Missouri State Board of Nursing Newsletter

Volume 18 • No. 1 February, March, April 2016

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Division of Professional Registration
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Printed in the United States

Message from the President

The Nurse Licensure Compact (NLC)
Unlocking Access to Nursing Care Across the Nation

Rhonda Shimmens, RN-C, BSN, MBA

For the last 15 years, the state of Missouri has been a member of the Nurse Licensure Compact (NLC). As a member of the NLC, nurses in Missouri are issued a multistate license that permits them to provide care across state borders in other states that belong to the NLC.

The NLC increases access to care for millions of patients nationally. It facilitates telehealth nursing, nursing care in the event of a disaster, online nursing education, and health care travel among many other types of nursing care.

There are 25 member states in the NLC. The maximum benefit to belonging to the NLC will occur when all states become members. To date, many states have not joined because there is not a requirement for criminal background checks for states participating in the NLC.

Solution: The enhanced NLC

In 2015, boards of nursing came together to discuss how more states could join the NLC. They agreed that all states in the NLC would adopt the same requirements for a nursing license. These requirements were put into an updated version of the NLC, what is known as, “The enhanced NLC.”

The enhanced NLC still allows for registered nurses (RNs) and licensed practical/vocational nurses (LPNs/VNs) to have one multistate license in their home state, with the privilege to practice in other NLC states; however, it has been updated with uniform licensure requirements that all NLC states will adopt.

Uniform Licensure Requirements

1. Graduation from a nursing education program approved by the state board of nursing.
2. Successful passage of the NCLEX licensure exam, upon initial licensure.
3. Criminal Background Checks for all applicants applying for initial licensure.
5. Applicant for licensure has not been convicted or found guilty, or has entered into an agreed disposition, of a felony offense (misdemeanors are handled by each state on a case by case basis).
6. Applicant is not currently enrolled in an alternative program.
7. Applicant has met all other home state requirements for licensure.

*These are already required by Missouri.

Unlocking Access to Nursing Care Across the Nation

Licensed Practical Nurses Set to Renew in March 2016

Licensed Practical Nurse (LPN) renewal postcards with PIN numbers will be mailed to your address in early March 2016. They are mailed to the address in our records, so it is very important that you inform our office in writing whenever you change addresses. A change form can be found on the board’s website and also in this publication.

It takes 3-5 business days for your license renewal to be processed. You can go to www.nursys.com to check the status of your license at any time. As a reminder, license cards are not sent and the website is your way of verifying licensure.

Legislative Session

The 2016 legislative session began January 6, 2016 and will go through May 13, 2016. Legislators began pre-filing bills on December 6, 2015.

Legislation impacts nursing careers, shapes health care policy and influences the care delivered to patients. Your education, expertise, and well-earned public respect as a nurse can allow you to exert considerable influence on health care policy. Nurses have been somewhat reluctant to do this in the past, but you are in an excellent position to advocate for patients. Never underestimate the importance of what you have to say. As a professional, you bring a unique perspective to health care issues and often have intricate knowledge that helps provide insight for our legislators.

You should make your thoughts known to your legislative representatives. You can meet with, call, write, or e-mail your legislators. Let your legislators know how to reach you, your area of expertise, and that you have a unique perspective to health care issues and often have intricate knowledge that helps provide insight for our legislators. You can find information about the status of bills and how to contact legislators at http://moga.mo.gov/

Enhanced Nurse Licensure Compact

Representative Kathryn Swan (R-District 147) filed House Bill 2043 and Senator Jay Wasson (R-District 20) will be filing a similar bill in the Senate. Passage of either bill would enact the enhanced nurse licensure compact. Additional details about the compact can be found in the President’s article of this newsletter.

Message from the President continued on page 2

Executive Director Report

Authored by Lori Scheidt, Executive Director

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Executive Director continued on page 3
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**Important Telephone Numbers**

<table>
<thead>
<tr>
<th>Department</th>
<th>Phone Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Department of Health &amp; Senior Services (nurse aide verifications and general questions)</td>
<td>573-526-5686</td>
</tr>
<tr>
<td>Missouri State Association for Licensed Practical Nurses (MoSALPN)</td>
<td>573-636-5659</td>
</tr>
<tr>
<td>Missouri Nurses Association (MONA)</td>
<td>573-636-4623</td>
</tr>
<tr>
<td>Missouri League for Nursing (MLN)</td>
<td>573-635-5355</td>
</tr>
<tr>
<td>Missouri Hospital Association (MHA)</td>
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**Number of Nurses Currently Licensed in the State of Missouri**

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<thead>
<tr>
<th>Profession</th>
<th>Number</th>
<th>As of January 5, 2016</th>
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<tr>
<td>Licensed Practical Nurse</td>
<td>25,241</td>
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<tr>
<td>Registered Professional Nurse</td>
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<td></td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>126,397</td>
<td></td>
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</table>

**Cardiac-Telemetry RNs**

“Medical Mile” in South Springfield. The 644-bed hospital is located in the Cardiac-Telemetry unit at Cox Medical Center Centrally located between Columbia and Kansas City, 10 miles north of I-70.

Submit an application to Human Resources, 2305 S. 65 Hwy, Marshall MO, 65340 or contact Tina Oeth at 660-831-3281 for more information.

CoxHealth

Full-time & part-time position available in the Cardiac-Telemetry unit at Cox Medical Center South. The 644-bed hospital is located in the “Medical Mile” in South Springfield.

• $5,000 Sign-on Bonus
• Up to $5,000 Relocation Assistance
• Additional ETO

Contact Lori Moseley for more information, Lori.Moseley@coxhealth.com or (417) 269-7170.

CoxHealth

**Camp Laurel, Maine**

Camp Laurel, a private, co-ed, residential camp in Maine seeks a Nurse Manager, Charge Nurses and Staff Nurses. Often claimed as one of New England’s premier summer camps, Laurel boasts excellent facilities and a well-staffed medical team. NPs, RNs, LPNs and Recent Grads are all welcomed to join the Laurel family. For more information visit www.camplaurel.com. email staff@camplaurel.com or call 800-337-3509.

**Lake Regional Health System**

Come Join Our Team! Now Hiring

• RNs
• LPNs

Visit www.lakeresregional.com/careers

**Camp Laurel, a private, co-ed, residential camp in Maine seeks a Nurse Manager, Charge Nurses and Staff Nurses.**

**I. Mission Statement**

Camp Laurel is dedicated to providing a safe, fun and enriching experience for all our campers. We are committed to creating an environment where children can grow and thrive in a supportive and nurturing community.

**II. Safety and Health**

- All campers will undergo a thorough health evaluation and screening prior to arrival.
- Campers will be monitored for any signs of illness or injury.
- Campers will be treated for any health concerns that arise during their stay.

**III. Nurse Manager Responsibilities**

- Oversee the overall medical care of campers
- Collaborate with staff to ensure a safe and healthy environment
- Manage the Nurse Office
- Communicate with parents andcoordinates

**IV. Charge Nurses Responsibilities**

- Provide direct care to campers
- Administer medications
- Document all medical concerns

**V. Staff Nurses Responsibilities**

- Provide direct care to campers
- Administer medications
- Document all medical concerns

**VI. LPNs Responsibilities**

- Provide direct care to campers
- Assist with medication administration
- Document all medical concerns

**VII. Application Process**

- All candidates must submit a completed application
- Background check and reference checks will be conducted
- Interview with camp staff

**VIII. Additional Information**

- Camp Laurel is an equal opportunity employer.
- Camp Laurel is committed to diversity and inclusion.

**For more information, please visit www.camplaurel.com or contact staff@camplaurel.com.**

**Missouri Nurses**

Protect your license and your career.

If you have been contacted by the State Board of Nursing or Administrative Hearing Commission, call me or my associate Jennifer Bard for a free consultation as you have the right to be represented by an attorney.

Mariam Decker, RN JD, Attorney
573-443-3134
mdecker@owlaw.com
www.owlaw.com

The choice of a lawyer is an important decision and should not be based solely on advertisements.

