The New Enhanced Nurse Licensure Compact will be Implemented on January 19, 2018

As you may be aware, Missouri passed a law to allow it to become a member of the enhanced Nurse Licensure Compact (eNLC). The eNLC will be implemented in Missouri on Jan. 19, 2018. The enhanced nurse licensure compact is very similar to the original nurse licensure compact that was implemented in 2010. States that are members of the eNLC will issue multistate licenses that allow you to practice physically, electronically and/or telephonically across a state border to patients located in other states that are members of the eNLC. If you have a current Missouri multistate license, you will be grandfathered into the eNLC. If you are not already enrolled in Nursys e-Notify as a nurse, please do so now. Nursys e-Notify will deliver real-time notifications about your nurse licensure status including multistate and single-state changes within the enhanced Nurse Licensure Compact. Keeping on top of your license can help you prevent any fraudulent licenses or certificates being issued in your name. As with the original NLC, if you practice in other states on your multistate license, you must adhere to the laws and regulations of the state where the patient is located.

Here are some important changes we want you to know about:

• The eNLC has specific licensure requirements. These are called “Uniform Licensure Requirements (ULRs).” As stated above, all nurses previously declaring Missouri their home state and holding a multistate license will be grandfathered into the eNLC; however, if you move to another state that is a member of the eNLC, you will need to meet the ULRs. Likewise, all nurses applying for licensure and declaring Missouri their home state will need to meet the ULRs.
• The states that are part of the eNLC are not exactly the same as the original NLC. If you have an eNLC multistate license, you can only practice in those designated eNLC states (see ncsbn.org/enlc for an updated map).
• Practice is where the patient/client is located at the time services are received. If you need to practice in a state that is not a member of the eNLC, including those states that were part of the original NLC but did not adopt the eNLC, you need a single state license issued from that state regardless of whether you hold a multistate license.

If you need more information:
The National Council of State Boards of Nursing has a website (ncsbn.org/enlc) that will provide you with the details you need to know about this new and exciting change for licensure in your state. On the website, there are numerous resources available for your use, including written information, videos and infographics. The website will also lead you to our state board of nursing website.

Message from the President

Mariea Snell, DNP, MSN, RN, FNP-BC, President

The devastating recent events in Texas and Florida made me think about the impact natural disasters can have on a community. One of the services needed most during these times is medical care. We as nurses have a drive to help where help is needed, but we must also be aware of the best course of action and what legal implications may come into play.

During previous disasters such as Hurricane Katrina, many healthcare workers flocked to New Orleans to help. Most came through organizations such as the Red Cross or disaster management systems organized through the state. However, some came on their own without direction or effective legal coverage for their services. Doing this puts you and your license at risk.

So what can we do here in Missouri to be prepared and help in a way that is effective and safe? First, consider registering with www.showmeresponse.org. This site provides helpful information and creates a database of local providers who are ready and willing to respond. Second, on that website you will find links to additional training specific to nursing that will lead to a certificate in disaster preparedness.

When deploying with Show Me Response, you are protected under Chapter 4 of Civil Defense Section 44.045 which states:

“I. Subject to approval by the state emergency management agency during an emergency declared by the governor, any health care provider licensed, registered, or certified in this state or any state who agrees to be so deployed as provided in this section may be deployed to provide care as necessitated by the emergency, including care necessitated by mutual aid agreements between political subdivisions and other public and private entities under section 44.090. During an emergency declared by the governor, health care providers deployed by the governor or any state agency shall not be liable for any civil damages or administrative sanctions for any failure, in the delivery of health care necessitated by the emergency during deployment, to exercise the skill and learning of an ordinarily careful nurse practice act of Missouri. Knowledge is power. Please review the resources and register with www.showmeresponse.org.
The VA Offers OUTSTANDING Federal Benefits:
- 8 hours of vacation pay per pay period (RN)
- Pay Differential (10% Evenings/Nights; 25% Weekends), 13 days Sick Leave (may be accumulated indefinitely)
- Generous Selection of Health Insurance Plans, Retirement/Life Insurance, 10 Federal Holidays, Education Programs & more...

