

arizona STATE BOARD OF NURSING

VOL 4 • N°3 • SEPT 2009
3RD QUARTER

REGULATORY JOURNAL



The Importance of HIPAA for Nurses

NEW AND OLD PUBLIC POLICY CHANGES IMPACTING ARIZONA NURSES
SUMMARY OF CHANGES TO ARIZONA NURSE PRACTICE ACT: SENATE BILL 1105

PUBLISHED BY

ARIZONA STATE BOARD OF NURSING

4747 North 7th Street, Suite 200
Phoenix, AZ 85014-3653
Phone: 602.771.7800
Main fax: 602.771.7888
CANDO fax: 602.771.7882
General e-mail: arizona@azbn.gov
Website: www.azbn.gov

GOVERNOR

The Honorable Janice K. Brewer

Joey Ridenour, RN, MN, FAAN
EXECUTIVE DIRECTOR

Judy Bontrager, RN, MN
ASSOCIATE DIRECTOR/OPERATIONS

Valerie Smith, RN, MS, FRE
*ASSOCIATE DIRECTOR/ INVESTIGATIONS/
COMPLIANCE*

Pamela Randolph, RN, MS
*ASSOCIATE DIRECTOR/EDUCATION &
EVIDENCE BASED REGULATION*

BOARD MEMBERS

Kathy Malloch, RN, MBA, PhD, FAAN
PRESIDENT

Patricia A. Johnson, LPN
VICE-PRESIDENT

M. Hunter Perry
SECRETARY

Denise Link, RNP, PhD, CNE, FNAP
MEMBER

Karen Hodges Hardy, RN, MSN
MEMBER

Kathy Scott, RN, MPA, PhD, FACHE
MEMBER

Steven T. Robertson, LPN, CHPLN
MEMBER

Kathryn L. Busby, J.D.
PUBLIC MEMBER

•
EDITION 15

arizona STATE BOARD OF NURSING

REGULATORY JOURNAL

CREATED BY:

Virginia Robertson, PUBLISHER
vrobertson@pcipublishing.com
Publishing Concepts, Inc.
14109 Taylor Loop Road
Little Rock, AR 72223

**FOR ADVERTISING
INFORMATION:**

Steve McPherson
smcpherson@pcipublishing.com
501.221.9986 • 800.561.4686
www.thinkaboutitnursing.com

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

VOL 4 • N°3 • SEPT 2009
3RD QUARTER



4 From the Executive Director: New and Old Public Policy Changes Impacting Arizona Nurses

6 From the Board President: Evidence: Firm Grounding in Turbulent Times

9 Summary of Changes to Arizona Nurse Practice Act: Senate Bill 1105

14 The Importance of HIPPA for Nurses

16 Education Corner: Program Complaint/ Investigation Process

19 2010 Seventh Annual CNA Education Retreat



20 CNA Corner

22 CNA Disciplinary Actions

24 RN/LPN Disciplinary Actions



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

New and Old Public Policy Changes Impacting Arizona Nurses

As many of you are aware, the Arizona State Board of Nursing Omnibus Legislation sponsored by Sen. Carolyn Allen, was signed into law on July 13, 2009. Sen. Allen, Greg Harris, the governor's office and the Nurse Practice Act Steering Committee are to be recognized for their leadership and perseverance in successfully having this legislation passed during a turbulent 2009 legislative session. The healthcare community has a deep respect and appreciation for the patient advocacy role Sen. Allen has played in Arizona over the many years and extends special thanks for her leadership in ensuring health policy is relevant to the needs of Arizona citizens in the 21st century.

Implementation of Senate Bill 1105 will go into effect 90 days from the time of the signing of the bill. As shared with you in the Jan. 2009, edition of the AzBN Regulatory Journal, there are basically 14 substantive public policy changes as found on page 9. Three examples are:

1. Increased board members from nine to 11 to allow representation by two regulated groups not previously represented on the board: advanced practice nurses and certified nursing assistants.
2. Expanded executive director delegated duties to include closure of investigative cases that are without merit thus reducing the cycle time of low risk or no risk cases.
3. Allows the Board to conduct pilot programs to collect research to support evidenced based regulation and informed policy changes.

The other area of public policy interest that impacts you relates to the passage of the Health Insurance Portability & Accountability Act (HIPAA) enacted by Congress in 1996 and formally implemented in 2003 by the Department of Health & Human Resources. The *Los Angeles Times* last year reported HIPAA violations when health care workers accessed the electronic medical records of celebrities Britney Spears and Farrah Fawcett out of curiosity without any legitimate purpose. A number of employees were terminated when it was determined they did not need to know the confidential information.

In July 2009, three employees of St. Vincent Medical Center, Little Rock, Ark., pled guilty to misdemeanor federal charges when they inappropriately accessed the medical records of a television anchor that was slain in Oct. 2008. The physician stated he was at home and logged in to determine if the news reports were accurate.

Another employee logged in up to 12 times without legitimate purpose. Each faces a maximum penalty of one year in prison and fine up to \$50,000 or both. Penalties for HIPAA violations in some instances may include fines up to \$250,000 and imprisonment up to 10 years for knowing misuse of individual identifiable health information.

According to author Ann W. Latner, JD in an Oct. 2008, article downloaded from <http://www.renalandurologynew.com>, "more than 34,000 complaints of privacy violation have been filed. About 80 percent were resolved and simply dismissed due to the corrective actions taken."

According to Latner, about 400 unresolved cases have been referred to the federal Department of Justice and a handful been prosecuted." She further states that the low prosecution rate is likely to change as violations are taken more seriously and the government gears up for these types of cases. Latner also referenced a staff nurse who faces jail time for HIPAA violations when she accessed a patient's medical records, gathered information and provided that information to someone else, knowing that it would be used in a way that would be harmful to the patient.

The Board staff was recently asked: "What are the HIPAA violations in regards to patient identifiers?" Please be aware of your facilities HIPAA policies. According to one privacy officer, examples of HIPAA patient identifiers are: account numbers, name (s), certificate/license numbers, device identifiers, medical record numbers, birth date, photographs and images of patients, postal address, e-mail address, social security number, fax numbers, telephone numbers, health plan numbers, vehicle identifiers, IP address numbers, web URL's and any other unique identifying number, characteristic or code.

Nursing Regulation Cases Studies related to misuse of confidential patient information can be found on page 14. Sister Rachel Torrez, AzBN Nurse Consultant, shares with you HIPAA provisions, the importance of patient privacy and cited violations of the Nurse Practice Act for each investigative case.

Learn to protect not only the patients but yourself by understanding both the "new and old public policy changes".

Joey Ridenour RN MN FAAN

Joey Ridenour, RN, MN, FAAN



From the Board President
KATHY MALLOCH, PHD, MBA, RN, FAAN

Evidence: Firm Grounding in Turbulent Times

The intense and far reaching economic challenges have further heightened the judicious use of resources. Over the last 10 years, nurses have increasingly engaged in the advancement of evidence-based practice as the most effective way in which to achieve the best patient outcome at the lowest cost. Having good rationale or evidence to make decisions is now more critical than ever in order to create and sustain value whether it is about patient care, nursing leadership or nursing regulation.

Having access to the best evidence is the first step in an evidence-based practice model. Also essential are knowledge of the patient values and competence of the nurse as the caregiver using the evidence. Evidence-based practice considers all three elements as the means to optimize outcomes and use resources efficiently.

It is the integration of these three essential elements; evidence, the values of the patient and the skills of the caregiver that supports effective and sustainable patient care. Nursing professionals work diligently every day to provide patient care based on the best clinical evidence available, the needs and values of each patient and the resources available in the environment.

These same elements or considerations apply to nursing regulation as well; research evidence, community needs and values and the skills of the members of the board of nursing. Using an evidence-driven approach is especially important in times of economic crisis when resources are severely limited.

Once the state of Arizona achieved consensus on the 2009 budget, we were fortunate to have Senate Bill 1150 sponsored by Sen. Carolyn Allen, passed by the legislature. SB 1150 supports more effective and evidence-based regulatory practices.

The evidence for nursing regulation is emerging from the analysis of the outcomes and processes of other boards of nursing, best practices identified by their constituencies and rigorous research studies. Increasingly, boards of nursing, supported by funding from the National Council of State of Boards of Nursing, are designing and conducting research studies to identify the most effective models for discipline, the impact of clinical simulation in the preparation of nurses, optimal nursing board structures and licensing processes. To be sure, the results of these studies provide only the first level of information for boards of nursing and the public they serve, the research evidence. The next step is to determine if and how this evidence is linked to the Arizona community and then if the evidence can be implemented within the resources available in the state. It is about taking reliable data and turning it into information to make decisions. For example, if research identifies optimal remediation practices that require significant number of additional staff, these practices might not be possible. Or a modified version of the evidence-based recommendation might be the best that can occur. Or efforts might need to acquire the needed resources to engage in the best practice for remediation. Several options exist as to how best to use research evidence.

Members of the Arizona State Board of Nursing, in open session, regularly examine new evidence, recommendations from the community and comments from individual licensees. In the past year, the board has considered:

- The number of members and representation for the board of nursing and determined that representation was needed from those regulated over the past 20-40 years such as the advanced practice community and the nursing assistant community. These recommendations were supported and passed in SB 1150 in June.
- The value of pilot programs to consider and advance innovative ideas. The Arizona nursing community has many innovative ideas that require testing and validation. SB 1150 now allows for pilot programs through the board of nursing such as the Pilot Study Medication Technician in Long Term Care, in an effort to generate and validate regulatory evidence to change public policy.
- Recommendations from community members were made to consider changing the scheduling of cases and agendizing potential discipline prior to the meeting similar to the practices of the Arizona Medical Board. The recommendations were examined and believed to decrease the licensee or certificate holder's opportunity to address the board during the initial "probable cause" component of the investigation.
- Elimination of dialogue with licensees specific to their case at board meetings was recommended by community members as they believed the dialogue with the board mirrored the hearing process. No evidence was found to support this model. Members of the board believed licensees and certificate holders should have the opportunity to briefly address the board and declined to adopt this recommendation. As a result of this discussion, those addressing the board are informed that they are not required to address the board.