**Missouri Nurses Wanted**

As the oldest and most respected agency in the community, we’ve been Kansas City’s choice for home health care since 1891. To learn more and apply, please visit our website at www.vnakc.com.
Nursing Workforce Analysis

Representative Diane Franklin (R-District 123) filed House Bill 1850. Passage of this bill would allow the State Board of Nursing, Board of Pharmacy, Missouri Dental Board, State Committee of Psychologists, or State Board of Registration for the Healing Arts to individually or collectively enter into a contractual agreement with the Department of Health and Senior Services, a public institution of higher education, or a nonprofit entity for the purpose of collecting and analyzing workforce data. Information may be obtained from each board’s licensees, registrants, or permit holders for future workforce planning and to assess the accessibility and availability of qualified health care services and practitioners in Missouri. The bill would require boards to work collaboratively with other state governmental entities to ensure coordination and avoid duplication of efforts. The bill would authorize boards to expend appropriated funds necessary for operational expenses of the program and allow the boards to accept grants to fund the collection or analysis. The bill requires that data collection be controlled and limited to the applicable state board and other requesting the collection. The bill specifies that income or other financial earnings data cannot be collected. Data collected under these provisions must be deemed the property of the state board requesting the data and must be maintained by the state board in accordance with Chapter 610, RSMo, the open meetings and records law, provided any information deemed closed or confidential must not be disclosed without consent of the applicable licensee or entity or as otherwise authorized by law. The data may only be released in an aggregate form in a manner that cannot be used to identify a specific individual or entity.

Supporters of the bill say that currently Missouri does not have reliable data about practice characteristics of health professionals practicing in the state. Without reliable information, the state is seriously misallocating resources and making decisions that may actually be detrimental to Missouri’s health care workforce. Better information will allow the state and shareholders to make better decisions that address the actual needs of Missourians and the health care professionals who treat them.

Prescribing Bills

Senator Brian Munzlinger (R-District 18) filed Senate Bill 752. Under current law, certain assistant physicians, advanced practice registered nurses, and physician assistants can prescribe Schedule II medications which contain hydrocodone. Schedule II - hydrocodone prescriptions are limited to a five-day supply without refill. This act provides that these medical professionals can prescribe all Schedule II prescriptions, which shall be limited to a five-day supply without refill.

Representative Craig Redmon (R-District 004) filed House Bill 1775. This bill is similar to Senate Bill 752.

Advanced Practice Registered Nurse Collaborative Arrangements

Representative Eric Burlison (R-District 133) filed House Bill 1465. This bill changes the laws regarding collaborative practice arrangements between advanced practice registered nurses and physicians. Currently, an advanced practice nurse must have the collaborating physician review a minimum of 10% of his or her charts every 14 days. This bill states that the collaborating physician does not need to be present at the health care practitioner’s site. The bill waives the one-month requirement of practicing with the collaborating physician when the pharmacist is new to a patient population with whom the collaborating advanced practice registered nurse, physician assistant, or assistant physician is already familiar.

Representative Lyle Rowland (R-District 155) filed House Bill 1697. This bill would allow advanced practice registered nurse to be waived as long as the collaborative practice arrangement includes alternative plans to provide coverage during absence, incapacity, infertility, or emergency by the collaborating physician.

Missouri State Board of Nursing Budget

Nursing regulation is the governmental oversight provided for nursing practice in each state. It is the practice of health profession that poses risk of harm to the public if practiced by someone who is unprepared or incompetent. The public may not have sufficient information and experience to identify an unqualified health care provider and is vulnerable to unsafe and incompetent practitioners. Through regulatory processes, the government permits only individuals who meet predetermined qualifications to practice nursing. The Board of Nursing is the authorized state entity with the legal authority to regulate nursing.

The Missouri State Board of Nursing approves individuals for licensure, approves educational programs for nurses, investigates complaints concerning licensees’ compliance with the law, and determines and administers disciplinary actions in the event of proven violations of the Missouri Practice Act.

The budget for the Missouri State Board of Nursing is developed to support the above programming and associated staff support. Funding comes from licensure fees.

The license renewal fee is $60 for Registered Nurses and $52 for Licensed Practical Nurses. From those fees, 10% of the RN and 2% of the LPN fee is deposited in a fund with the Department of Health in order to administer the nursing student loan program.


The top three expenses for our office are professional services to investigate complaints, supplies and salaries. Supplies include postage. This year, we will mail approximately 100,000 renewal notices for a total postage bill of approximately $12,250. One of the ways costs can be decreased is to keep your address current with our office and renew online EARLY.

The Board of Nursing’s fund is also assessed costs from the Division of Professional Registration, Department of Insurance, Financial Institutions and Professional Registration and Office of Administration. These costs include services such as computers, information technology support, purchasing staff, accounting staff, website maintenance, and licensing renewal processing staff. In addition, our office utilizes the Office of the Attorney General for some of our legal counsel work.

RN’s renew every two years in odd-numbered years and LPN’s renew every two years in even-numbered years. Since there are more RN’s than LPN’s, the Board receives more revenue in odd-numbered years than in even-numbered years. The RN renewal cycle is February to April. The LPN renewal cycle is March to May. When determining revenue and expenses, you have to plan to have enough reserve in the fund to pay expenses until the revenue from renewal fees is received. State statute 335.036.4, RSMo, indicates that the Board of Nursing cannot be placed to the credit of general revenue unless the amount in the fund at the end of the year exceeds two times our appropriation. This prevents the Board from charging excessive fees and also explains why renewal fees may fluctuate from year to year.

During the board’s quarterly face-to-face meetings, the board diligently reviews financial statements. We are very cognizant of the fact that nurses pay for the operation of the Board and continually look for ways to cut costs.

Our division is transitioning to a new licensure system. We expect to see a decrease in operational expenses and increase in customer satisfaction and efficiencies when this system is fully implemented.

It is likely that we will see a steep decline in our revenue in the coming years. It is often difficult to predict how many nurses will not renew. Of concern is that 20,313 (20%) of Missouri RNs and 4,524 (18%) of Missouri LPNs are age 60. Even more alarming is the fact that 33,650 (33%) of RNs and 7,516 (30%) of LPNs are over age 55. We know that nurses come back into or stay in the workforce when the economy is down. The numbers show many nurses are older and will retire in the near future, just when the wave of baby boomers hit retirement age themselves and need more nursing care. When this large population of older nurses retires, our revenue will steeply decline. The Board will continue to monitor this trend.
Missouri State Board of Nursing Education Committee Members:
- Roxanne McDaniel, RN, PhD (Chair)
- Lisa Green, RN, PhD
- Marea Snell, DNP, MSN, BSN, RN, FNP-BC
- Anne Heyen, DNP, RN, CNE

Missouri Pre-Licensure Nursing Program 2013 Annual Report Data

In 2013, a total of 103 pre-licensure nursing programs in Missouri provided annual reporting data to the Missouri State Board of Nursing; this included 44 Practical Nursing, 35 Associate Degree Nursing, 1 Diploma and 23 Baccalaureate Degree Nursing programs across the state. Annual report data is utilized as one assessment of Missouri’s pre-licensure nursing education programs and their compliance with the Minimum Standards as outlined in the Missouri Nursing Practice Act and Rules. This program data is carefully tracked to analyze current trends and outcomes in nursing education.

2013 annual report admission data indicates that a total of 6,272 students were newly enrolled in pre-licensure nursing programs in Missouri: 1,600 were Practical Nursing (PN) students, 1,965 were Associate Degree Nursing (ADN) or Diploma students, and 2,707 were enrolled in a Baccalaureate Degree Nursing (BSN) program. Data also indicates that in 2013, 4,870 students graduated from the various pre-licensure nursing programs across the state totaling 1,161 PN, 1,494 ADN and Diploma, and 2,215 BSN graduates. An overall retention rate of 77.64% is indicated.

Qualified applicants who were turned away from Missouri pre-licensure nursing programs totaled 2,911 (PN: 508, ADN and Diploma: 1,075, and BSN: 1,328); these numbers could be somewhat skewed because applicants often apply to multiple nursing programs during open admission cycles. Pre-licensure nursing programs reported that an additional 205 faculty (PN: 29, ADN and Diploma: 68, and BSN: 108) would have been needed to accept all qualified applicants. In 2013, 44.5 open full-time faculty positions were reported, in which 6 were from PN programs, 13 from ADN and Diploma programs, and 25.5 from BSN programs. Reported data regarding the faculty specialty area most difficult to fill indicates the following:

As distance learning continues to grow, so does out-of-state nursing program utilization of Missouri clinical sites. 2013 data indicates that multiple bordering states have clinical rotation(s) in Missouri healthcare facilities. Several Missouri programs at various levels of nursing education also report their approval to conduct clinical rotations at multiple sites in various states. Below is a chart indicating those states reported by Missouri pre-licensure nursing programs in 2013 (47 programs responded) indicating their awareness of out-of-state students attending clinical rotations in Missouri.

Beginning in January of 2016, the Annual Report Survey will be sent to all programs during the first week of January. Reporting will be completed by June 1st of each year. With this change, all programs will complete 2015 annual reporting between January and June 1, 2016. Benefits to this change include a facilitated timeline to complete annual reporting for all programs of nursing; streamlining processes to match annual registration deadlines; and earlier data collection that can then be analyzed and shared with nursing programs across the state.