Please contact our nurse recruiter, Gwendolyn Holland at 314-289-6479 or email at gwendolyn.holland@va.gov

Registered Nurses

Would You Like to Make a Difference in the Life of a Child?

Hawthorn Children’s Psychiatric Hospital, a fully accredited, Missouri Department of Mental Health operated psychiatric facility is seeking the right candidates for Registered Nurses full-time – all shifts.

Qualified candidates must be a Licensed RN in the state of Missouri.

Full-time employees receive competitive pay, excellent benefits, including 3 weeks paid vacation and 3 weeks sick leave the first year, a pension plan, deferred compensation program, cafeteria plan, health, vision, life and dental plan options, as well as 12 paid holidays per year and opportunities for professional growth.

Interested candidates may apply to person, via e-mail, fax, or US mail to:

Sherry Gilbert, Personnel Analyst
Hawthorn Children’s Psychiatric Hospital
7901 Pennsylvania Avenue, St. Louis, MO 63111
Email: sherry.gilbert@dmh.mo.gov
Fax (314) 512-7621

Important Telephone Numbers

| Department of Health & Senior Services (nurse aide verifications and general questions) | 573-526-5686 |
| Missouri State Association for Licensed Practical Nurses (MoSALPN) | 573-636-5659 |
| Missouri Nurses Association (MONA) | 573-636-4623 |
| Missouri League for Nursing (MLN) | 573-635-5355 |
| Missouri Hospital Association (MHA) | 573-893-3700 |

Number of Nurses Currently Licensed in the State of Missouri

As of October 19, 2017

<table>
<thead>
<tr>
<th>Profession</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Licensed Practical Nurse</td>
<td>24,848</td>
</tr>
<tr>
<td>Registered Professional Nurse</td>
<td>105,915</td>
</tr>
<tr>
<td>Total</td>
<td>130,763</td>
</tr>
</tbody>
</table>

SCHEDULE OF BOARD MEETING DATES THROUGH 2018

November 7-9, 2017
February 28-March 2, 2018
May 23-25, 2018
August 8-10, 2018
November 7-9, 2018

Meeting locations may vary. For current information please view notices on our website at http://pr.mo.gov or call the board office.

If you are planning on attending any of the meetings listed above, notification of special needs should be forwarded to the Missouri State Board of Nursing, PO Box 656, Jefferson City, MO 65102 or by calling 573-735-2966 to ensure available accommodations. The text telephone for the hearing impaired is 800-735-2966.

Note: Committee Meeting Notices are posted on our web site at http://pr.mo.gov

The VA St Louis Health Care System is recruiting Registered Nurses

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I'm serving those who have unselfishly served our country.

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The best care with the best opportunities.

VA Offers OUTSTANDING

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Please contact our nurse recruiter, Gwendolyn Holland at 314-289-6479 or email at gwendolyn.holland@va.gov
Executive Director Report

Lori Scheidt, Executive Director

2017 Fiscal Year Statistics

The 2017 fiscal year for Missouri State government began July 1, 2016 and ended June 30, 2017.

The Board reviews complaints that are filed against the license of a nurse. Following an investigation, the Board determines whether or not to pursue discipline.

The Board of Nursing may take disciplinary action against a licensee for violation of the Nursing Practice Act (see 335.066, RSMo). The Board is authorized to impose any of the following disciplines singularly or in combination:

- **Censure**—least restrictive discipline. A censure acts as a public reprimand that is permanently kept in the licensee’s file.
- **Probation**—places terms and conditions on the licensee’s license for a period of time not to exceed five years.
- **Suspension**—requires that the licensee cease practicing nursing for a period not to exceed three years.
- **Revocation**—most restrictive discipline. An order of revocation results in the licensee no longer being able to practice nursing in Missouri.

The following charts show the category and source of complaint and application reviews that were closed this past fiscal year. There were 2,184 Board decisions that became effective fiscal year 2017.