The members of the Arizona State Board of Nursing encourage the members of the Arizona community to continue to share their comments and ideas to advance evidence-based regulation practices. We believe this is the best way to protect and serve the public of Arizona.

Kathy Malloch, PhD, MBA, RN, FAAN

Kathy Malloch, PhD, MBA, RN, FAAN
Board President

STAFF DIRECTORY

ADMINISTRATION

Joey Ridenour, RN, MN, FAAN
Executive Director
602.771.7801
jridenour@azbn.gov

Judy Bontrager RN, MN
Associate Director-Operations &
Licensing
602.771.7802
jbontrager@azbn.gov

Valerie Smith RN, MS, FRE
Associate Director
Investigations/Compliance
602.771.7804
vsmith@azbn.gov

Pamela Randolph RN, MS
Associate Director Education &
Evidenced Based Regulation
602.771.7803
prandolph@azbn.gov

Lila Wiemann
Administrative Assistant to the
Executive Director and Associate
Director Investigations/Compliance
602.771.7806
lwiemann@azbn.gov

Cristina Oates
Administrative Assistant to Associate
Director Operations/Licensing
602.771.7805
coates@azbn.gov

CANDO

Connie Linck, RN, MN
Nurse Consultant – CANDO
602.771.7864

clinck@azbn.gov
Olga Zuniga
Administrative Secretary –
Monitoring & CANDO
602.771.7865
ozuniga@azbn.gov

COMPLAINTS-INTAKE

Karen Grady, MS, RN, FNP, BC
Complaints-Intake Triage
Coordinator - Advanced Practice
Nurse Consultant
602.771.7821
kgrady@azbn.gov

Jene Martinez
Triage Secretary
602.771.7829
jmartinez@azbn.gov

EDUCATION

Karen Gilliland
Administrative Assistant
602.771.7856
kgilliland@azbn.gov

Lila Van Cuyk, RN, BSN
Nurse Practice Consultant/
CNA Programs
602.771.7857
lvancuyk@azbn.gov

FISCAL SERVICES

Randi Orchard
Fiscal Services Manager
602.771.7810
rorchard@azbn.gov

Norma Salter
Accounting Technician
602.771.7809
nsalter@azbn.gov

HEARINGS

Amy Foster, JD
Senior Investigator
602.771.7850
afoster@azbn.gov

Susan Barber, RN, MSN
Nurse Practice Consultant-
Hearing Dept
602.771.7851
sbarber@azbn.gov

Vicky Driver
Admin. Assistant-Hearing Dept
602.771.7852
vdriver@azbn.gov

INVESTIGATIONS NURSE PRACTICE CONSULTANTS

Angela Hill, RN, BSN
602.771.7811
ahill@azbn.gov

Betty Nelson, RN, MS
602.771.7813
bnelson@azbn.gov

Janeen Dahn, MS, FNP-C
Advanced Practice Nurse Consultant
602.771.7814
jdahn@azbn.gov

Jeanine Sage, RN, MSN
602.771.7815
jsage@azbn.gov

Mary Rappoport, RN, MN
602.771.7816
mrappoport@azbn.gov

Nan Twigg, RN, MSN
520.615.4945
ntwigg@azbn.gov

Pat Midkiff, RN, MN
602.771.7827
pmidkiff@azbn.gov

Sister Rachel Torrez, RN, MS
602.771.7818
srachel@azbn.gov

Stephanie Nelson, RN, MS
602.771.7819
snelson@azbn.gov

Tammi Bymers, RN, MSN
602.771.7820
tbymers@azbn.gov

V. Ann Schettler, RN, MHL, CLNC
602.771.7812
aschettler@azbn.gov

SENIOR INVESTIGATORS

Doug Parlin
602.771.7822
dparlin@azbn.gov

Frank Curatola
602.771.7823
fcuratola@azbn.gov

Kirk Olson
602.771.7824
kolson@azbn.gov

Ron Lester
602.771.7825
rlester@azbn.gov

Stoney Blair
602.771.7826
sblair@azbn.gov

LEGAL SECRETARIES

Barbara Melberg
602.771.7840
bmelberg@azbn.gov

Dorothy Lindsey
602.771.7841
dlindsey@azbn.gov

Esther Garcia
602.771.7842
egarcia@azbn.gov

Trina Smith
602.771.7844
tsmith@azbn.gov

INFORMATION TECHNOLOGY

Cory Davitt
Network Operations Director
602.771.7808
cdavitt@azbn.gov

Adam Henriksen
Information Technology Director/
Webmaster
602.771.7807
ahenriksen@azbn.gov

LICENSING

Becky Melton
RN/LPN Exam
602.771.7830
bmelton@azbn.gov

Donna Frye
Fingerprints/Endorsements
602.771.7831
dfrye@azbn.gov

Helen Tay
CNA Exam/Endorsements
602.771.7832
htay@azbn.gov

Jennifer McWilliams
RN/LPN Renewals
602.771.7833
jmcwilliams@azbn.gov

Paula Delphy
RN/LPN Endorsements
602.771.7834
pdelphy@azbn.gov

Rhonda Rogers
CNA Renewals
602.771.7835
rrogers@azbn.gov

Xheni Ndreu
602.771.7836
xndreu@azbn.gov

MAILROOM

Debra Kunkle
602.771.7876
dkunkle@azbn.gov

MONITORING

Michelle Mills, RN, MA
Nurse Practice Consultant
602.771.7862
mmills@azbn.gov

Dolores Hurtado
Legal Assistant
602.771.7861
dhurtado@azbn.gov

Brent Sutter
Legal Secretary
Monitoring & CANDO
602.771.7860
bsutter@azbn.gov

RECEPTIONISTS

Hazel Degrade
602.771.7870
hdegrade@azbn.gov

Marlane Brosseau
602.771.7871
mbrosseau@azbn.gov

Nancy Davis
602.771.7872
ndavis@azbn.gov

Susan Kingsland
602.771.7873
skingsland@azbn.gov

RECORDS

Anne Parlin
602.771.7875
aparlin@azbn.gov

Summary of Changes to Arizona Nurse Practice Act: SENATE BILL 1105

	A. Law/Section/Proposed Changes	B. Rationale/Evidence Supporting Change	C. Expected Outcome/Impact Patient Safety	D. Potential Unintended Consequences
Board Members	<p>32-1602 Board of Nursing; Board Members & Terms; Includes adding two new board members to the current nine member board: one registered nurse practitioner or clinical nurse specialist and one member being a nursing assistant or nursing assistant instructor.</p>	<p>AzBN has been regulating nurse practitioners for approximately 40 years and certified nursing assistants since 1991. Therefore, the addition of two members provides for representation of disciplines currently regulated. The two new members will add depth/breadth to the board regarding standards of practice and standards of patient care in the regulation of approximately 100,000 APRNs/RNs/LPNs/CNAs. Board member terms automatic terms were not previously stated.</p>	<p>The average size of most boards of nursing is 11 members. Additional members will enhance and promote diversity as well as multiple perspectives when debating issues and making decisions regarding patient safety.</p>	<p>Adding two new board members will increase the expense of annual meetings by approximately \$10,000.</p>
Executive Director	<p>32-1605.1 Executive Director; powers; duties; Changes to 32-1605.1 allows the Executive Director to: *issue and renew licenses, certificates and prescribing or dispensing; *approve nursing assistant programs. Based on board approved substantive policy statement and requirement to be reported out at the next board meeting; * dismiss complaints if there is not evidence substantiating the complaint; * enter into stipulated agreements for those admitting to chemical dependency; * close complaints resolved through board approved settlement; * issue letters of concern; * .in lieu of summary suspension hearing and if respondent agrees, enter into consent agreement if there is sufficient evidence to warrant emergency action</p>	<p>The legislation streamlines the Executive Director's (ED) authority to facilitate more timely decision making on issues of licensing and investigations. Specifically the ED will have delegated authority to: *take action on specific types of license applications previously referred for board action and the case has typically closed without discipline. *reduce the cycle time on meritless complaints through earlier closure as well as closing out those non discipline cases resolved through a letter of concern *facilitate the consent agreement process for those admitting to chemical dependency * in cases when emergency action is required and the person admits to the findings of fact and conclusion of law without a summary suspension being held, the ED will have the authority to accept the consent agreement which would be reported out at the next meeting</p>	<p>Nurses and nursing assistants who have low risk/harm issues and concerns will have licensing/certifying decision making processes facilitated thereby reducing the investigative cycle time to close the case and therefore enter the workforce. Also, individuals who have complaints submitted and are found to be without merit or low risk will have earlier closure of their investigative case. The protection of the public will be improved through earlier case closure to facilitate nurses and nursing assistants being employed and being available to provide care.</p>	<p>Some members of the public may expect the board to review each and every case submitted to the board even if the case is without merit. Any member of the public may specifically request the board hear a case and therefore the delegated authority would be voided or would not apply.</p>

continued on page 10

**Retirement Status:
RN/LPN**

A. Law Section/Proposed Changes
ARS 32-1606 Powers and duties of board; changes allows retirement status on request to retired nurses who are or were licensed under this chapter, who have no open complaint or investigation pending against them, and who are not subject to discipline.
ARS 32-1636 Use of titles or abbreviations; changes to 32-1636 (E) states a nurse who is granted retirement status shall not practice nursing but may use the title :Registered Nurse-Retired” or “RN-Retired” or “Licensed Practical Nurse-Retired” or “LPN-Retired”, as applicable.