As trends in pre-licensure nursing program data continue, this information will prove beneficial for all levels of nursing programs, faculty, students, graduates, and the Board to continually improve the quality of nursing education in the state of Missouri.
The enhanced NLC does the following:

- The NLC is currently active in 25 states.
- It allows nurses (LPN/VNs) to have one multistate license, with the registered nurses (RNs) and licensed practical/vocational nurses residing in their state to provide care to patients in other NLC states. Nurses do not have to obtain an additional licensing(s), making practicing across state borders affordable and convenient. The compact removes a burdensome expense not only for nurses, but also organizations that employ nurses and may share the expenditure of multiple licenses.

BONs were the first health care provider regulatory bodies to develop a model for interstate practice with the original adoption of the NLC in 1997 and its implementation in 2000. While other health care provider regulatory bodies are just getting started in this process, the NLC has been operational and successful for more than 15 years.

History has taught us that there is no increased risk to the public with this modern licensure model. Nurses who live in compact states are issued a multistate license in the same way they are issued a single-state license. All the safeguards that are built into the current state licensing process are required before a nurse is issued a multistate license. In fact, the NLC has uniform licensure requirements so that all states can be confident the nurses practicing within the NLC have met a set of minimum requirements, regardless of the home state in which they are licensed. The requirements for a multistate nursing license include passage of a national licensure exam; graduation from an approved nursing education program; a fingerprint-based criminal background check; and any additional requirements a state may have.

Although less than 1 percent of U.S. nurses ever require discipline by a BON, in the rare event of any disciplinary issues or problems, swift action can be taken by the BON regardless of the state where the nurse is licensed or practices. If a nurse is disciplined, the information is placed into a national database called Nursys®, which all states can access to care while maintaining public protection. The enhanced NLC, which is an updated version of the current NLC, allows for registered nurses (RNs) and licensed practical/vocational nurses (LPN/VNs) to have one multistate license, with the ability to practice in both their home state and other NLC states. There are currently 25 states in the NLC.

The Enhanced NLC does the following:

- Enables nurses to provide telehealth nursing services to patients located across the country without having to obtain additional licenses.
- Allows nurses to easily respond to provide vital services in the event of a disaster.
- Facilitates online nursing education.

Additionally, almost every nurse, including primary care nurses, case managers, transport nurses, school and hospice nurses, among many others, need to routinely cross state boundaries to provide the public with access to nursing services, and a multistate license facilitates this process.

Compact states issue multistate licenses that permit nurses residing in their state to provide care to patients in other NLC states. Nurses do not have to obtain an additional nursing license(s), making practicing across state borders affordable and convenient. The compact removes a burdensome expense not only for nurses, but also organizations that employ nurses and may share the expenditure of multiple licenses.

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A Modern Nurse Licensure Solution for the 21st Century

The enhanced NLC increases access to health care, protects patient safety and reduces cost while supporting state-of-the-art health care delivery – for today and in the future. To join the NLC, states need to enact the enhanced NLC model legislation and conduct a federal criminal background check of their nurses.

For more information about the enhanced NLC check out nursecompact.com.

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Twenty-three Missouri and Metro East, IL nurses representing 12 health care institutions were named Nurse of the Year at the 4th Annual March of Dimes Nurse of the Year Awards Gala on October 10, 2015 at the Marriott St. Louis Grand Hotel. Approximately 650 people attended the gala that raised more than $212,000 for the Missouri Chapter.

The nurses were recognized for their extraordinary level of patient care, compassion, professionalism, integrity and leadership in the nursing profession. At the gala, Dr. Ruth Murray received the prestigious 2015 Legend in Nursing Award for her decades of service to the profession.

The March of Dimes Missouri Chapter received more than 500 nominations for Nurse of the Year. A selection committee comprised of health care professionals reviewed and scored the confidential nomination forms. Dr. Elizabeth Buck, Assistant Dean for Nursing at Maryville University, chaired the 2015 committee.

Whether serving as health care provider, educator, researcher, chapter volunteer and/or advisor – nurses play a critical role in advancing the mission of March of Dimes. According to Alyssa Wolf, March of Dimes Community Director and event organizer, “The Nurse of the Year Awards provide a platform to recognize extraordinary caregivers and celebrate nurses who inspire and go above and beyond to impact change. Finalists and winners represent this elite group of professionals, through their tireless dedication, compassion, commitment and kindness. There are not enough opportunities to honor nurses and we are proud to be leading the way by recognizing the outstanding contributions that nurses make, and providing resources to improve the health of babies by preventing birth defects, premature birth and infant mortality.”

The mission of the March of Dimes is to improve the health of all babies by preventing birth defects, premature birth and infant mortality. The Nurse of the Year initiative supports this mission while recognizing exceptional nurses throughout the state, celebrating the profession, and creating awareness of the strides made in this growing field.

The 2015 Nurse of the Year Awards was presented by The Catherine McAuley School of Nursing at Maryville University. Nominations for the 2016 awards open April 1, 2016. For more information call 314.513.9960.
### 2015 Nurse of the Year Winners

<table>
<thead>
<tr>
<th>Category</th>
<th>Nominee</th>
<th>Hospital/Location</th>
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</thead>
<tbody>
<tr>
<td>Advanced Practice (tie)</td>
<td>DeAnn Wilson</td>
<td>Mercy Hospital – St. Louis</td>
</tr>
<tr>
<td>Advanced Practice (tie)</td>
<td>Glenda Miller</td>
<td>CoxHealth – Springfield</td>
</tr>
<tr>
<td>Behavioral Health</td>
<td>Angel Mortensen</td>
<td>Mercy Hospital – St. Louis</td>
</tr>
<tr>
<td>Case Management, Public Health &amp; Occupational Health</td>
<td>Kim White</td>
<td>Southern Illinois University Edwardsville</td>
</tr>
<tr>
<td>Charge Nurse &amp; Front Line Supervisor</td>
<td>Amanda Lankford</td>
<td>Golden Valley Memorial Hospital</td>
</tr>
<tr>
<td>Clinical Informatics (tie)</td>
<td>Helen Jankowski</td>
<td>University of Missouri – Columbia</td>
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<tr>
<td>Clinical Informatics (tie)</td>
<td>Diane Watson</td>
<td>St. Louis Children’s Hospital</td>
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<tr>
<td>Critical Care</td>
<td>Angela Novak</td>
<td>Mercy Hospital – St. Louis</td>
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<tr>
<td>Education (tie)</td>
<td>Valerie Yancey</td>
<td>Southern Illinois University Edwardsville</td>
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<td>Education (tie)</td>
<td>Kristine L’Ecuyer</td>
<td>St. Louis University School of Nursing</td>
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<td>Emergency Care</td>
<td>Karen Heembrock</td>
<td>Mercy Hospital – Jefferson</td>
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<tr>
<td>General Medical (Adult Care)</td>
<td>Linda Newberry</td>
<td>Maryville University</td>
</tr>
<tr>
<td>Hospice, Home Health, Palliative Care, Long Term Acute Care</td>
<td>Gail Pittroff</td>
<td>Barnes-Jewish Hospital</td>
</tr>
<tr>
<td>Infection Control &amp; Quality/Risk Management</td>
<td>Melissa Schmidt</td>
<td>Mercy Hospital – St. Louis</td>
</tr>
<tr>
<td>NICU/PICU</td>
<td>Judith Davidson</td>
<td>BJC HealthCare</td>
</tr>
<tr>
<td>Nursing Administration</td>
<td>Jennifer Cordia</td>
<td>Mercy Hospital – St. Louis</td>
</tr>
<tr>
<td>Pediatrics (tie)</td>
<td>Barbara Sicking</td>
<td>University of Missouri – Columbia</td>
</tr>
<tr>
<td>Pediatrics (tie)</td>
<td>Heather Dennis</td>
<td>Saint Louis University School of Nursing</td>
</tr>
<tr>
<td>Research</td>
<td>Helen Lach</td>
<td>Mercy Hospital – St. Louis</td>
</tr>
<tr>
<td>Rising Star</td>
<td>Kara Ranft</td>
<td>Mercy Hospital – St. Louis</td>
</tr>
<tr>
<td>Student Nurse</td>
<td>Kierstin Nowack</td>
<td>Cox Medical Center – South</td>
</tr>
<tr>
<td>Surgical Services</td>
<td>Terry Westrip</td>
<td>Mercy Hospital – St. Louis</td>
</tr>
<tr>
<td>Women’s Health &amp; Obstetrics</td>
<td>Michele Muraski</td>
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Moments with Marcus

by Marcus Engel

Last fall, I was honored to keynote for the Missouri Student Nursing Association. And the best part was that I would, for the first time, be sharing the stage with Barb, my oh-so-awesome nurse who is continually referenced in my books and lectures.