### Complaint Categories FY 2017

- **Practice** (15%)
- **Discipline or EDL** (19%)
- **Unlicensed Practice** (3%)
- **Tax Noncompliance** (18%)
- **Criminal** (26%)
- **Alcohol/Drugs** (19%)

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**Drug testing required. Some restrictions apply.**

### Missouri State Board of Nursing

November, December 2017, January 2018

Executive Director Report continued on page 4

**A Career To Feel Good About**

Looking for a career with great work-life balance?

ARJ Infusion Services is seeking talented registered nurses who thrive on delivering compassionate home infusion care to patients with rare and chronic conditions.

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- Springfield, MO: (417) 886-1001 • Dallas, TX: (214) 631-9200

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- **CNA’s**: . . . . . . . . . . . . . . $16.00/hr
- **LPN’s**: . . . . . . . . . . . . . . $30.00/hr
- **CHHAs**: . . . . . . . . . . . . . . $15.00/hr

- **First Call requires recent work experience and good references.**

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  - Top Wage
  - Daily Pay
  - Weekly Pay
  - Pay Cards
  - Vacation
  - AFLAC
  - Direct Deposit

- **First Call knows I work hard.**
- **First Call knows I care.**
- **First Call knows... I’m Amazing!**

For more information call today:
- Tulsa, OK: (918) 665-1011 • Oklahoma City, OK: (405) 842-7775
- Springfield, MO: (417) 886-1001 • Dallas, TX: (214) 631-9200

Apply online at
www.My-FirstCall.com

Drug testing required. Some restrictions apply.
The next chart shows the actions taken by the Board for those complaints and application reviews.

**Final Actions FY 2017**

- Closed with no further action: 72.85%
- Probation: 2.25%
- Revisions: 2.02%
- Denied: 0.91%
- Censure: 1.42%
- Voluntary Surrender: 0.23%
- Suspension/Probation: 0.05%
- Closed with no compliance: 17.76%

**Licenses Issued in Fiscal Year 2017**

<table>
<thead>
<tr>
<th>Category</th>
<th>Registered Nurse</th>
<th>Licensed Practical Nurse</th>
</tr>
</thead>
<tbody>
<tr>
<td>Licensure by Examination (includes nurses not educated in Missouri)</td>
<td>4,055</td>
<td>1,119</td>
</tr>
<tr>
<td>Licensure by Endorsement</td>
<td>2,391</td>
<td>264</td>
</tr>
<tr>
<td>Licensure by Renewal of a Lapsed or Inactive License</td>
<td>1,368</td>
<td>515</td>
</tr>
<tr>
<td>Number of Nurses holding a current nursing license in Missouri as of 6/30/2017</td>
<td>103,410</td>
<td>24,049</td>
</tr>
</tbody>
</table>

There were 1,099 new Advanced Practice Registered Nurse applications approved in fiscal year 2017. The Board granted 315 nurses advanced prescriptive authority in fiscal year 2017. There are currently 1,646 Advanced Practice Registered Nurses with controlled substance prescriptive authority.

**Age Distribution**

The board continues to keep a close eye on the age distribution of nurses as many are at or near retirement.

---

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“I’m the 4th generation of my family to work here!”

Sloane Elias maintains a special tradition at the Atchison Hospital and enjoys the richly emotional experience of nursing in our OB Department.

“I’ve always been interested in all things medical and knew I wanted to end up in Atchison eventually. I’m a ‘people person,’ and Atchison Hospital has the best people: my patients and co-workers.”

We strive to continue Sloane’s tradition.

When RNs are this dedicated, they deserve to be generously compensated. Atchison Hospital offers an excellent salary and benefits package and sign-on bonus. If you have the passion we’re looking for, we have the rewards you deserve. Go to atchisonhospital.org to see current openings.

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**Missouri Licensed Practical Nurses**

Source: Missouri State Board of Nursing - 2017
Executive Director Report

Missouri Registered Nurses

Missouri Advanced Practice Registered Nurses

Source: Missouri State Board of Nursing - 2017

Nursing Opportunities

Fulfill your calling with SSM Health.

Being a nurse at SSM Health is more than a job. It is part of a sacred trust. We want you to join our 144-year heritage of healing within our Mission-driven, integrated health system.

