deck, Brooke, R.N. 363335 (CASE #16-5777); Vierling, Jessica, MAC 000611 (CASE #18-0930); Buyer, Ann, P.N. 097138 (CASE #16-5103); Martin,

Brenda, R.N. 228582 (CASE #15-5204); Craft, Agnes, R.N. 231840 (CASE #18-0068); Warner, Alison, R.N. 389768 (CASE #16-1803); Smith, Teaninau, P.N. 135944 (CASE #15-8742); Richardson, Lakeasha, P.N. 167884 (CASE #17-4823); Stuhldreher, Stacey, R.N. 403393 (CASE #17-6336); Sowinski, Jessica, R.N. 418264, P.N. 154513 (CASE #16-6243); Samoylicz, Jennifer, R.N. 454310 (CASE #18-2982); Baker, Lori, P.N. 107187 (CASE #17-5412); Buzon, Stacy, R.N. 367358, APRN-CRNP 019460 (CASE #17-5527); Reising, Tamara, R.N. 358390 (CASE #17-2300); Le Blanc, Scarlett, R.N. 331412, APRN-CNP 019675 (CASE #17-1584); Chandler, Jessica, R.N. 377211, P.N. 123298 (CASE #16-7313); Kimmet, Mary, R.N. 265081 (CASE #17-4794).

Patricia Sharpnack abstained on Cameron, Kathleen, R.N. 410836 (CASE #17-5633); and Adedipe, Adebimpe, R.N. 262813, APRN-CNS 019387 (CASE #18-0391).

Motion adopted by a majority vote of the Board members present with Sandra Ranck abstaining.

REPORTS TO THE BOARD

Other Reports

Strategic Plan – Status Report

Director Houchen presented the Strategic Plan Status Report. President Sharpnack asked about encouraging employers to continue to submit the TERCAP data. Director Houchen stated that staff would increase communications with employers. President Sharpnack commended Ms. Robinson and the Licensure Unit on their excellent job in timely issuing ATTs.

Annual Report for Fiscal Year 2018

Director Houchen presented the Annual Report for Fiscal Year 2018.

Action: It was moved by Matthew Carle, seconded by Deborah Knueve, that the Board approve the Ohio Board of Nursing Annual Report for Fiscal Year 2018 as submitted. Motion adopted by unanimous vote of the Board members present.

Nurse Education Grant Program - Quarterly Report

L. Emrich presented the quarterly report for the Nurse Education Grant Program.

Open Forum – Thursday, September 27, 2018 at 10:32 a.m.

There were no participants for Open Forum.

GENERAL INFORMATION (FYI)

The Board reviewed the general information items.

Item 6.4 was added to the agenda after the Board received a letter yesterday from the Ohio Association of Advanced Practice Nurses (OAAPN). OAAPN asked that the Board reconsider its vote from the July 2018 meeting regarding the

recommendation of the Advisory Committee on Advanced Practice Registered Nursing (Committee) to add another Committee member at this time. OAAPN also requested that the June 2018 Committee minutes be revised. Also included with this agenda item were transcribed portions of the July Board meeting discussion regarding the Committee recommendations. Board members reviewed the information and stated they did not see anything that would have altered the Board's decisions regarding the recommendations.

Director Houchen noted that according to the Ohio Open Meetings Act, minutes do not have to be an exact transcript of every word said. However, due to the concerns raised, for future meetings of the APRN Advisory Committee, a court reporter will provide a transcription report of the meeting that will serve as the meeting minutes. Sandra Ranck asked if a court reporter would be used for all advisory group meetings. Board members discussed that a court reporter is not needed for other advisory groups since advisory group members have stated no concerns or issues throughout the years regarding the content of minutes.

BOARD GOVERNANCE

Report on the NCSBN Annual Meeting and Delegate Assembly

Patricia Sharpnack, Brenda Boggs, and Joanna Ridgeway reported on the NCSBN Annual Meeting and Delegate Assembly.

Designate of Board Committee on Advisory Group Appointments

Barbara Douglas, Sandra Ranck, and Patricia Sharpnack volunteered to serve on the Board Committee for Advisory Group appointments. The Committee will meet November 28, 2018 at 12:00 p.m.

Review of November Board Meeting Schedule

President Sharpnack reviewed the November 28-29, 2018 meeting schedule. The public Rules Hearing will be on Wednesday, November 28, at 1:00 p.m.

Elections for Board Officers – November Meeting

Board Officers will be elected at the November meeting and Advisory Group Chairs will be appointed.

EVALUATION OF MEETING AND ADJOURNMENT

Several Board members commented about the high volume of cases for review in preparation of the Board meeting and whether there could be consideration about increasing the number of preparation hours for which Board members are compensated. Board staff will review the preparation hours being reported. Nancy Fellows stated she realizes much of the work is uncompensated, but she considers the work public service.

On Wednesday, September 26, 2018 the meeting adjourned at 1:30 p.m. On Thursday, September 27, 2018 the meeting adjourned at 11:27 a.m.

Patricia A. Sharpnack, DNP, RN
President

A handwritten signature in black ink that reads "Patricia A. Sharpnack DNP, RN." The signature is written in a cursive style.

Attest:

Betsy Houchen, RN, MS, JD
Executive Director

A handwritten signature in black ink that reads "Betsy J. Houchen". The signature is written in a cursive style.