Barb, who’s character has inspired thousands and thousands of nurses, asked if I remembered another nurse named “Susan.”

Seems that while I was still on a vent, still in traction, still learning the extent of my injuries, Susan also had the “pleasure” of taking care of me. Why the quotes? Because Susan was one of those nurses to whom I was not very nice. That’s probably putting it mildly. At that time, I hated everyone and everything.

I had to admit, the trauma, the pain, the narcotics during recovery and the years have completely erased Susan from my memory.

For (literally) decades, Barb and Susan have worked together on the same floor, and in the compliment to end all compliments, Barb said that if she ever is hospitalized, she wants Susan for her nurse. That’s high praise, folks. Barb went on to say whenever my name comes up, Susan gets visibly uncomfortable.

Susan had also sent a letter along with Barb to give to me. In it, she shared an incident that occurred while I was under her care. Apparently, I didn’t think she was paying enough attention to me, or I wasn’t getting the right treatment or something. Either way, I wasn’t happy with her and I told her so. Knowing me, profanity was probably involved.

“I wish you could see how hard I was trying”

To this day, that incident still bothers Susan. In her note, she apologized and concluded with, “I wish you could have seen how hard I was trying.”

I wish I could have, too.

If Susan is half as good as Barb says she is, there was no way she would intentionally disregard any patient, much less a teenager with catastrophic injuries. The fact she’s still thinking about this some 20 years later shows it was impactful for her.

We patients can be a demanding bunch of ingrates. When do we want more pain meds, help to the bathroom, water or more Jello? 15 minutes ago. We’re tired of waiting, we’re hurting and no one seems to care. At least, that’s how we perceive it.

Unbeknownst to us, you’re in the next room doing chest compressions on a code. You’re helping an elderly patient retain his dignity following a hernia repair. You’re holding the hand of a 30 something patient who feels disfigured after an aggressive malignancy forced a double mastectomy. You’re taking care of more than just us…but we don’t care…we just know we need something…now.

You’ve probably echoed Susan’s sentiment: you wish patients could see how hard you’re trying.

Please remember we patients probably aren’t typically so bent out of shape. We are, quite possibly, enduring one of the worst days we’ve ever had. If we’re jerks, please don’t internalize our complaints too much. Please don’t think that our insults, our caustic commentary on care is, in any way, the whole picture. Please don’t carry the painful comments of a drugged up patient or family member as the gospel truth. You are life savers. You are professionals. And you do it all with compassion and empathy. We just can’t always see how hard you’re trying.

Thank you for taking care of monster patients like me. And Susan, thank you (especially you) for taking care of me at my worst.
Pursuant to Section 335.066.2 RSMo, the Board “may cause a complaint to be filed with the Administrative Hearing Commission as provided by chapter 621, RSMo, against any holder of any certificate of registration or authority, permit, or license required by sections 335.011 to 335.310 or any person who has failed to renew or has surrendered his certificate of registration or authority, permit or license” for violation of Chapter 335, the Nursing Practice Act.

Licensee practiced nursing in Missouri without a license

Hultman, Mary T

Censure 09/08/2015 from May 1, 2013, to March 2, 2015.

Registered Nurse 064134

Penn, Kristen R

Censure 11/02/2015

unemployment by the documentation due date of June 5, 2015, did not receive an employer evaluation or statement of
failed to properly call, or failed to complete the call
Licensed Practical Nurse 048250

Hessel, M

Censure continued on page 10

regulations promulgated under Licensee's authority, permit, or license required by sections 335.011 to 335.310 or any person who has failed to renew or has surrendered his certificate of registration or authority, permit or license” for violation of Chapter 335, the Nursing Practice Act.

Censure 09/24/2015
Wilker, Jeannee M

Registered Nurse 112363

On March 17, 2014, Licensee received a corrective action form related to unsatisfactory patient care practices in that on 3/12/2014, licensee gave a requested bottle to a 5-week-old patient in violation of Re-feeding Protocol Order for infants. On May 14, 2014, Licensee received a second corrective action form because on 5/2/2014, licensee mistakenly gave a patient with low blood glucose 20 ml of Dextrose instead of the ordered 12.5 ml; Licensee admitted this mistake was made because of a clerical error. Also when she had given the Dextrose, licensee left the greenclave adapter attached to the patient’s IV line, causing blood to back up in the IV tubing and leaving blood on the floor. Censure 10/02/2015

Purchase, Erin Tiffany

Registered Practical Nurse 2011026463

Licensee practiced nursing in Missouri without a license from June 1, 2014, to September 3, 2015. Censure 10/19/2015

Cotton, Tammy Lynne

Registered Nurse 058462

From May 11, 2015, until the filing of the Complaint, Respondent failed to call in to NTS on two (2) days.
Further, on May 19, 2015, Respondent called NTS and
was advised that she had been selected to provide a urine sample for screening. Respondent failed to report to a
collection site to provide a sample and the sample tested positive for Ethyl Glucuronide (EtG) and Ethyl-Sulfate (ES), metabolites of alcohol. Respondent’s BGI level was 2073 ng/mL and the ES level was 680 ng/mL. Censure 11/03/2015

Jankowski, Meril Lynn

Troy, MO

Licensed Practical Nurse 048280

Resident HG previously developed a relationship of
POA from 2012 until the end of 2013. Resident HG later
moved into and lived at the facility, however, was never POA from 2012 until the end of 2013. Resident HG later
moved into and lived at the facility, however, was never under Licensee’s direct supervision and care. Licensee
used some portions of the joint bank account for HG, but used funds from the joint bank account for her personal
use. Licensee admitted to an investigating Police Officer that she used approximately $3,000.00 of the funds in the accounts for her personal use.
Censure 11/06/2015 to 11/07/2015

Stapp, Julie A

Porty, MO

Registered Nurse 107206

Licensee was terminated from the Clinic on December 2, 2014, due to inappropriate prescribing practices. Censure 09/08/2015

Ware, Lillian Tierra

Saint Louis, MO

Registered Nurse 2010023161

On September 10, 2016, agency officials were notified by client’s mother that licensee cancelled client’s appointment for September 15, 2013, but that licensee came the next day to see client. Agency officials reviewed licensee’s paperwork. Licensee, on her hourly paperwork in relation to client and also another client, indicated she had seen both clients on September 15, 2013. Censure 09/24/2015

Mays, Carol J

Springfield, MO

Registered Nurse 054887

From December 23, 2013 through December 25, 2013, Licensee worked the night shift at the facility and was providing care for resident IB. Licensee learned from a CNA at approximately 1:00 am on December 24, 2013 that resident IB had an elevated temperature of 101.9 degrees. Licensee did not call resident IB’s physician about the resident’s change in status. Licensee failed to document any treatment or assessment performed for resident IB during her shift. Licensee informed the oncoming nurse on the morning of December 24, 2013 that the resident had had an elevated temperature and that Licensee had treated it using Tylenol. Licensee asked the day shift to notify the physician’s office of the elevated temperature. On December 24, 2013, Licensee worked the night shift at the facility and provided care for resident IB. During the early morning hours of December 25, 2013, Licensee documented that resident IB had a temperature of 104.4 degrees and that she treated the resident with Tylenol.

Censure continued on page 10

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Probation continued...

On September 29, 2014, Licensee submitted a sample for a pre-employment drug screen. Licensee's sample was positive for marijuana metabolites. Licensee admitted to the Board's investigator that she had smoked marijuana. Probation 10/06/2015 to 10/06/2020

Dunley, Jennifer L
Saint Louis, MO
Registered Nurse 136035
Licensee's employer discovered that licensees's license expired April 30, 2015 through August 27, 2015. Licensee practiced nursing in Missouri without a license from April 30, 2015 through August 27, 2015. Licensee submitted a RN Petition for License Renewal (Petition), which was received by the Board on September 18, 2015. On the Petition, Licensee answered "Yes" to question number nine (9), "Do you have any condition or impairment, including a history of alcohol or substance abuse that currently interferes, or if left untreated may interfere, with your ability to practice in a competent and professional manner?" On the Petition, Licensee answered "Yes" to question number ten (10): "Are you now being treated, or have you been treated within the past five years, through a drug or alcohol rehabilitation program?" On April 30, 2013, Licensee had an alcohol-related enforcement contact in that she pled guilty to driving while intoxicated, in the Municipal Court of St. Louis County, Missouri. On January 6, 2015, Licensee pled guilty to the class B misdemeanor of driving while intoxicated, in the Circuit Court of St. Louis County, Missouri, for events occurring on August 22, 2013. On January 6, 2015, Licensee pled guilty to the class B misdemeanor of driving while intoxicated in the Circuit Court of St. Louis County, Missouri, for events occurring on July 29, 2014. Probation 10/19/2015 to 10/19/2018

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Licensure continued: Licensure continued...