At SSM Health, each employee brings a special gift to our Mission, and through our actions and words, we reveal the healing presence of God. When you join our exceptional team of more than 30,000 employees, our sacred ministry is in your hands.

As you continue on your career search and learn more about SSM Health, we hope you are inspired and recognize the critical role you will play when you join our team. Like the Sisters who came before us, at SSM Health we offer hope and healing to our patients.

Nurses are a vital member to our patients’ clinical care team. Choose SSM Health as your next career partner and become part of our exceptional team today.

Visit ssmhealthcareers.com/nursing or text SSMJOBS to 48421 to learn more.
Education Updates – Missouri Innovation and Participation

Missouri State Board of Nursing Education Committee Members
- Xenoxane McDaniel, RN, PhD (Chair)
- Marjaa Snell, DNP, MSN, BSN, RN, FNP-BC
- Anne Heyen, DNP, RN, CNE

In 2011 the State of Missouri established, through legislative action and appropriation of funds, the Nursing Education Incentive Program (NEIP) with the goal to increase physical and educational capacity of nursing education programs in Missouri. NEIP funding has been awarded through appropriations provided by the Missouri State Board of Nursing. The Missouri State Board of Nursing works closely with the Missouri Department of Higher Education to select recipients. Grants have been awarded in 2011, 2012, 2013 as well as 2016 and 2017. Since 2011, a total of 90 proposals were submitted by institutions of higher learning that offer professional nursing programs in Missouri; of those a total of 35 proposals were funded. Qualifying nursing programs may receive up to $150,000 per grant award/year. During 2016 and 2017 nursing programs across the state received in excess of $1,700,000 in grant funding; overall close to $5,000,000 has been awarded to expand nursing program capacity across the state. While evaluation of 2016/2017 funding is pending, progress reports submitted to the Missouri State Board of Nursing by nursing schools that received grant money between 2011 and 2013 indicate that grants helped support significant increases in enrollment in pre-licensure BSN, RN to BSN and MSN programs. One school reported to have doubled enrollment in their master’s in nursing education program, which in turn will increase faculty resources; significant increase in RN to BSN enrollment was also reflected. Many programs reported to have hired at least one or two new faculty (estimated impact of at least 17 newly hired faculty assistir professors), provided scholarships for faculty to attain PhD and DNP degrees, and used funds to expand simulation coordinator duties to develop or enhance simulation scenarios. Expansion of clinical sites was another achieved objective in several progress reports. Grant funding was utilized to facilitate search/secure additional clinical sites/opportunities for clinical learning and to expand adjunct clinical faculty resources. Increases in advertising/recruiting budgets was also described. Major equipment purchases and upgrades were made; significant focus on expansion of simulation technology was reflected. Progress reports related to 2016/2017 grant funding are expected in May of 2018. We will provide updates related to impact of current grant funding at that time.

The Missouri State Board of Nursing has been offering the Innovative Best Practices in Nursing Education (IBP) Conference on an annual basis since 2015. The conference has been co-sponsored by State Fair Community College in Sedalia, Missouri. The College has graciously provided their Thompson Center to conduct this sought-after educational offering. The conference is offered free-of-charge to nurse educators from across the state and surrounding areas. Each year, many nurse educators use this opportunity to connect with their colleagues and to collaborate about new, innovative ideas to use as they teach their students. Enrollment averages 120 attendees and evaluations show that much is gained from participation. This year’s conference was held on April 7, 2017, and offered sessions on patient safety, legal aspects in nursing education, item writing and analysis for nursing exams, as well as strategies to enhance clinical education through the use of simulation and preceptorships. Next year’s session is scheduled for April 6, 2018 and will offer the coveted National Council of State Boards of Nursing (NCSBN) NCLEX Review Session. This session is a full day offering that will provide nurse educators with an up close view of NCLEX exam construction, psychometrics and research utilized to maintain the exams. Representatives from NCSBN – NCLEX plan to come to Missouri to present this important information. The conference will continue to be co-sponsored by the Missouri State Board of Nursing in collaboration with State Fair Community College and will therefore again be offered free-of-charge to attendees. While non-attendees and evaluations show that much is gained from participation.