Since the advent of the practice requirement for maintaining a license, the Board has received requests for retirement status for nurses who no longer practice but wish to use their nursing licensure credentials (RN/LPN). Other boards of nursing have a status which allows retiring nurses to retain the use of the title they have used for their career and preserves their sense of identity with the profession.

Nurses who are no longer practicing can still use their nursing license credential, retired, and continue to identify with the profession.

This will have no impact on patient safety and will support those nurses who wish to use this designation.

There could potentially become confusion as to the role of the “Retired RN or LPN”.

**Board Accepting
Monies/Services**

ARS 32-1606 Powers and duties of the board; changes to 32-1606 (a) (11) allows the Board to accept monies and services to assist in the implementation or enforcement of activities the board is required to conduct relating to chapter 15.

This will allow the Board to apply for and accept funding to more fully engage in research studies related to its mission and function.

Research such as the effectiveness and safety of medication aides or ways to enhance the measurement of clinical competency are examples of research studies which could have a positive impact on patient care. Research is costly but essential to provide evidence based - informed regulation

Research outcomes are sometimes not supported in changes in public policy

Pilot Programs

32-1606 Powers and duties of the board; Changes to 32-1606 (9) allow the Board adopt rules for conducting pilot programs to implement innovations in nursing practice, education or regulation.

Currently innovations in education, practice or regulation are bound by existing statutes and rules. Members of the nursing community have approached the Board asking for an exemption to regulation to implement a rational scientific-based innovation. Currently the Board has no mechanism to grant such an exemption.

Rulemaking will establish rigorous standards for granting exemptions to regulation for the purposes of innovation and improvement of health care delivery, nursing education, and regulation.

Rulemaking is a lengthy process and some stakeholders may be frustrated with the time commitment and resources required. Board resources will need to be expended both in the rulemaking and in the evaluation/ monitoring of pilot programs.

Workforce Data

32-1606 Powers and duties of the board; Changes to 32-1606 include adding provision to enhance the Board’s role and authority in the collection of workforce data

The Nursing Board is in an ideal position to collect information on the nursing workforce. Though strategic partnerships with service and other governmental agencies, the Board can transmit such data in aggregate to allow for workforce planning to meet future health care needs. Collection and dissemination of such data is critical to meeting health care needs of Arizona.

Accurate data regarding licensed nurses and CNAs with ability to forecast and compare from year to year

Collection of such data requires time and effort on the part of Board staff as well as an up-to-date information technology infrastructure. There may be budgetary consequences and/ or diversion of staff from other projects.

Exemptions To Licensure/Certification	<p>32-1631 Acts and persons not affected by this chapter; Subsections 8 and 9 were added to exempt nurses licensed in another state from Arizona licensure if they are teaching electronically or in person as long as the practice does not include patient care supervision or direct patient care and does not exceed six consecutive months.</p>	<p>These exemptions to licensure involve low-risk, short term situations where the program or facility engages in short-term employment with faculty who may not be licensed in Arizona. Requiring Arizona licensure for such practice is seen as a barrier to accessing faculty or effective instruction.</p>	<p>Enactment of this provision will result in increased access to out-of-state faculty/experts for teaching and less expense for nurses and schools who fit these criteria.</p>	<p>There may be a rare instance where a nurse licensed in another state, and practicing here under this exemption, does not meet Arizona qualifications for licensure.</p>
Examination Security	<p>ARS 32-1633 Examination of Registered Nurses; ARS 32-1633 (D) was added to allow the board, if on review of credible evidence, believes that the security of a licensure examination has been compromised and that the credibility of examination results is in questions. The board may require retesting of a registered nurse applicant. ARS 32-1634.01 (C) Allows the board to require retesting of an international registered nurse exam applicant if the board believes the international licensure examination has been compromised and the credibility of the examination results is in question.</p>	<p>Cheating on many types of high stakes tests used for licensure or certification domestically or internationally is as widespread and deeply troubling to health care regulators. Cheaters may earn passing scores without actually acquiring the knowledge and skills measured by the test. Licenses or credentials signify that an "individual has demonstrated a significant and safe level of competence in specified domains. The cheaters credential provides no such assurance. Cheating is particularly important given the trends that show cheating has increased dramatically over the past 30 years.</p>	<p>To increase assurance that test takers earn passing scores based on their knowledge and skills.</p>	<p>Applicants who challenge the Board's decision to require them to retest, and request a hearing could have a financial impact on the Board's budget.</p>
Nurse Practitioners & Clinical Nurse Specialists	<p>32-1635.01 Temporary nurse practitioner and clinical nurse specialist certification; Changes allow the Board to grant temporary prescribing and dispensing privileges to nurse practitioners who are awaiting confirmation of requirements for permanent licensure. 32-1636. Use of titles or abbreviations; Changes to 32-1636 (C) and (D) provide statutory title protection for nurse practitioners and clinical nurse specialists and requires them to indicate their specialty area of certification when using the title.</p>	<p>Granting of temporary prescribing & dispensing authority allows qualified nurse practitioners to fully practice while awaiting confirmation of their qualifications. Current rules limit the granting of temporary prescribing and dispensing to nurse practitioners who have passed a national certifying exam and are current in practice. This would encompass nurse practitioners endorsing into Arizona. Title protection is currently in rule for nurse practitioners and clinical nurse specialists. It is more consistent with health care regulation to place title protection in statute. Title protection ensures that all persons using these titles are competent and qualified and protects the consumer from unqualified health care providers. The provision that nurse practitioners and clinical nurse specialists indicate their specialty area also protects consumers because the increased scope of practice granted to these practitioners is limited to their specialty population.</p>	<p>There will be fewer barriers to full practice by endorsing nurse practitioners with the ability to grant temporary prescribing and dispensing privileges. Title protection will result in less confusion on the part of health care consumers and allow for consistent use of titles and specialty areas.</p>	<p>There may be a need for ongoing education regarding approved specialty areas of nurse practitioner and clinical nurse specialist practice.</p>
Examination of Practical Nurses	<p>ARS 32-1638 (D) was added to mirror the RN requirements that, if on review of credible evidence the board may require retesting of practical nurse applicants if the board believes that the security of a licensure examination has been compromised and that the credibility of examination results is in question. ARS 32-1639.01 (C) was added to allow the board, on review of credible evidence, the board may require retesting of an applicant if the board believes that the security of an international licensure examination has been compromised and that the credibility of the exam results is in question.</p>	<p>Cheating on many types of high stakes tests used for licensure or certification domestically or internationally is widespread & is deeply troubling to health care regulators. Cheaters may earn passing scores without actually acquiring the knowledge and skills measured by the test. Licenses or credentials signify that an "individual has demonstrated a significant and safe level of competence in specified domains.</p>	<p>To increase assurance that test takers earn passing scores based on their knowledge and skills.</p>	<p>Applicants who challenge the Board's decision to require them to retest, and request a hearing could have a financial impact on the Board's budget.</p>
Changes In Licensure Renewal Dates	<p>ARS 32-1642 Renewal of license; Changes the "due for renewal" date for RN/LPN licenses from June 30, 20XX to March 30, 20XX.</p>	<p>The dates of the statute were changed to accommodate cash flow and thereby preventing an increase in licensing fees. Ninety-five percent of the Boards' revenue stream is generated during the RN/LPN license renewal, which currently takes place in June at the end of a fiscal year. For some months of the year, the revenue collected does not support operating expenditures. The agency must rely on the cash reserve in the fund balance to cover the costs when revenues are low. By moving the renewal period forward three months from July 1 to April 1, revenue would be available earlier to support the operating expenditures for the fiscal year.</p>	<p>The collection of revenues earlier in the fiscal year would resolve the cash flow issues and prevent an increase in licensing fees. This change would not have any impact on patient safety.</p>	<p>This change could result in some confusion for RNs & LPNs who have previously renewed their license in June and would now need to renew in March. This change would result in the nurses needing to renew their license three months earlier than previously in the four year period; the three month difference is \$9.38 per license.</p>