Probation continued...

Nixon, Becca Sue
Mineral Point, MO
Licensed Practical Nurse
Registered Nurse 2009701711
On February 4, 2009, Applicant pled guilty to the class A misdemeanor of passing bad checks. On May 3, 2011, Applicant pled guilty to the class A misdemeanor of passing bad checks. On February 8, 2012, Applicant pled guilty to the class A misdemeanor of theft/stealing of any credit card or letter (credit). On June 1, 2012, Applicant pled guilty to the class C felony of forgery. Probation 10/15/2015 to 10/15/2018

Scott, Caroline L
Montreal, MO
Registered Nurse 2009701711
On June 23, 2015, Respondent pled guilty to the class B misdemeanor of driving while intoxicated. Respondent was on call and was on her way to work at a hospital in Loxton, Missouri, as a registered professional nurse when she was involved in a motor vehicle accident and subsequently arrested for driving while intoxicated to which she ultimately pled guilty. Probation 11/02/2015 to 11/02/2020

Kirsch, Andrea M
Hardwood, MO
Registered Nurse 072574
Respondent was assigned to provide home health services for patient R.D. At some point in early June 2013, the exact date of which is unknown, but prior to June 17, 2013, Respondent paid R.D.'s co-payment for medications. R.D. then tried to give Respondent her food stamp card (Electronic Benefits Transfer card or EBT Card) that had a balance of approximately $58.00 of value remaining on it for the month of June 2013. Respondent ultimately took the EBT card from R.D. and subsequently used the card to purchase groceries and/or other items for herself. Respondent then cut up the card. At some point in early June 2013, the exact date of which is unknown, but prior to June 17, 2013, Respondent ingested one (1) of patient R.D.'s prescribed Dilaudid. At a later date in June 2013, but prior to June 17, 2013, Respondent asked patient R.D. for more of R.D.'s Dilaudid and received two (2) Dilaudid pills, which Respondent later ingested. Probation 11/02/2015 to 11/02/2018

Chandler, Amanda Lee
Ozark, MO
Registered Nurse 2012029849
Licensee violated the terms and conditions of probation by failing to call in to NTS on twenty-four (24) days, by failing to submit samples for testing on four (4) days, by testing positive for methamphetamine, and by failing to submit an employer evaluation or statement of unemployment by the documentation due date. Probation 10/22/2015 to 10/22/2020

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Probation continued...

Bradley, Charmaine Nichol
Florissant, MO
Licensed Practical Nurse 2010008140

On December 25, 2013, Respondent arrived for her 7AM shift an hour and a half late. During her shift, Respondent smelled of alcohol, appeared to be under the influence of alcohol, had a glossy look to her eyes, was not focused and didn't seem to understand what was “going on.” Respondent could not be found for an extended period of time by facility staff during her shift. Respondent admitted to facility staff that she had been drinking alcohol before she left home. Licensee was asked to submit to a breath alcohol test by facility officials, and did so. The BAC test of Respondent’s breath revealed two different results, one of 0.02 and another of 0.03.

Probation 11/17/2015 to 11/17/2020

Belt, LaDonna Mae
Marthasson, MO
Registered Nurse 2008005773

On June 21, 2013, Licensee pled guilty to three (3) counts of the class C felony of possession of a controlled substance except 35 grams or less of marijuana. Probation 11/03/2013 to 11/03/2020

Walker, Candice LaValle
Granite City, IL
Licensed Practical Nurse 2015035990

On July 23, 2013, Licensee was charged with conspiracy to commit mail fraud. Licensee did not disclose this information on her application for a license.

Probation 10/06/2015 to 10/06/2018

McMeekan, Abigail L
Brinktown, MO
Licensed Practical Nurse 2015033633

On September 14, 2008, Applicant pled guilty to conspiring to drive while intoxicated. On September 14, 2011, Applicant pled guilty to obstruction of justice, pain scale, or charting; and seven with no pain documented. Licensee removed eight OxylR 5 mg tablets with no justification and no pain scale documented. Probation 11/03/2015 to 11/03/2017

Watkins, LaQuita Michelle
Columbia, MO
Licensed Practical Nurse 2015035766

On April 16, 2007, Applicant pled guilty to two counts of the class C felony of possession of controlled substance except 35 grams or less of marijuana and one count of the class A felony of trafficking in drugs/attempted trafficking in drugs in the second degree. Licensee pled guilty to possessing cocaine.

Probation 10/05/2015 to 10/05/2020

Kjos, Jennifer Lee
Bonne Terre, MO
Licensed Practical Nurse 20070036370

From February 26, 2015 through July 31, 2015, Respondent failed to call in to NTS on twelve (12) days. Further, on April 13, 2015; May 6, 2015; May 21, 2015; June 8, 2015; July 13, 2015; and July 24, 2015, Respondent called NTS and was advised that she had been provided a urine sample for screening. Respondent failed to report to a collection site to provide the requested sample on each of those dates. Respondent was required to submit a chemical dependency evaluation to the Board within eight (8) weeks. The Board did not receive a thorough chemical dependency evaluation submitted on Respondent’s behalf by the due date of February 16, 2016.

Probation 11/02/2015 to 11/02/2020

Meyer, April Dawn
Independence, MO
Registered Nurse 20050086602

From October 22, 2014 through July 31, 2015, Respondent failed to call in to NTS on one (1) day, April 11, 2015. Further, on February 16, 2015, Respondent called NTS and was advised that she had been provided a urine sample for screening. Respondent failed to report to a collection site to provide the requested sample. In addition, on June 17, 2015, Respondent reported to a lab and submitted the required sample which showed a low creatinine reading. On May 19, 2015, Respondent admitted to Ms. Wolken in an e-mail that she had relapsed and tested positive in a cause drug screen.

Probation continued...

February, March, April 2016

Probation continued...
misconstrued as attempted unlawful use of a weapon.

Probation continued from page 11

Paul, Sherry E
Jefferson City, MO
Registered Nurse 120682

On August 14, 2013, Licensee received verbal counseling due to demonstrating threatening or bullying behavior toward staff members. Licensee received verbal counseling on May 20, 2014, for violating the hospital’s hourly rounding protocol. On June 12, 2014, Licensee received written counseling for displaying unprofessional behavior at the nurses’ station. On or about August 18, 2014, Licensee administered Dilaudid, a pain medication, three hours early without having a doctor’s order to do so. Licensee failed to contact the doctor to request orders before giving the medication to the patient. Licensee also failed to document a pain assessment in the patient’s record.

Probation 10/28/2015 to 10/28/2016

Smith, Keenan Sean
Belleville, IL
Licensed Practical Nurse 2004034001

Patient was contacted and she stated that she had not received full dialysis treatment since October 6, 2014 because the dialysis machine would alarm and malfunction after Licensee left the house. Licensee was contacted and informed the agency that he had been unaware of the incomplete dialysis cycles. The nursing visit notes which Licensee documented were reviewed and the numbers Licensee documented for the dialysis visits did not match the numbers reported in the dialysis machine. Licensee failed to accurately document the dialysis care provided to patient. Licensee practiced nursing in Missouri without a license as he provided the dialysis care provided to patient. Licensee failed to accurately document the dialysis care provided to patient. Licensee failed to contact the doctor to request orders before giving the medication to the patient. Licensee also failed to document a pain assessment in the patient’s record.

Probation 10/28/2015 to 10/28/2016

Francis, Maurita SheRee
Kansas City, MO
Licensed Practical Nurse 2008007246

Licensee was licensed as a licensed practical nurse by the Kansas State Board of Nursing, license number 24-39024-03, on June 19, 2009. On September 9, 2014, the Kansas State Board of Nursing issued its Summary Order revoking Licensee’s license to practice nursing in the State of Kansas. Licensee failed to disclose that she was licensed as a licensed practical nurse by the State of Kansas on her Petition. Licensee failed to disclose that her nursing license in the State of Kansas was revoked. Licensee’s action of answering “No” to questions 1 and 3 constitutes the use of fraud, deception or misrepresentation in securing her licensure renewal. On the application, Licensee answered “Yes” to number 6: “Have you ever been convicted, adjudged guilty by a court, pled guilty, pled nolo contendere or entered an Alford plea to any crime, whether or not sentence was imposed?” On July 8, 2014, Licensee pled guilty to the class A misdemeanor of theft/stealing.