In March 2017, the Missouri State Board of Nursing approved the Air Force Nursing Services Practical Nurse (PN) Training Program – Basic (Tiered Duty) Spanish/Corpsman Program (BMT/CP) 4N051/4N071 (4N training program) as an approved program of practical nursing in the State of Missouri. While a few other states are recognizing this program as equivalent to standard practical nurse education, Missouri is the first state to grant this approval. This means that airmen on active duty, retirees as well as military service members with 4N051/4N071 designation currently serving in the Air Force National Guard/Reserve are academically eligible to apply to sit for the licensure exam in Missouri to become a practical nurse. This training program is identified as a Tiered Duty Specialty – Total Force Integration (Active Duty, Guard, and Reserve) program that consists of three (3) phases of medical training. Phase I entails a Medical Technician Course that requires fourteen (14) weeks of basic military medical technician training that is offered simultaneously for several military branches. Service-specific break-out sessions then prepare airmen serving in field work specific to the Air Force. Airmen are required to complete EMT training in order to progress in their training program. Once the basic military training has been completed, airmen must apply to the Second Phase of their training program, which is conducted at one of ten multidisciplinary bedded facilities (Air Force Medical Centers). As airmen continue their education, Phase II Upgrade Training is conducted at Whiteman Air Force Base – 509th Medical Group or at one of 74 other Active Duty Air Force Military Medical Facilities, 82 Reserve Units, and 89 Guard Medical units. Assignment of specific duty specialty identifiers/codes follows, indicating each duty skill level as airmen with 4N designation continue to provide care while advancing in their educational pathway. Extensive education, training and experience as well as rigorous testing and competency verifications are required to attain five and seven skill level designations. The 4N Training spans over a time frame of a minimum of 68 weeks of full-time education, training and service. At least 54 weeks of training are dedicated to hands-on/ on the job medical training. During Upgrade Training, a minimum of two (2) clock hours per week are dedicated to theory/simulation lab training, specific to individual learning needs of the airmen while airmen work their full-time assignments. Missouri welcomes airmen on active duty, retirees as well as military service members with 4N051/4N071 designations to complete EMT training in order to progress in their career.

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Moments with Marcus
My People

We Americans have pretty short attention spans, don’t ya think? Things that grab the headlines with words like “catastrophe” and “devastation” become distant memories after a couple of months. Or maybe a couple of weeks. Maybe hours? Or maybe even as soon as we flick off the tube.

I’m no different. After all, we’re all products of our media choices. We know that drama sells, yet in times of natural or man-made disasters, the fervor is sometimes necessary to warn the public of what’s coming. Hence, why I’ve been attached to news. (BTW, I was out of town during the storm and my family and home are all fine.)

At the time of this writing, it’s the morning of September 11. I doubt any of us will ever forget the day 16 years ago when our lives and nation changed. What struck me about this situation wasn’t her heroic acts, but rather how it wasn’t even a question. She didn’t hem haw around, deciding whether or not to go. She didn’t weigh out every possibility. She saw “her people” and their need. That was it. There wasn’t even a question… she was going.

Friends, I don’t know if Lisa is even a nurse, but I can say this for sure: she has the heart of one. Lisa may have been a CNA or a tech, she may have not been a clinical professional at all. She may have worked in the kitchen of the nursing home - I dunno. But, we do know that she saw need and moved into action. This enthusiasm for the profession of caregiving and commitment to helping others is in abundance during times of crisis in our nation. I believe it’s in abundance in healthcare professionals all the time.

Thank you for lighting the way every day by showing up and reaching out. You are the very best of people.

At Compass Health Inc., we are looking for Psychiatric Nurse Practitioners to provide adult and child/adolescent psychiatric services in locations throughout Missouri. Send C.V. to Cathy Grigg at cgrigg@compasshealthinc.com.