continued on page 12

Fee Determination	<p>ARS 1643 Fees; penalties.</p> <ol style="list-style-type: none"> 1. Changes allows the board to vote at their annual meeting to establish fees, but does not mandate it be the November meeting. 2. Registered Nurse Practitioner and Clinical Nurse Specialist were added to clarify extended nursing practice. 3. "Reinstatement" was changed to "Re-issuance" for additional clarification. 4. Fee for failure to notify the board of a change in address is no longer specific to their "residence" address, but simply states "their address". 	<ol style="list-style-type: none"> 1. Budgetary needs do not always correlate with the "November" board meeting. This change allows the board to review the fee schedule at a time other than the November board meeting. 2. Title specifications were added to clarify broader categories currently stated. 3. Recommendation from GRRC to rename reinstatement to reissuance. 4. Currently the applications request a temporary, mailing, home, and work address. The intent is for the board to have current address as applicable and not just at a residence. 	<p>None of these changes should impact patient safety.</p> <ol style="list-style-type: none"> 1. Will allow the Board more flexibility for establishing fees. 2. Clarifying language will increase understanding. 3. None. 4. This change will increase the ability of the board to contact licensed nurses and certified nursing assistants' at a current address. 	<p>No anticipate unintended consequences are anticipated.</p> <p>Deleting "resident" and just stating the fee for failing to notify the board of a change of address should not have had unintended consequences.</p>
CNA Education	<p>32-1647 Examination of Nursing Assistants; Changes to 32-1647 (C) include deleting the required re-training of nursing assistant applicants that fail the competency exam three times and adding the requirement that an applicant must pass the qualifying exam within two years of program completion or re-train.</p>	<p>This provision mirrors requirements for RN and LPN licensure already prescribed in rule and changed in statute. There are very few applicants who fail the test three times and many more who, for whatever reason, fail to register and take the test. The test must be passed in proximity to the education to demonstrate competency to practice and serve as an evaluative component for program improvement. While there may be multiple reasons for repeated failure, the person who fails to pass the exam within two years of program completion is a risk to public welfare and has either been practicing without demonstration of competency or not practiced at all with consequent loss of knowledge and skills</p>	<p>There is expected to be increased consistency in certifying nursing assistants and increased public protection.</p>	<p>There may be some nursing assistants working in settings that do not require certification and have never taken the exam who will need retraining. Education of the public and providers of nursing assistant education of the need to take the exam within two years should minimize this risk.</p>
Investigation of Complaint; Hearing; Notice	<p>32-1664 Investigations; hearing; notice Changes to 32-1664 clarifies the Board's authority and process for obtaining documents, medical records and other evidence in connection with an investigation. Similar to other Boards who regulate independent providers of healthcare, it provides the authority for investigative personnel to enter a premise at reasonable times to inspect or copy materials. The proposed changes also clarifies the statutory authority, criteria and process for the Board to delegate to the Executive Director, the authority to obtain personal medical records of the regulated party.</p>	<p>Many advanced practice nurses and some RNs practice in independent settings where they may be the solo practitioner and the custodian of records. Having the authority to enter, inspect and copy records provides less opportunity for the records and evidence to be modified or altered and better preserves the evidence of what did or did not happen in cases where the documentation is critical to establishing whether or not the practice was within the standard of care. Additionally, it would allow the Board to facilitate communication to and the transfer of care of patients in situations where the NP is unable to safely practice and notification needs to be made to assure continuity of patient care.</p> <p>At times in an investigation, to validate that a statute or rule has or has not been violated or, for the Board to reasonably evaluate whether or not a licensee is safe to practice, there is a need to obtain the personal medical records of the respondent. This may include records from their treating provider(s), pharmacy profiles or other health records. Although it is always preferable to obtain authorization or consent from the respondent to access the necessary records, in some cases such as allegations of recent/current substance abuse/misuse, it is not uncommon for the respondent to decline authorizing access. In other cases, the respondent may not be responsive in the investigation and thus there needs to be alternative mechanisms to obtain records necessary to the complaint investigation and the evaluation of safety to practice.</p>	<ol style="list-style-type: none"> 1. Improved and timely access to patient care records that are necessary in a complaint investigation 2. Ability to facilitate communication or transfer of care in cases where the Nurse Practitioner is no longer able to safely practice 3. Standardized guidelines and process for obtaining patient records 4. Provides clarification to the recipient of a subpoena for records, the Board's statutory authority to request and receive the records 	<p>There may still be nurses or attorneys who do not believe that the board has the authority to review personal medical records even if the evidence demonstrates unsafe practice and therefore additional board resources will be needed to access the records through the courts.</p>

CASE STUDIES: The Importance of HIPAA for Nurses

In 1996 Congress passed the Health Insurance Portability and Accountability Act (HIPAA). The act mandated the establishment of federal standards for the privacy of individually identifiable health information. The Privacy Rules establish safeguards to protect the confidentiality of patient medical information and all health care providers are bound by the privacy standards.

The introduction of the electronic medical record has resulted in a great deal of efficiency. The ease of communication and the speed in obtaining laboratory and other testing results occurs in record time. The efficient use of computer access to data has also posed concerns that the patient information may now be too easily accessible and visible by individuals who should not have access to the information.

Patient authorization and consent to access personal and protected medical data is required. Patient information must remain confidential in all health care settings and not be accessed by or accessible to others not directly involved in the care of the patient. Patient information should not be visible in the form of “white boards”, patients lists, computer screens or printouts.

Employers have been diligent in establishing facility policies related to the employees responsibility regarding HIPAA. Only authorized employees may access patient records and many employers have established mechanisms to determine if unauthorized persons have accessed the electronic medical record.

The Board of Nursing has investigated complaints regarding HIPAA violations. The following are a few examples of cases reported to the Board that resulted in discipline imposed by the Board of Nursing.

NURSE A

- Nurse A accessed the medical record of a co-worker who was a patient in a clinic setting where both individuals were employed. Nurse A wanted to learn how she could advise her co-workers in dealing with the individual in the work setting. Nurse A did not have any assigned responsibility to the co-worker, nor did she have any authority to access the co-workers medical record. Nurse A was terminated.

NURSE B

- Nurse B accessed a number of patient medical records over a period of months. Nurse B was counseled and informed she needed to refrain from accessing records for patients that were not assigned to her care.



Nurse B stated she was sure someone was using her password without her permission. Her password was changed. There was improvement for a period of time, but several months later it was discovered that Nurse B had continued to access numerous medical records for patients not assigned to her care. Nurse B was terminated.

NURSE C

- Nurse C accessed the medical record of a co-worker who had been admitted to the ER for treatment. Both individuals were employees at the facility. Nurse C was not assigned to the care of the co-worker and when asked why she had accessed the medical record she said she was curious as to why the individual was being treated in the ER. Nurse C was terminated.

NURSE D

- Nurse D made entries into the medical record of a family member. Nurse D worked in the department where the family member was a patient. Nurse D was not assigned to the care of the family member, nor was she on duty at the time she accessed the medical record and made the nursing note entries.

NURSE E

- Nurse E accessed the electronic medical record of a family member. Nurse E was not assigned to the care of the family member. Nurse E also copied portions on the medical record of the family member and removed the documents from the facility because she said she had the Power of Attorney (POA) for the family member. Nurse E was employed at the hospital where the family member was a patient. Nurse E was terminated.

NURSE F

- Nurse F a member of the health team was in the operating room participating in a procedure to remove a foreign object from a patient's vagina. An x-ray of the foreign object was taken and available to the health team in the operating room. Nurse F used his cell phone to take a picture of the foreign

object visualized in the x-ray. Nurse F shared the picture from his cell phone with other members of the team who were participating in the procedure. Nurse F stated the picture was taken for educational purposes. Nurse F said he was not aware of a hospital policy prohibiting the use of cell phones with camera capabilities. When the case was presented to the Board discipline was imposed because taking pictures of patients or sharing unauthorized medical information is a violation of HIPAA.

Lessons to be learned:

- Follow facility policies related to accessing medical records.
- Do not share your password related to accessing the medical record with other persons.
- Permission from appropriate persons is required if medical record information is needed.
- Unauthorized access to patient medical information is a violation of federal law. Health Insurance Portability and Accountability Act of 1996 (HIPAA)

The following are the potential violations related to HIPAA.

A.R.S. § 32-1663(D) AS DEFINED IN A.R.S.

§32-1601

16. "Unprofessional conduct" includes the following whether occurring in this state or elsewhere:
- (d) Any conduct or practice that is or might be harmful or dangerous to the health of a patient or the public.
 - (g) Willfully or repeatedly violating a provision of this chapter or a rule adopted by pursuant to this chapter
 - (j) Violating a rule that is adopted by the Board pursuant to this chapter.

POTENTIAL VIOLATION OF RULES:

A.A.C. § R4-19-403

For purposes of A.R.S. § 32-1601(16)(d), any conduct or practice that is or might be harmful or dangerous to the health of a patient or the public includes one or more of the following:

- 9. Failing to take appropriate action to safeguard a patient's welfare or follow policies and procedures of the nurse's employer designed to safeguard the patient.
- 16. Removing, without authorization, a narcotic, drug, controlled substance, supply, equipment, or medical record from any health care facility, school, institution or other work place location.
- 31. Practicing in any other manner that gives the Board reasonable cause to believe the health of a patient or the public may be harmed.

EDUCATION CORNER

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



Program Complaint/Investigation Process

While most nurses are somewhat familiar with complaints on a nursing license, few are aware that the Board also investigates complaints about nursing programs. While

Arizona has many excellent program programs, there are occasional complaints alleging that a program falls below the standards of the Board. There are several

aspects to the complaint process that should be understood.

Jurisdiction

The Board can only investigate nursing programs over which it has regulatory authority as permitted in the Nurse Practice Act. Generally, these are programs that lead to licensure or certification by the Board. The Board has jurisdiction over certified nursing assistant (CNA), licensed practical nurse (LPN), registered nurse (RN), nurse practitioner (NP) and clinical nurse specialist (CNS) programs. The Board also has jurisdiction over nurse refresher programs as this is the basis for renewing the licenses of inactive nurses. The Board does not have jurisdiction over patient care technician (PCT), medical assistant (MA), caregiver, dialysis technician, RN to BSN, or other (non-advanced practice) nursing master's and doctoral programs.

Types of Complaints

Not all complaints warrant an investigation. The complaint must relate to a violation of rule or statute for the particular type of program. Rules related to programs are found in the Rules of the Board (www.azbn.gov) Article 2 for RN, LPN and nurse refresher programs; Article 5 for NP and CNS programs; and Article 8 for CNA programs. The Board routinely receives calls from disgruntled students regarding unfair treatment or grade disputes. These are not violations of rule, per se. However, each program must have an internal grievance process in place for students to address these issues. If the program has failed to make the grievance process accessible to a student, that omission could form the basis of a complaint investigation.

Complaints that are investigated usually involve poor instruction, insufficient resources, unqualified faculty or lack of administrative support. The investigation of the initial complaint may uncover additional information leading to other possible rule violations.