Probation 11/03/2015 to 11/03/2017

Harrison, Paula Jo
Jefferson City, MO
Registered Nurse 2008024149

From August 14, 2013 through July 31, 2015, Respondent failed to call in to NTS on one (1) day. Further, on August 20, 2013 and September 5, 2013, Respondent called NTS and was advised that she had been selected to provide a urine sample for screening. Respondent failed to report to a collection site to provide the requested sample. In addition, on one occasion, March 17, 2015, Respondent failed to call in to NTS on one (1) day. Further, on August 6, 2014. On August 1, 2014, Respondent failed to call in to NTS on one (1) day, June 28, 2014. In addition, Respondent called NTS on August 6, 2014 and was informed that she was required to submit a sample for drug and alcohol testing. Respondent failed to report to a collection site to provide a sample for testing on August 6, 2014. On August 1, 2014, Respondent reported to a collection site to provide a sample and the sample tested positive for Ethyl Glucuronide (EtG), a metabolite of alcohol. The Board did not receive evidence of support group attendance by the documentation due date of September 3, 2014. Respondent did not “really work the twelve (12) steps” but knew she was supposed to. Respondent knew she was “supposed to have a sponsor” but did not have a sponsor.

Probation 11/04/2015 to 11/05/2020

Tierney, Jane Ann
Saint Louis, MO
Registered Nurse 2014006646

Applicant was licensed as a registered nurse by the State of Kansas. Licensee failed to disclose that she had been convicted, adjudged guilty by a court, pled guilty, pled nolo contendere or entered an Alford plea to any crime, whether or not sentence was imposed. On September 9, 2014, Respondent admitted to the Board’s Discipline Administrator that she had consumed her mother’s Valium. Respondent did not have a valid prescription for Diazepam.

Probation 11/02/2015 to 11/02/2020

Diazepam.

Valium. Respondent did not have a valid prescription for

9, 2015, Respondent admitted to the Board’s Discipline

showed a low creatinine reading. Respondent’s creatinine

to a collection site to provide the requested sample. In

urine sample for screening. Respondent failed to report

metabolite of alcohol. The Board did not receive evidence

sample tested positive for Ethyl Glucuronide (EtG), a

reported to a collection site to provide a sample and the

on August 6, 2014. On August 1, 2014, Respondent

Respondent failed to call in to NTS on one (1) day, June

June 28, 2014. In addition, Respondent called NTS on August 6, 2014 and was informed that she was required to submit a sample for drug and alcohol testing. Respondent failed to report to a collection site to provide a sample for testing on August 6, 2014. On August 1, 2014, Respondent reported to a collection site to provide a sample and the sample tested positive for Ethyl Glucuronide (EtG), a metabolite of alcohol. The Board did not receive evidence of support group attendance by the documentation due date of September 3, 2014. Respondent did not “really work the twelve (12) steps” but knew she was supposed to. Respondent knew she was “supposed to have a sponsor” but did not have a sponsor.

Probation 11/04/2015 to 11/05/2020

Probation continued from page 11

Fenning, Katherine Elaine
Lewistown, MO
Licensed Practical Nurse 2013037278

On November 12, 2014, Respondent pled guilty to one count of Stealing.

Probation 11/17/2015 to 11/17/2020

Schaedler, Christie Marie
Saint Charles, MO
Registered Nurse 2015039520

On October 12, 1998, Applicant pled guilty to the offense of Driving While Intoxicated in the Municipal Court of Maryland Heights, Missouri. On August 11, 1999, Applicant pled guilty to the offense of Boating While Intoxicated. On July 19, 2005, Applicant pled guilty to the offense of Driving While Intoxicated in the Municipal Court of Maryland Heights, Missouri. On June 13, 2014, Applicant pled guilty to the class A misdemeanor of Driving While Intoxicated - Alcohol - Prior Offender. Applicant received an administrative alcohol suspension of her driver’s license effective August 21, 2014, from the Department of Revenue. The administrative suspension noted that Applicant’s blood or breath alcohol content was .297 that led or contributed to this suspension.

Probation 11/04/2015 to 11/04/2020

Probation continued...
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On December 9, 2013, Respondent submitted a sample for a for-cause drug screen. The sample Respondent submitted on Respondent’s behalf was positive for marijuana. On January 13, 2014, Respondent failed to report to a collection site to provide the requested sample. In addition, on December 29, 2014; January 13, 2015; January 21, 2015; February 11, 2015; February 23, 2015; March 9, 2015; March 24, 2015; and April 16, 2015, Respondent failed to call NTS. However, those were days that Respondent had been selected to submit a sample for testing. Therefore, Respondent failed to report to a collection site to provide a sample for testing on those dates. The Board did not receive an employer evaluation or statement of unemployment by the documentation due date of February 19, 2015.

Marcum, Michael Leland
Spring Hill, KS
Registered Nurse 2002019966
Respondent failed to call in to NTS on one hundred thirty (139) different days. Further, on October 21, 2014, Respondent called NTS and was advised that he had been selected to provide a urine sample for screening. Respondent failed to report to a collection site to provide the requested sample. In addition, on December 29, 2014; January 13, 2015; January 21, 2015; February 11, 2015; February 23, 2015; March 9, 2015; March 24, 2015; and April 16, 2015, Respondent failed to call NTS; however, the Board did not receive a thorough chemical dependency evaluation submitted on Respondent’s behalf by the documentation due date of July 3, 2015.

Revoked 09/17/2015

White, April Nicole
Camdenton, MO
Licensed Practical Nurse 2010007940
From August 11, 2014 through April 27, 2015, Respondent submitted on Respondent’s behalf by the documentation due date of February 19, 2015.

Revoked 09/17/2015

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Kansas City, MO
Licensed Practical Nurse 2008003691
Respondent failed to call in to NTS on nine (9) different days. Further, on June 16, 2015, Respondent called NTS and was advised that she had been selected to provide a urine sample for screening. Respondent failed to report to a collection site to provide the requested sample. On June 3, 2015, Respondent submitted a urine sample for random drug screening. That sample tested positive for the presence of Codeine. The Board did not receive an employer evaluation or statement of unemployment by the documentation due date of March 9, 2015. The Board did not receive a thorough chemical dependency evaluation submitted on Respondent’s behalf by the documentation due date of July 3, 2015.

Revoked 09/17/2015

England, Erin Lynne
Stoutland, MO
Licensed Practical Nurse 2006013119
The Board did not receive an employer evaluation or statement of unemployment by the documentation due date of March 9, 2015. The Board did not receive a thorough chemical dependency evaluation submitted on Respondent’s behalf by February 3, 2015. The Board did not receive a thorough mental health evaluation submitted on Respondent’s behalf by February 3, 2015.

Revoked 09/10/2015

Burke, Kelly Nicole
Sachse, TX
Registered Nurse 2004020662
Respondent failed to call in to NTS on seventy-four (74) days. Respondent ceased calling NTS on November 16, 2014. In addition, on February 21, 2014; March 17, 2014; June 2, 2014; September 30, 2014; October 7, 2014; November 19, 2014; December 11, 2014; December 22, 2014; and January 5, 2015, Respondent failed to call NTS; however, all were days that Respondent had been selected to submit a sample for testing. Therefore, Respondent failed to report to a collection site to provide a sample for testing on those dates. Respondent additionally failed to report to a collection site for testing on July 21, 2014, although that was a day that she called NTS and was notified that she had been selected for testing. In addition, on three (3) separate occasions, Respondent reported to lab and submitted the required sample which showed a low creatinine reading. The Board did not receive an employer evaluation or statement of unemployment by the documentation due date of October 30, 2014. The Board did not receive chemical evidence of regular support group meeting attendance by the documentation due date of October 30, 2014.

Revoked 09/17/2015
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oncoming night nurse to verify that all narcotics were accounted for. Respondent had previously on the same shift been given two cards to place in a double-locked box on the medication cart, containing approximately 60 pills each, of Oxycodone, by a Certified Medical Technician at the center. The morning shift at the center on November 13, 2013, noted 114 Oxycodone pills were missing. The center reported the theft to the police department. Respondent admitted to Center officials when confronted that day that she did not count the Oxycodone the previous evening with the oncoming nurse. Respondent was assigned the “keys” to the locked box on the medication cart on her shift and was the last person on that shift to have responsibility for the Oxycodone; therefore, it was her responsibility to ensure the pills were counted correctly and transferred to the custody of the next shift corresponding.

Revoked 09/30/2015

Berry, Robert Edward
Registered Nurse 2008009970
On February 9, 2015, Respondent was convicted of the felony offense of video voyeurism.
On January 13, 2014, Respondent pled guilty to seven counts of the class D felony of fraudulently attempting to obtain a controlled substance. On January 13, 2014, Respondent pled guilty to eight counts of the class C felony of stealing a controlled substance.

Revoked 10/19/2015

Freisen, Sicily Anne
Overland Park, KS
Registered Nurse 2001001495
The Missouri State Board of Nursing received information from the Kansas State Board of Nursing via the NURSYS website that the nursing license of Respondent was revoked in Kansas by the Kansas State Board of Nursing by Order dated March 2, 2015. The Order incorporated the allegations of the Petition, which stated that Respondent violated the Kansas Nurse Practice Act by willfully and repeatedly violating provisions of the Kansas Nurse Practice Act by failing to complete the requirements of the impaired provider program and being unable to practice with skill and safety due to current abuse or drugs or alcohol.

Revoked 10/19/2015

Thomas, Katherine
Shell Knob, MO
Licensed Practical Nurse 2005803119
On January 13, 2014, Respondent was prohibited from allowing her license to lapse.

Revoked 10/19/2015

Mazzone, Donna Lynn
Springfield, MO
Registered Nurse 2013003159
On November 14, 2013, Respondent was prohibited from allowing her license to lapse.

Revoked 10/19/2015

Fierman, Sicily Anne
Overland Park, KS
Registered Nurse 2001017666
Respondent was required to meet with representatives of the Board at such times and places as required by the Board. Respondent did not attend the meeting or contact the Board to reschedule the meeting. Respondent was required to contract with the Board approved third-party administrator, currently National Toxicology Specialists, Inc. (NTS), to schedule random witnessed screening for alcohol and other drugs of abuse within five weeks of the effective date of the Order, which was May 11, 2015. Respondent did not complete the contract process with NTS. Respondent was to submit an employer evaluation from every employer or, if Respondent was unemployed, a statement indicating the periods of unemployment. The Board did not receive an employer evaluation or statement of unemployment by the documentation due date of May 18, 2015.

Revoked 09/30/2015

Baker, Sarah Elizabeth
Springfield, MO
Registered Nurse 2013003159
On January 13, 2014, Respondent was prohibited from allowing her license to lapse.

Revoked 10/19/2015

Corinman, Sarah Elizabeth
Sullivan, MO
Registered Nurse 2001021173
Respondent failed to call in to NTS on sixty-seven (67) days. Respondent ceased calling NTS on June 7, 2015. A co-worker reported that she smelled alcohol when she was close to Respondent and that Respondent appeared to be intoxicated. Respondent also could not set up tubing equipment as part of her job responsibilities despite being shown 3-4 times previously how to do it. On November 19, 2013, when she again smelled of alcohol on the job, Respondent was then requested by her employer to take, and she then submitted to, an alcohol breath test. The alcohol breath test tested Respondent’s blood alcohol content at .202%.

Revoked 09/30/2015

Pretz, Sarah V
Blue Springs, MO
Licensed Practical Nurse 057743
Count I - Respondent was terminated for failing to count narcotics medications at the end of her shift as required to make sure narcotic medication was not missing and because she failed to submit a sample for a for-cause drug test in violation of facility policy.

Count II - The surgeons advised the nursing home administrator that Respondent was signing out and administering narcotics at a higher rate than other nurses. It was discovered by the surgeons that the nursing home could not account for 165 Oxycodone tablets. On August 25, 2014, Respondent arrived at work and began working as the charge nurse for fifty-two (52) residents. The nursing home Director of Nursing (DON) and the Administrator requested that Respondent submit a urine sample for a for-cause drug screen. Respondent stated that she could not give a sample at that time as she had just gone to the bathroom. The DON went to get some water for Respondent so that Respondent could give a urine sample. Respondent then left the Administrator’s office, put her keys on the desk, and left the facility without reporting off on her patients. Respondent left patients who were in her care, thus abandoning her patients. On August 26, 2014, the Board of Nursing sent Respondent a
letter notifying her of the complaint filed by the nursing home and requested Respondent to respond within thirty (30) days. On September 17, 2014, the Board's investigator called Respondent and left a message asking her to respond to the complaint. Respondent never responded to the complaint and failed to cooperate with the Board during the investigation.

Revoked continued...

Branum, Lawrence P
O Fallon, MO
Registered Nurse 120894
On January 15, 2015, Respondent was found guilty of four (4) counts of the class C felony of deviate sexual assault. Respondent committed the crimes of deviate sexual assault for which he was found guilty in his capacity as a registered professional nurse.

Revoked 10/07/2015

Lynch, Christina M
Independence, MO
Licensed Practical Nurse 053253
On April 5, 2012, Respondent pled guilty to the class C felony of stealing. On April 28, 2014, Respondent pled guilty to the class B misdemeanor of driving while intoxicated. The California Board of Vocational Nursing and Psychiatric Technicians took disciplinary action against Lynch, Christina M, a registered nurse.

Revoked 10/01/2015

McAtee, Mona Lynn
Cedar Hill, MO
Registered Nurse 2001009712
On July 6, 2015, Respondent was found guilty upon a plea of guilty to the class C felony of stealing a credit card and to the class D felony of fraudulent use of a credit device. Respondent stole a credit/debit card from M.B., a patient under her care.

Revoked 10/19/2015

Hancock, Tonya Michelle
Crane, MO
Registered Nurse 2008080539

Revoked 10/20/2015

Murphy, John Mark
Winfield, MO
Registered Nurse 2004019246
On February 28, 2013, hospital administration received a report from another staff member that Respondent’s behavior while on duty at work as an RN in spending an inordinate amount of time in the restroom was concerning. Respondent emerged from the restroom appearing flushed, his skin clammy and his eyes red and glassy. Hospital administrators requested that Respondent submit a sample for a for-cause drug test based on his behavior. Respondent provided a urine sample for screening. The sample that Respondent submitted tested positive for Fentanyl.

Revoked 10/15/2015

Femmer, Terra Maureen
Villa Ridge, MO
Licensed Practical Nurse 2012034007
Respondent was advised by certified mail to attend a scheduled meeting for her professional evaluation on April 28, 2015. Respondent did not attend the meeting or contact the Board to reschedule the meeting. Respondent did not complete the contract process with NTS. The Board did not receive an employer evaluation or statement of unemployment by the documentation due date of July 8, 2015. The Board did not receive a thorough chemical dependency evaluation submitted on Respondent’s behalf by the due date of June 3, 2015.

Revoked 10/02/2015

Foti, Pamela Faye
Kansas City, MO
Registered Nurse 2001008572
Respondent did not complete the contract process with NTS. The Board did not receive an employer evaluation or statement of unemployment by the documentation due date of July 7, 2015. The Board did not receive a thorough chemical dependency evaluation submitted on Respondent’s behalf by the due date of June 2, 2015.

Revoked 10/01/2015

Seltz, Leroy Charles, III
Farmington, MO
Licensed Practical Nurse 20110039967
Respondent documented the administration of medications to patients in excess of physician orders; documented the administration of medications at times after he had toileted out of work when he could not have administered the medications at the times he documented; failed to have a witnessed signature when he wasted a medication; and, failed to accurately document liquid intakes and outputs for patients under his care.

Revoked 10/23/2015

Hoover, Lee Ann
Windsor, MO
Registered Nurse 2001005302
On April 17, 2015, Respondent was found guilty of the class C felony of tampering in the first degree. On April 17, 2015, Respondent was found guilty of two (2) class C misdemeanors of assault in the third degree.

Revoked 10/22/2015

Whisenton, Erica TAMAR
Black Jack, MO
Registered Nurse 2011020018
Respondent signed up to participate with NTS on December 15, 2014, but did not complete the contract process with NTS until June 17, 2015. Because Respondent signed up to participate with NTS, NTS kept track of her call-in participation. From April 28, 2015, through July 27, 2015, Respondent failed to call in to NTS on fifty-one (51) days. Further, on May 7, 2015; June 2, 2015; and June 15, 2015, Respondent failed to call NTS; however, these were days that Respondent had been selected to submit a sample for testing. Therefore, Respondent failed to report a collection site to provide a sample for testing on May 7, 2015; June 2, 2015; and June 15, 2015. On July 10, 2015, Respondent reported to a collection site to provide a sample for alcohol and drug screening, and the sample Respondent submitted tested positive for Ethyl Glucuronide (EtG), a metabolite of alcohol. When questioned about the positive test, Respondent admitted that she had consumed two (2) drinks two (2) days before she provided the sample.