Complainants typically come from either current or former nursing students, but occasionally faculty, practicing nurses or administrators file program complaints. Complainants may request to remain anonymous but sometimes the nature of the allegations leads program personnel to accurately surmise the identity of the complainant.

Investigation Process

Once a complaint is received and it is determined that an investigation is needed, the nursing program administrator is notified. On rare occasions, the notification occurs in

Once the program has determined that it has remedied the deficiency, evidence is reviewed by Board staff and a site visit to verify program compliance is conducted, if needed.

an unannounced site visit. More typically, the director is informed via telephone or e-mail and asked for his/her response to the allegations. If the response and other evidence is not sufficient to close or dismiss the complaint or the response indicates that there may be additional violations, an investigative site visit or further investigative interviews are conducted. The investigation continues until all sides are heard and the evidence gathered is sufficient to either substantiate or refute the allegations.

During the investigative phase, all viewpoints and available evidence is considered and compiled into an investigative report that is presented to the Board during their meeting. Program personnel are notified of the findings, the likely outcome and the Board date and time. The complainant is also notified of the meeting and given an opportunity to be present. During the Board meeting program representatives and the complainant may address the Board.

Outcomes

If the allegations are not substantiated, the complaint is presented to the Board for dismissal. If the allegations are substantiated but subsequently remedied by the program, the complaint is also set for dismissal. This is because Arizona law gives nursing programs an opportunity to remedy potential violations before the Board can place any restrictions on the program. If the program immediately recognizes and remedies a potential violation, the Board generally takes no additional action.

If the original complaint or a different potential violation is substantiated and the program is unable to correct in a timely manner, the Board may issue an official "Notice of Deficiency" to the program. This type of deficiency is different from the application deficiency notice routinely sent to applicants because of insufficient information to grant a license (e.g. passing NCLEX). This "Notice of Deficiency" is an official Board action providing formal notice to the program that they are in violation of law. The Board may grant up to 18 months to

continued on page 19

correct the deficiency for RN, LPN, NP, CNS and refresher programs and three months for CNA programs. After service of the "notice", the program has 30 days to request an administrative hearing to refute the findings. If the program does not request a hearing, they must respond with a plan of correction. Failure to correct the deficiency within the time-frame will result in either the program being unable to admit students or revocation of the program's approval, closing the program. Occasionally the Board will extend the notice for an additional period if the program demonstrates significant progress toward remedying the deficiency. In addition to a complaint investigation, a program may also, and more typically, receive a "Notice of Deficiency" as a result of evidence submitted or gathered as part of a routine site visit or in monitoring NCLEX pass rates. Notices of Deficiency are reported in this column and on the list of programs on the Board Web site.

Once the program has determined that it has remedied the deficiency, evidence is reviewed by Board staff and a site visit to verify program compliance is conducted, if needed. Some deficiencies, such as faculty qualifications can be verified with document review. Others, such as deficiencies in resources, curriculum and administrative support would require a site visit to verify compliance. Once the deficiency is remedied, the Board lifts the deficiency status from the program.

For questions about the program complaint process, please contact Pamela Randolph RN, MS at prandolph@azbn.gov or 602-771-7803.

Board Actions on Education Matters June 2009

- Approved the development of a consortium under the Education Committee consisting of educators, service, nursing organizations and policy makers to develop a plan for rational growth of nursing programs to meet AZ health care needs in the future
- Re-approved the RN refresher program at Northland Pioneer College
- Affirmed that Copper Mountain Inn, Globe, remains a site for the Pilot Study Medication Technician Project despite sanction by DHS
- Granted extension of approval of the refresher program at Mohave Community College
- Dismissed complaints on Emmanuel School of Nursing CNA Program and Grace Institute CNA program

2010 Seventh Annual CNA Educators Retreat Nuts and Bolts of Education

FRIDAY, JANUARY 15, 2010 -
THE BLACK CANYON CONFERENCE CENTER,
PHOENIX, AZ

REGISTRATION FORM

*Please Use One Form Per Registrant and Print Clearly/
Type All Information (*Required Field)*

*Name: _____
(as you would like it to appear on Badge)

*Degree/ Credentials: _____

* Affiliation/Agency: _____

Title/Position: _____

* Address: _____

City/State/Zip: _____

Telephone Numbers: _____ O;
_____ C

* Email Address(es): _____

REGISTRATION CONFIRMATION SENT BY E-MAIL ONLY

REGISTRATION FEES

General \$80.00
(On/Before December 15th)

Late \$90.00
(After December 15th)

On-site \$100.00
(Space permitted)

Fees include meals and
conference materials.

*Purchase Orders WILL NOT be
accepted in lieu of payment.*



Contact hours for this continuing nursing education activity will be submitted to the Arizona Nurses Association, an accredited approver by the American Nurses Credentialing Center's Commission on Accreditation.

Vendors on Site Sponsored by SEVEN Healthcare Academy.
Exhibits open during scheduled breaks.

SUBMIT COMPLETED REGISTRATION FORM AND PAYMENT TO:

Arizona State Board of Nursing

4747 N. 7th Street, Suite 200, Phoenix, Arizona 85014 | 602-771-7800, 602-771-7888 fax; www.azbn.gov



CNA CORNER

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

As nursing assistant training programs enter the new 2009 school year, I would like to reflect and share potential future changes.

Early this year, suggestions and ideas to increase the pass rates were sent to programs that had a minimum of 10 students take the D&S State CNA test in 2008. These programs had a first time pass rate of 10 percent or more below the statewide first time pass rate for written test of 92 percent and the skills test of 78 percent.

I am pleased to find in recent visits, a number of ideas have been implemented to improve the pass rates. These have included: initiating a pre-entry test to assess reading and math ability. The nursing assistant texts vary in their level of reading ability, but most require about an eighth grade reading level. Candidates who do not meet criteria are encouraged to get remediation prior to taking the course.

One high school program decided to take only seniors this coming year. After they reviewed their scores, they determined that the younger students were not as ready to enter health care. Some programs have added extra hours to their program, especially in laboratory skills and clinical training.

Many programs have taken the opportunity to test their students at their training site. Many instructors have also attended the D&S Instructor training workshops. These have helped new instructors in preparing their students for the competency exam. I also have seen more use of the evaluations by students and the testing profiles to help determine areas that need improvement.

Since most of these changes are new or yet to be implemented, the D&S testing scores have not shown improvement to date in response to these many efforts. During the first six months of 2009, 2,618 candidates took the written test with a first time pass rate of 86 percent. This was down six percent from 2008. Also, 2,738 candidates took the skills test with a first time pass rate of 76 percent. This was down two percent from 2008.

At the test writing session in May 2009, over 200 new questions were written, which will be evaluated and added to the test pool. One thing to note is that some these were

math questions which reflect the math skills needed in the skill scenarios: weighing, intake and output and pulse. In this way all students will have assessment of their math abilities, even if they do not get math related skills in their five skill scenarios.

Reminder: All requests for approval of coordinators and instructors, including ongoing coordinators and instructors at program renewal time will need to complete the Coordinator/Instructor Application which is available at the AZBN Web site.

During the first six months of 2009, 2,618 candidates took the written test with a first time pass rate of 86 percent. This was down six percent from 2008.

The CNA Educator Retreat looks like it will be another very beneficial day for our programs. The 2010 program is titled "Nuts and Bolts of Education". It will focus on teaching strategies and how to address several of the more difficult concerns facing many programs: English as a second language and cheating in the classroom. Save the day (Friday, Jan. 15, 2010)! Send in your registration early. Program information and the application are available online.

APRIL-MAY-JUNE 2009

EFFECTIVE DATE	NAME	CERTIFICATE	DISCIPLINE	VIOLATION(S)
5/28/2009	Alcala, Rachael A.	CNA Applicant	Certificate Denied	Criminal Conviction; Failure to Cooperate
5/11/2009	Awumah, Mavis	CNA999988793	Revoked	Unable to Practice Safely - Substance Abuse; Violation of Fed/State Statutes/Rules; Fraud
5/26/2009	Bailey, Nancy Y.	CNA Applicant	Certificate Denied	Failure to Meet Licensing Board Reporting Requirements; Criminal Conviction
5/1/2009	Barnhill, Gayla L.	CNA Applicant	Certificate Denied	Failure to Meet the Initial Requirements of Certification; Criminal Conviction
4/1/2009	Briones, Judy M.	CNA100007905	Civil Penalty	Patient Neglect; Patient Abuse
4/30/2009	Brown, Steven V.	CNA1000011723	Stayed Revocation w/Suspension	Misrepresentation of Credentials
6/8/2009	Camacho, Kayla A.	CNA1000017212	Revoked	Failure to Comply Board Order
6/17/2009	Campbell, Qiana L.	CNA1000020218	Civil Penalty	Criminal Conviction
5/11/2009	Carranza, Louie R.	CNA999951622	Revoked	Sexual Misconduct; Failure to Comply Board Order
5/26/2009	Charleston, Noreen J.	CNA Applicant	Certificate Denied	Violation of Fed/State Statutes/Rules; Criminal Conviction
5/5/2009	Clement, Christine R.	CNA Applicant	Certificate Denied	Criminal Conviction; Failure to Cooperate
6/24/2009	Debrew, Cynthia M.	CNA827962103	Stayed Revocation	Criminal Conviction; Substance Abuse; Narcotics Violation or Other Violation of Drug Statutes
5/26/2009	Donaldson, Jennifer A.	CNA Applicant	Certificate Denied	Criminal Conviction; Narcotics Violation or Other Violation of Drug Statutes
5/11/2009	Evans, Sylvia D.	CNA711386103	Revoked	Misappropriation of Property; Failure to Comply Board Order; Unprofessional Conduct
5/11/2009	Fields, Peter S.	CNA1000011690	Revoked	False Reports/Falsifying Records; Patient Neglect; Substandard or Inadequate Care
2/20/2009*	Fortin, Barbara A.	CNA1000019065	Civil Penalty	Criminal Conviction
4/21/2009	Guzman, Jennifer L.	CNA Applicant	Certificate Denied	Criminal Conviction; Failure to Cooperate
5/28/2009	Hamner-Scott, Christopher M.	CNA Applicant	Certificate Denied	Criminal Conviction; Fraud/Deceit; Failure to Cooperate
4/2/2009	Heaberlin, Jeffrey L.	CNA Applicant	Certificate Denied	Failure to Cooperate; Unprofessional Conduct
4/29/2009	Hibbard, Jayme L.	CNA Applicant	Certificate Denied	Criminal Conviction; Unable to Practice Safely - Substance Abuse
4/13/2009	Hill, Kimberly A.	CNA1000019606	Civil Penalty	Criminal Conviction
5/26/2009	Hill, Lavella L.	CNA Applicant	Certificate Denied	Criminal Conviction; Narcotics Violation or Other Violation of Drug Statutes
5/28/2009	Hooks, Shavona R.	CNA1000016498	Voluntary Surrender	Failure to Comply Board Order
4/9/2009	Jones, Peter E.	CNA1000015606	Revoked	Failure to Comply Board Order
6/16/2009	Keller, Nicole M.	CNA1000020371	Civil Penalty	Criminal Conviction; Fraud/Deceit
4/13/2009	Kerley, Greg	CNA1000004326	Voluntary Surrender	Sexual Misconduct; Practicing Beyond Scope; Failure to Comply Board Order
3/17/2009*	Loftus, Juanita S.	CNA Applicant	Certificate Denied	Criminal Conviction
4/29/2009	Lopez, Marisela	CNA1000019751	Stayed Suspension	Criminal Conviction
2/10/2009*	Lynch, Robin R.	CNA591967803	Civil Penalty	Violation of Fed/State Statutes/Rules; Criminal Conviction; Failure to Cooperate
1/5/2009*	Madison, Lenard E.	CNA534767873	Revoked	Criminal Conviction; Violation of Fed/State Statutes/Rules; Failure to Cooperate
4/24/2009	Mason, Donald A.	CNA1000009005	Stayed Revocation	Substance Abuse
5/4/2009	Mcafee, Latonya	CNA Applicant	Certificate Denied	Failure to Meet the Initial Requirements of Certification; Criminal Conviction
5/11/2009	Mcallister, Rashad	CNA1000009143	Revoked	Patient Abuse; Substandard or Inadequate Care; Patient Neglect
5/26/2009	Mcaninch, Samantha C.	CNA Applicant	Certificate Denied	Criminal Conviction
4/21/2009	Mccoy, Patricia A.	CNA Applicant	Certificate Denied	Criminal Conviction; Failure to Cooperate
3/4/2009*	Mcknight, Delena	CNA1000019063	Civil Penalty	Criminal Conviction
5/11/2009	Mendoza, Melissa	CNA1000006520	Revoked	Patient Abuse; Unprofessional Conduct
5/26/2009	Mitchell, Titania F.	CNA Applicant	Certificate Denied	Criminal Conviction; Substandard or Inadequate Care
5/14/2009	Moore, Christine E.	CNA1000000656	Stayed Revocation	Criminal Conviction; Substance Abuse
5/13/2009	Navarro Jr, Victor M.	CNA999989146	Revoked	Failure to Comply Board Order
3/21/2009*	Nevarez, Vanessa N.	CNA1000005749	Civil Penalty	Unprofessional Conduct; Patient Abuse
4/9/2009	Nolen, Victoria J.	CNA1000009764	Civil Penalty	Violation of Fed/State Statutes Regulation or Rules; Fraud-Unspecified
5/26/2009	Oghenejabor, Favour C.	CNA Applicant	Certificate Denied	Criminal Conviction
4/3/2009	Park, Matthew T.	CNA Applicant	Certificate Denied	Criminal Conviction
6/14/2009	Patzke, Stephanie C.	CNA1000020388	Civil Penalty	Violation of Fed/State Statutes/Rules; Criminal Conviction
4/21/2009	Petersen, Christopher W.	CNA1000010023	Voluntary Surrender	Sexual Misconduct
6/9/2009	Platt, Cassandra L.	CNA1000005859	Voluntary Surrender	Unable to Practice Safely
6/9/2009	Pokuta, Christopher	CNA Applicant	Certificate Denied	Criminal Conviction; Failure to Cooperate
6/10/2009	Pozzi, Cathlena S.	CNA999993389	Revoked	Failure to Comply Board Order
4/25/2009	Reyes, Jessica J.	CNA999997496	Stayed Revocation w/Civil Penalty	Patient Abuse
6/4/2009	Robles, Angela A.	CNA614792103	Renewal Denied	Criminal Conviction; Failure to Cooperate
4/4/2009	Rose, Kimberly S.	CNA1000019965	Civil Penalty	Criminal Conviction
5/6/2009	Ross, Nadine R.	CNA Applicant	Certificate Denied	Criminal Conviction; Failure to Cooperate
4/3/2009	Ryan, Crystal A.	CNA Applicant	Certificate Denied	Criminal Conviction
6/29/2009	Salazar, Dorsey M.	CNA1000008470	Stayed Revocation	Substance Abuse
4/3/2009	Sanders-Lara, Lydia	CNA208245103	Civil Penalty	Practicing Beyond Scope
4/3/2009	Sandoval, Samantha G.	CNA Applicant	Certificate Denied	Criminal Conviction
5/27/2009	Schlepp, Matthew B.	CNA Applicant	Certificate Denied	Violation of Fed/State Statutes/Rules; Unable to Practice Safely - Substance Abuse; Failure to Cooperate
4/21/2009	Scrivano, Karen M.	CNA999953351	Revoked	Failure to Comply Board Order
5/6/2009	Siew, Olivia Y.	CNA Applicant	Certificate Denied	Failure to Cooperate
5/11/2009	Simon, Christina L.	CNA1000011667	Revoked	Practicing Beyond Scope; Failure to Cooperate
4/24/2009	Smith, Michelle J.	CNA590261803	Civil Penalty	Patient Abuse
5/6/2009	Stevens, Garrett N.	CNA Applicant	Certificate Denied	Criminal Conviction; Failure to Cooperate
5/11/2009	Sullivan, Megan N.	CNA1000013435	Revoked	Patient Abandonment; Failure to Cooperate
4/24/2009	Symmonds, David L.	CNA Applicant	Certificate Denied	Criminal Conviction; Unable to Practice Safely - Substance Abuse

CNA DISCIPLINARY ACTION

*Not reported in previous Newsletter

APRIL-MAY-JUNE 2009

EFFECTIVE DATE	NAME	CERTIFICATE	DISCIPLINE	VIOLATION(S)
4/30/2009	Tabor, Ricky V.	CNA999952539	Revoked	Failure to Comply Board Order
4/6/2009	Taylor, Tammy D.	CNA162255403	Civil Penalty	Criminal Conviction; Narcotics Violation or Other Violation of Drug Statutes
6/12/2009	Tewayguna, Sonia K.	CNA999933734	Revoked	Failure to Comply Board Order
5/24/2009	Vega Sanchez, Pamela D.	CNA100008915	Civil Penalty	Breach of Confidentiality; Dual Relationship/Boundaries
6/27/2009	Villalobos, Maria D.	CNA Applicant	Civil Penalty	Violation of Fed/State Statutes/Rules; Criminal Conviction; Narcotics Violation or Other Violation of Drug Statutes
6/26/2009	Wade, Maria C.	CNA Applicant	Civil Penalty	Criminal Conviction; Narcotics Violation or Other Violation of Drug Statutes
6/15/2009	Wales Jr., Mark A.	CNA100003427	Revoked	Failure to Comply Board Order
12/30/2008*	Wall, Carmen M.	CNA703712897	Stayed Revocation w/Civil Penalty	Patient Abuse; Negligence
5/11/2009	Washington, Cynthia O.	CNA611599103	Revoked	Patient Abuse; Unprofessional Conduct; Failure to Comply Board Order
3/2/2009*	Whindleton-Pineda, Samantha R.	CNA1000019066	Civil Penalty	Criminal Conviction
5/26/2009	Woodruff, Ashley C.	CNA Applicant	Certificate Denied	Criminal Conviction; Failure to Cooperate



CNA Discipline ACTION CLEARED

APRIL-MAY-JUNE 2009

EFFECTIVE DATE	NAME	LICENSE
4/4/2009	Ferrato, Gina M.	CNA100005345
5/13/2009	Polingyumptewa, Calandra	CNA1000012330
6/3/2009	Rivera, Iran R.	CNA1000008757
5/5/2009	Sawyer, Evelyn J.	CNA1000012654
5/15/2009	Solano, Toni S.	CNA1000014413
5/12/2009	Treat, Ryan M.	CNA1000015896