Revoked 11/02/2015

Wilkinson, Carrie L
Joplin, MO
Registered Nurse 150626
On February 28, 2013, hospital administration received a report from another staff member that Respondent’s behavior while on duty at work as an RN in spending an inordinate amount of time in the restroom was concerning. On March 19, 2015, Respondent was required to submit a sample for alcohol and drug screening by the due date of June 3, 2015. Respondent submitted tested positive for Fentanyl.

Revoked 10/20/2015
set forth on her deadline sheet and that she was now late on the evaluation that was due December 29, 2014. On September 28, 2013, Respondent’s license was suspended due to failing to file state tax returns or failing to pay state tax liabilities. The Board received employer evaluations on September 24, 2013; December 27, 2013; and March 27, 2014, indicating that Respondent was employed and working as a nurse; thus, she was working as a nurse on a suspended license.

Russell, Stephen Thomas
Roanoke, MO
Registered Nurse 2008021531
On April 16, 2014, Respondent pled guilty to driving while intoxicated and failing to drive on the right half of the roadway in the Circuit Court of Greene County, Missouri. On October 8, 2014, Respondent pled guilty to driving while intoxicated in the Circuit Court of Greene County, Missouri. On October 8, 2014, Respondent pled guilty to driving while intoxicated and operating a vehicle in a careless and imprudent manner in the Circuit Court of Greene County, Missouri. Revoked 10/23/2015

Scantlin, Amanda Michelle
Raymondville, MO
Licensed Practical Nurse 2009028332
Co-workers and peers began to report possible suspicious activity to their superiors involving Respondent’s medication administration practices during September 2013. In October 2013, an audit conducted revealed Respondent had several discrepancies in her dispensing policy for wasting medications, particularly involving Percocet and oxycodone. The Board’s investigator tried to contact Respondent by mail and at the telephone numbers on file with the Board on March 27, 2014; April 2, 2014; and April 23, 2014. Revoked 10/01/2015

Owens, Brandon Timothy
Saint Louis, MO
Registered Nurse 2013033904
Respondent has not called in to NTS since May 18, 2015. On May 22, 2015; June 18, 2015; July 3, 2015; and July 8, 2015, Respondent failed to call NTS; however, those were days that Respondent had been selected to submit a sample for testing. Therefore, Respondent failed to report to a collection site to provide a sample for testing. The Board did not receive an employer evaluation or statement of unemployment by the documentation due date of June 3, 2015. The Board did not receive a chemical dependency evaluation update submitted on Respondent’s behalf by the documentation due date of June 3, 2015. The Board did not receive proof of support group attendance by the documentation due date of June 3, 2015. Revoked 09/17/2015

Hampton, Jennifer Nicole
Dexter, MO
Registered Nurse 2003002341
On December 19, 2013, hospital administrators requested that Respondent submit a urine sample for a for cause drug screen due to presumed missing controlled substance medication. Respondent agreed to submit a sample and was driven to the collection site. At the collection site and prior to submitting a sample, Respondent informed nurse LS that she had smoked some marijuana and taken a nerve pill over the weekend. Respondent did submit a urine sample for drug testing on December 19, 2013. The urine sample that Respondent submitted for testing returned positive for barbiturates, benzodiazepines, opiates, hydrocortisone, hydrocodone, oxycodone, and oxymorphone. The Board’s investigation revealed that Respondent had loaned six hundred and forty dollars ($640.00) to one of Respondent’s patients. Patient JS’s husband, HS, reported that Respondent owed him money. HS reported that Respondent took items from an estate sale he had in April 2013. Respondent took items and loaded them in her car while HS was caring for JS. On or about May 20, 2014, May 27, 2014 and July 1, 2014 co-workers observed Licensee exhibiting odd behavior. Licensee was observed failing aspek, trying to pick up objects off the floor that did not exist, and his pupils were dilated. On July 1, 2014, Licensee was observed remaining in a restroom for a lengthy amount of time.

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SUSPENSION

Kelly, Jason Scott
Nevada, MO
Registered Nurse 2001027066
Suspended 10/28/15 to 04/28/16. Probated 04/29/16 to 04/28/17
On or about May 20, 2014, May 27, 2014 and July 1, 2014 co-workers observed Licensee exhibiting odd behavior. Licensee was observed failing aspek, trying to pick up objects off the floor that did not exist, and his pupils were dilated. On July 1, 2014, Licensee was observed remaining in a restroom for a lengthy amount of time.

February, March, April 2016

Revoked continued...

Burk, Sonja Kay
Springfield, MO
Registered Nurse 2009029761
Respondent had been providing care for patient JA. On June 18, 2013, nurse DP arrived at patient JA’s home for a routine visit. Patient JA was agitated and informed nurse DP that he had loaned Respondent six hundred and forty dollars ($640.00) in August 2012 and had not been paid back. Patient JA showed nurse DP text messages between Respondent and patient JA related to the loan. Nurse DP reported this activity to hospice administrators. On June 19, 2013, Respondent signed an agreement with the hospice to withhold money from her last paycheck to cover the balance of the unpaid loan from patient JA. Hospice administrators spoke to Respondent’s other patients to see if she had borrowed money from them. Patient JS was one of Respondent’s patients. Patient JS’s husband, HS, reported that Respondent owed him money. HS reported that Respondent took items from an estate sale he had in April 2013. Respondent took items and loaded them in her car while HS was caring for JS. On or about May 20, 2014, May 27, 2014 and July 1, 2014 co-workers observed Licensee exhibiting odd behavior. Licensee was observed failing aspek, trying to pick up objects off the floor that did not exist, and his pupils were dilated. On July 1, 2014, Licensee was observed remaining in a restroom for a lengthy amount of time.
and when he emerged, he was staggering and had taken off his shirt and was wearing a t-shirt and shorts. Blood splatter was found in the restroom. When questioned by the director of nursing, Licensee admitted to having a drug problem in the past and also admitted to taking his mother-in-law’s hydrocodone. Licensee admitted to the Board’s investigator that he had been taking Hydrocodone all day at work on July 1, 2014. Licensee indicated that he should not be around narcotics. Licensee admitted that he relaxed on hydrocodone. Licensee’s license was previously on probation with the Board from October 26, 2005 through October 26, 2010, as a result of working as a nurse in an impaired state and diverting morphine and Demerol.

Suspension 10/28/2015 to 04/28/2016

Voluntary Surrender

Sebourn, Deborah D
Clarkton, MO
Licensed Practical Nurse 054809
While employed as a home health nurse, Licensee admitted to falsely documenting visits with five (5) of her patients, admitted that false documentation occurred on multiple occasions, admitted that she had made up the information in the nurse visit reports and signed the patients’ names to the nurse visit reports. Licensee did not respond to any of the Board Investigators telephone calls and failed to cooperate during the investigation.

Voluntary Surrender 11/2/2015

Klipfel, Cynthia D
Peculiar, MO
Registered Nurse 099905
The California State Board of Nursing disciplined Licensee’s license upon grounds for which suspension or revocation is authorized in this State.

Voluntary Surrender 11/19/2015

Williams, Martha K
Saint Charles, MO
Registered Nurse 106176
Licensee voluntarily surrendered her Missouri nursing license on November 13, 2015.

Voluntary Surrender 11/13/2015

Shaw, Tonya Dione
Independence, MO
Registered Nurse 200902492
On November 2, 2015, Licensee voluntarily surrendered her Missouri nursing license.

Voluntary Surrender 11/02/2015

Blanner, Donna L
Cuba, MO
Licensed Practical Nurse 022666
On October 23, 2015, Licensee voluntarily surrendered her Missouri nursing license.

Voluntary Surrender 10/23/2015

Gallop, Angela F
Sedalia, MO
Registered Nurse 112380
Licensee voluntarily surrendered her Missouri nursing license on September 15, 2015.

Voluntary Surrender 09/15/2015

Phillips, Lei Ann
O Fallon, MO
Registered Nurse 2002002397
In late October, 2014, a routine pharmacy audit indicated that Licensee was withdrawing more Fentanyl and Dilaudid than her co-workers. Licensee tested positive for Dilaudid than her co-workers. Licensee tested positive for Dilaudid and failed to cooperate during the investigation.

Voluntary Surrender 09/14/2015

O Fallon, MO
Registered Nurse 099905
October 26, 2005 through October 26, 2010, as a result of working as a nurse in an impaired state and diverting morphine and Demerol.

Suspension 10/28/2015 to 04/28/2016

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Voluntary Surrender 09/14/2015

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