RN/LPN DISCIPLINARY ACTION

APRIL-MAY-JUNE 2009

EFFECTIVE DATE	NAME	LICENSE	DISCIPLINE	VIOLATION(S)
6/3/2009	Agboola, Althea M.	LP038729	Probation	Substance Abuse
4/16/2009	Ashby, Matthew T.	RN104324	Civil Penalty	Criminal Conviction
4/26/2009	Bannon, Leanne E.	RN000099193	Stayed Revocation w/Probation	Failure to Comply w/Licensing Board Order, Substance Abuse
5/21/2009	Barnhart, Brittney N.	LP043030	Probation	Failure to Comply w/Licensing Board Order, Unable to Practice Safely
6/17/2009	Beaver, Debra D.	TRN159033	Probation	License Revocation, Suspension or Other Disciplinary Action Taken by a Federal, State or Local Licensing Authority, Substance Abuse
6/18/2009	Bennett, Charles A.	RN109600	Suspension	Failure to Maintain Records or Provide Medical, Financial or Other Required Information, Unauthorized Administration of Medication, Diversion of Controlled Substance
6/5/2009	Bishop, Deborah L.	RN157782	Decree of Censure	Narcotics Violation or Other Violation of Drug Statutes
6/14/2009	Blake, Diane G.	RN146156	Suspension	Failure to Maintain Records or Provide Medical, Financial or Other Required Information, Substandard or Inadequate Care
5/21/2009	Boaz, Jesvin J.	RN140453	Decree of Censure	Substandard or Inadequate Care
5/28/2009	Bohm, Connie Jo	LPN Endorsement	License Denied	Criminal Conviction, Unable to Practice Safely by Reason of Alcohol or Other Substance Abuse, Failure to Cooperate with Board
5/5/2009	Bolton, Pamela S.	RN154233	Stayed Revocation w/Probation	Failure to Comply w/Licensing Board Order, Substance Abuse
4/30/2009	Brady-Beetham, Cassandra	RN091519	Probation	Failure to Maintain Records or Provide Medical, Financial or Other Required Information
5/7/2009	Brazil, Yvette A.	RN Endorsement	License Denied	Failure to Cooperate with Board, Narcotics Violation or Other Violation of Drug Statutes
4/29/2009	Bridges Jr., Talmadge L.	RN081485	Voluntary Surrender	Unable to Practice Safely by Reason of Alcohol or Other Substance Abuse, Narcotics Violation or Other Violation of Drug Statutes
6/26/2009	Brown, Anthony S.	RN085307	Voluntary Surrender	Failure to Comply with Health and Safety Requirements, Filing False Reports or Falsifying Records, Diversion of Controlled Substance
6/1/2009	Burns, Abigale D.	RN090598	Revocation	Failure to Comply w/Licensing Board Order
6/12/2009	Cardona, Cynthia L.	TRN158058	Stayed Revocation w/Probation	Failure to Meet the Initial Requirements of a License, License Revocation, Suspension or Other Disciplinary Action Taken by a Federal, State or Local Licensing Authority, Substance Abuse
6/14/2009	Carter, Bryce E.	LP045675	Probation	Criminal Conviction
4/3/2009	Carter, Christopher A.	LP045454	Probation	Violation of Federal/State Statutes, Regulations or Rules, Criminal Conviction, Substance Abuse
4/11/2009	Cary, Donna M.	LP041992	Decree of Censure	Filing False Reports or Falsifying Records
6/1/2009	Castellucci, Dawn D.	RN099858	Stayed Revocation w/Suspension	Unable to Practice Safely by Reason of Alcohol or Other Substance Abuse, Unauthorized Dispensing of Medication, Diversion of Controlled Substance

RN/LPN DISCIPLINARY ACTION

APRIL-MAY-JUNE 2009

EFFECTIVE DATE	NAME	LICENSE	DISCIPLINE	VIOLATION(S)
6/4/2009	Cauwet, Julianne C.	RN157798	Probation	Criminal Conviction
6/26/2009	Chandler, Carol L.	RN130840	Voluntary Surrender	Violation of Federal/State Statutes Regulation or Rules, Criminal Conviction
4/24/2009	Chaney, Arlana B.	RN Endorsement	License Denied	Practicing Without Valid License, Unprofessional Conduct
5/20/2009	Cifelli, Carol A.	RN053355/LP017203	Decree of Censure	Failure to Comply w/Health & Safety Requirements, Failure to Maintain Records or Provide Medical, Financial or Other Required Information
6/10/2009	Clark, Phillip W.	RN075107/LP024164	Decree of Censure w/Civil Penalty	Failure to Comply w/Licensing Board Order, Unprofessional Conduct, Error in Prescribing Dispensing or Administering Medication
6/11/2009	Cleveland, Linda M.	RN158624/LP027000	Civil Penalty	Failure to Meet Licensing Board Reporting Requirements, Criminal Conviction, Fraud
5/15/2009	Collazo, Linda C.	LP043667/CNA100009092	Probation w/Civil Penalty	Filing False Reports or Falsifying Records
6/24/2009	Compton, Farleigh E.	RN000099205/LP031615	Stayed Revocation w/Probation	Failure to Maintain Records or Provide Medical, Financial or Other Required Information, Diversion of Controlled Substance
5/15/2009	Cooper, Gena R.	RN094888	Probation	Narcotics Violation or Other Violation of Drug Statutes
6/4/2009	Crow, Julie E.	RN158158	Civil Penalty	Practicing Without Valid License
4/17/2009	De Vries, Darlene R.	RN063590	Voluntary Surrender	Failure to Comply w/Licensing Board Order
6/1/2009	Demattia, Arlene C.	LP037609	Revocation	Failure to Comply w/Licensing Board Order
5/5/2009	Dennis, Betty S.	LP041760	Voluntary Surrender	Patient Abuse
6/3/2009	Derosse, Kimberly J.	LP035868	Suspension	Failure to Comply w/Licensing Board Order, Unable to Practice Safely by Reason of Alcohol or Other Substance Abuse
5/8/2009	Diaz, Judith C.	RN119896/LP036581	Revocation	Fraud, Deceit or Material Omission in Obtaining License or Credentials, Failure to Cooperate with Board
6/3/2009	Distefano, Julie D.	LP039767	Stayed Suspension w/Probation	Criminal Conviction, Substance Abuse
4/7/2009	English, Sheri D.	RN137072/AP3329/ LP040402	Civil Penalty	Fraud
5/28/2009	Esho-Bakare, Oluwatoyin	RN Endorsement	License Denied	Criminal Conviction, Fraud, Failure to Cooperate with Board
6/15/2009	Eskeets, Laura J.	RN070982	Voluntary Surrender	Unable to Practice Safely by Reason of Alcohol or Other Substance Abuse
6/16/2009	Evans, Karen L.	RN074803/SN0589	Revocation	Failure to Comply w/Licensing Board Order
4/13/2009	Faulx, Lori A.	RN153031	Probation	Criminal Conviction, Substance Abuse
6/3/2009	Frankley, Alison E.	RN150331	Revocation	Failure to Comply w/Licensing Board Order, Substandard or Inadequate Care
6/4/2009	Garner, Roger A.	RN100288	Decree of Censure	Substance Abuse
4/2/2009	Gavin, Stephanie L.	RN Endorsement	License Denied	Criminal Conviction, Failure to Cooperate with Board
5/4/2009	Gesswein, Patricia A.	RN022323	Stayed Revocation w/Probation	Failure to Maintain Records or Provide Medical, Financial or Other Required Information
4/22/2009	Gray, Delores F.	LP011483	Decree of Censure	Substandard or Inadequate Care, Unauthorized Administration of Medication
6/4/2009	Hadley, Frank J.	LP036210	Voluntary Surrender	Failure to Comply w/Licensing Board Order

RN/LPN DISCIPLINARY ACTION

APRIL-MAY-JUNE 2009

EFFECTIVE DATE	NAME	LICENSE	DISCIPLINE	VIOLATION(S)
6/10/2009	Hamlin, Sheril E.	RN080199	Revocation	Failure to Comply w/Licensing Board Order
5/5/2009	Harris, Kelly H.	RN069119	Stayed Revocation w/Suspension	Unable to Practice Safely by Reason of Alcohol or Other Substance Abuse
6/10/2009	Harris, Kelly H.	RN069119	Revocation	Failure to Comply w/Licensing Board Order
4/23/2009	Harris, Linda M.	RN058140	Probation	Violation of Federal/State Statutes Regulation or Rules, Criminal Conviction, Substance Abuse
6/4/2009	Harris, William V.	RN157068/CRNA0504	Civil Penalty	Practicing Without Valid License/Certificate
5/5/2009	Heim, Patricia J.	LP032014	Probation	Substance Abuse
4/1/2009	Hurst, Rebecca M.	RN121847	Voluntary Surrender	Violation of Federal/State Statutes/Rules, Criminal Conviction, Sexual Misconduct
6/1/2009	Iler, Connie D.	RN134996	Revocation	Failure to Comply w/Licensing Board Order
5/12/2009	Jackson, Lorrie M.	LP026634/CNA355978363	Suspension	Unable to Practice Safely by Reason of Alcohol or Other Substance Abuse, Unable to Practice Safely by Reason of Psychological Impairment or Mental Disorder, Error in Prescribing, Dispensing or Administering Medication
6/14/2009	Jeffrey, MaryEllen	RN079790/LP023755	Stayed Revocation w/Suspension	Failure to Comply w/Licensing Board Order, Failure to Maintain Records or Provide Medical, Financial or Other Required Information
4/9/2009	Johnston, Tracy L.	RN133783	Revocation	Failure to Comply w/Licensing Board Order
6/16/2009	Jorgensen, Karen	RN131691	Probation	Failure to Maintain Records or Provide Medical, Financial or Other Required Information, Unprofessional Conduct
5/15/2009	Kamens, Gregory D.	RN128911	Voluntary Surrender	Failure to Comply w/Licensing Board Order, Unable to Practice Safely by Reason of Alcohol or Other Substance Abuse
6/10/2009	Karcher, Shelby L.	RN140110/CNA766784641	Voluntary Surrender	Criminal Conviction, Unable to Practice Safely by Reason of Alcohol or Other Substance Abuse, Unauthorized Prescribing Medicine (APRN)
5/27/2009	Kinder, Michael C.	RN106172	Probation	Unprofessional Conduct, Failure to Cooperate with Board
4/1/2009	Kirkendall, Mark A.	RN121540	Voluntary Surrender	Violation of Federal/State Statutes Regulation or Rules, Criminal Conviction, Unable to Practice Safely by Reason of Alcohol or Other Substance Abuse
4/22/2009	Kirkpatrick, Ian R.	LP042491	Decree of Censure	Patient Abuse, Fraud, Substandard or Inadequate Care
6/27/2009	Kuntz, Danny J.	RN083436/LP026094	Decree of Censure	Practicing Beyond the Scope of Practice
4/28/2009	Lammert, Shannon L.	LP043068	Revocation	Failure to Comply w/Licensing Board Order
6/24/2009	Landa, Stephanie L.	RN090090	Probation	Criminal Conviction, Substance Abuse
6/11/2009	Lapinska, Christina M.	RN Endorsement	Stayed Revocation w/Probation & Limited Licensure	License Revocation, Suspension or Other Disciplinary Action Taken by a Federal, State or Local Licensing Authority
6/3/2009	Lembert, Delya E.	RN030184	Probation	Failure to Comply w/Health & Safety Requirements, Failure to Maintain Records or Provide Medical, Financial or Other Required Information, Substandard or Inadequate Skill Level

RN/LPN DISCIPLINARY ACTION

APRIL-MAY-JUNE 2009

EFFECTIVE DATE	NAME	LICENSE	DISCIPLINE	VIOLATION(S)
4/22/2009	Lovesy, Jason D.	RN098343	Reissuance with Stayed Revocation w/Probation	Failure to Comply w/Licensing Board Order, Substance Abuse
5/28/2009	Lovett, Jennifer N.	RN Endorsement	License Denied	Criminal Conviction, Failure to Cooperate with Board
6/1/2009	Manuel, Karen M.	RN026418	Revocation	Failure to Comply w/Licensing Board Order
4/2/2009	Matthews, Joseph W.	LPN Endorsement	License Denied	Criminal Conviction, Failure to Cooperate with Board
4/2/2009	McConnaughey, Jennifer E.	RN Endorsement	License Denied	Criminal Conviction, Unable to Practice Safely by Reason of Alcohol or Other Substance Abuse, Failure to Cooperate with Board
6/23/2009	McKeown, Kathy	RN037649	Revocation	Failure to Comply w/Licensing Board Order
4/27/2009	Merrill, Amy R.	RN115430/LP035988	Probation	Substance Abuse, Substandard or Inadequate Care, Narcotic Violation or Other Violation of Drug Statutes
4/8/2009	Miller, David M.	LP045463	Probation	Criminal Conviction, Substance Abuse
5/13/2009	Mochal, Karen R.	RN157610	Probation	Unprofessional Conduct, Substance Abuse, Diversion of Controlled Substance
5/26/2009	Mueobonam, Gladys C.	RN122547	Probation	Substandard or Inadequate Care, Failure to Provide Medically Reasonable and/or Necessary Items of Services
5/1/2009	Naughton, Shirley C.	LP012311	Decree of Censure	Patient Abuse
5/20/2009	Niemeyer, Laura P.	LP027755	Voluntary Surrender	License Revocation, Suspension or Other Disciplinary Action Taken by a Federal, State or Local Licensing Authority, Fraud, Deceit or Material Omission in Obtaining License or Credentials, Unable to Practice Safely by Reason of Alcohol or Other Substance Abuse
6/3/2009	Nwankwo, Jude I.	LP040048	Probation	Failure to Maintain Records or Provide Medical, Financial or Other Required Information, Error in Prescribing, Dispensing or Administering Medication
4/6/2009	Palko, Amanda J.	RN140617	Revocation	Failure to Comply w/Licensing Board Order
4/7/2009	Pallanes, Tiffani R.	RN157443	Civil Penalty	Fraud
4/3/2009	Pawlowski, Regina D.	LP032074	Decree of Censure	Diversion of Controlled Substance
6/22/2009	Pearce, Albert E.	RN128254	Decree of Censure	Substance Abuse
4/13/2009	Peck, Jeremiah R.	RN132289	Voluntary Surrender	Criminal Conviction, Narcotics Violation or Other Violation of Drug Statutes
5/5/2009	Peplinski, Deanna H.	RN045787	Voluntary Surrender	Failure to Maintain Records or Provide Medical, Financial or Other Required Information, Unprofessional Conduct
5/8/2009	Petsinger, Christine C.	RN124402	Revocation	Unable to Practice Safely, Substandard or Inadequate Care, Failure to Cooperate with Board
4/7/2009	Peuser, Phillip A.	RN136288	Decree of Censure	Criminal Conviction
5/8/2009	Purvis, Edward A.	LP023385	Revocation	Failure to Meet Licensing Board Reporting Requirements, Violation of Fed/State Statutes Regulation or Rules, Criminal Conviction
6/3/2009	Rademacher, Tracey A.	RN139037	Revocation	Failure to Comply w/Licensing Board Order
4/30/2009	Ratliff, Helen J.	RN049961	Decree of Censure	Failure to Comply w/Health & Safety Requirements, Negligence
4/7/2009	Robinson, Anna C.	RN157280	Civil Penalty	Criminal Conviction
6/20/2009	Roland, Dawn M.	LP045676	Civil Penalty	Criminal Conviction, Fraud, Deceit or Material Omission in Obtaining License or Credentials, Substance Abuse
4/17/2009	Rood, Tristan L.	RN114875	Decree of Censure	Substance Abuse
5/8/2009	Rosset, Lorrie L.	RN114964	Revocation	Failure to Comply w/Licensing Board Order
5/28/2009	Roth, Nancy A.	RN Endorsement	License Denied	Criminal Conviction, Fraud, Deceit or Material Omission in Obtaining License or Credentials, Failure to Cooperate with Board
5/6/2009	Silva, Marta A.	RN063948/AP0186	Probation w/Civil Penalty	Failure to Maintain Records or Provide Medical, Financial or Other Required Information, Substandard or Inadequate Skill Level
4/22/2009	Somers, Colleen M.	LP034313	Stayed Revocation w/Suspension	Unable to Practice Safely by Reason of Alcohol or Other Substance Abuse, Diversion of Controlled Substance
4/28/2009	Spence, Candy L.	RN116153	Revocation	Failure to Comply w/Licensing Board Order
4/30/2009	Tawzer, Jeff G.	RN134222	Revocation	Failure to Comply w/Licensing Board Order, Unable to Practice Safely by Reason of Alcohol or Other Substance Abuse
6/26/2009	Tkach, Mary Ann	RN125002	Reissuance w/Probation	Failure to Meet Licensing Board Reporting Requirements, Substance Abuse
4/23/2009	Turner, Louis C.	RN112365	Probation	Violation of Federal/State Statutes Regulation or Rules, Criminal Conviction; Substance Abuse
6/26/2009	Tysz, Deborah J.	RN112913	Voluntary Surrender	Failure to Comply w/Licensing Board Order
4/30/2009	Valdez, Rosaria A.	RN098766/LP031777	Probation	Unsafe Practice
5/15/2009	Van Lanen, Denise L.	RN108326/SN0471	Probation	Unprofessional Conduct
5/15/2009	Wagner, Todd M.	RN145082	Probation	Criminal Conviction
4/9/2009	Wall, Jason E.	LP040360	Suspension	Failure to Comply w/Licensing Board Order
6/18/2009	Wilkinson, William E.	RN070664	Probation	Substandard or Inadequate Care, Substandard or Inadequate Skill Level, Patient Abandonment
6/30/2009	Willison, Keri R.	RN125492	Probation	Substance Abuse
6/19/2009	Young, Amy M.	RN158165/CNA1000002161	Civil Penalty	Violation of Federal/State Statutes Regulation or Rules, Criminal Conviction

UPDATED LICENCURE STATUS RN-LPN SUBJECT TO A BOARD ORDER/CONSENT AGREEMENT

APRIL-MAY-JUNE 2009

EFFECTIVE DATE	NAME	LICENSE	DISCIPLINE	VIOLATION(S)
6/5/2009	Hua, Chyi Jen	RN114042/LP033131	Probation	Completed terms of the Suspension, converted license to Probation

RN-LPN Discipline ACTION CLEARED

APRIL-MAY-JUNE 2009

EFFECTIVE DATE	NAME	LICENSE
6/3/2009	Bray, April	LP044417
5/1/2009	Brown Jr., Garry L.	LP000032935
4/10/2009	Duick, Jennifer A.	RN141230
6/9/2009	Gillcoatt, James P.	RN089620
6/3/2009	Hill, Denise M.	RN103152/AP1688
5/27/2009	Ireland, Sheron J.	RN034303
6/9/2009	Jennings, Marvin K.	RN098694
6/3/2009	Johnson, Veronica E.	RN076109
4/1/2009	Lopez, Mary F.	RN119733
6/3/2009	Noriega, Nancy Y.	RN040222
6/3/2009	Ross Feeley, Suzanne P.	RN071694
5/15/2009	Tambi, Kennedy C.	RN129381
6/19/2009	Thomas, Sandra C.	RN105564
6/3/2009	Wright, Kenneth T.	LP037077

RETRACTION

In VOL 4, No 1, Feb 2009 1st Quarter of the Arizona State Board of Nursing's Regulatory Journal Disciplinary Violations for Jennifer A. Kreger, LP045102 were incorrectly identified. The correct violation is Failure to Comply with Board Order.

ARIZONA STATE BOARD OF NURSING
4747 North 7th Street, Suite 200
Phoenix, AZ 85014-3653

PRESORTED
STANDARD
U.S. POSTAGE PAID
LITTLE ROCK, AR
PERMIT NO. 1884