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**Nursing Workforce Collaborative Pilot Project**

**Bibi Schultz, RN MSN CNE – Director of Education**

As part of efforts to anticipate and address nursing workforce shortage Kansas City and St. Louis Metropolitan Healthcare and Hospital Councils, regional offices of Kansas and Missouri Hospital Associations, came together in 2004 to form the Workforce Collaborative Pilot Project in 2004. The Nurse Expansion Initiative started in Kansas City with the focus to expand educational capacity of nursing programs in the Kansas City area and was later implemented in St. Louis in 2005. As indicated in the Workforce Collaborative Pilot Project – Annual Report (2016-2017), this initiative followed several regional meetings during which shortages in qualified clinical faculty were identified as major barriers to expansion of seat capacity in nursing programs across the state.

In 2004, the Missouri State Board of Nursing (Board) approved the Workforce Collaborative Pilot Project (WCPP) proposal for regulatory exemption for baccalaureate-prepared registered nurses to serve as clinical instructors in pre-licensure baccalaureate degree nursing programs in Missouri. Requirements for the regulatory exemption include that clinical faculty candidates who plan to serve as clinical faculty in such pre-licensure nursing programs must have undisciplined licensure to practice in Missouri, candidates are actively working toward a graduate degree in nursing, and that candidates attend the two-day Clinical Faculty Academy (CFA). The Board expanded the approval to include the St. Louis metropolitan area in 2005; extended approval of the exemption through 2009, to include the St. Louis metropolitan area in 2005, Academy (CFA). The Board expanded the approval working toward a graduate degree in nursing, and licensure to practice in Missouri, candidates are actively engaged in clinical practice and willing to serve as clinical faculty. The report suggests that due to expansion of clinical faculty resources, participating Kansas City schools enrolled an additional 601 new nursing students in 2016-2017 and St. Louis schools provided an additional 387 seats for new students in the same period of time. It is to be noted that these statistics represent current outcomes for Kansas City and St. Louis metropolitan area nursing programs captured in this report as well as just a few nursing programs located within these areas, but outside of Missouri state lines. In 2015 yielded an attendance of 57 nurses preparing for clinical practice. While data on enrollment of additional students due to this expansion of clinical faculty in nursing programs located in central parts of Missouri is not available at this time, the report shows that 36 nurses attended the Central Missouri CFA session coordinated by Missouri Hospital Association staff in July 2016. Additional sessions are planned in Columbia and Springfield, Missouri in 2017 and promise to continue to expand much needed clinical faculty resources for area nursing schools.

Evaluation of impact includes comparison of NCLEX licensure exam data for participating schools, which shows that utilization of highly qualified nurses that are actively engaged in clinical practice and willing to share their clinical expertise as clinical faculty has not adversely impacted licensure exam outcomes. The WCPP Annual Report (2016-2017) reflects just how highly valued preparation for clinical teaching available to them through CFA offerings. It is important to note that CFA sessions, regardless of location, are continued to attract nearly 100 attendees, nursing schools and clinical partners. As indicated in the 2016-2017 report, costs are underwritten by the Missouri Hospital Association or its subsidiary.

As indicated throughout this article, impact of this Nurse Expansion Initiative continues to be powerful. At a time when development and expansion of the nursing workforce is so vital, utilization of highly qualified, well-prepared clinical experts as clinical faculty is invaluable. Through their engagement as nursing faculty, nurses have the opportunity to work directly with nursing students to provide real-life clinical learning experiences that foster clinical decision making and prepare students for clinical practice as a nurse. As nurses utilize their expertise to fill clinical faculty roles, opportunities to grow and develop their skills as a teacher while working on their graduate degrees in nursing creates a win-win situation for patients, students, nurses, educators and their clinical partners. Nurses interested in serving nursing schools in this capacity are strongly encouraged to contact their area nursing schools in their region and inquire about opportunities to use their knowledge and clinical expertise to help build the nursing workforce of tomorrow. The Missouri State Board of Nursing (Board) – Table of Schools provides information about all pre-licensure nursing programs approved by the Board. Contact information for each nursing program is included on the Board’s website at [http://pr.mo.gov/boards/nursing/schoolsofnursing.pdf](http://pr.mo.gov/boards/nursing/schoolsofnursing.pdf). Licensure exam performance for innovative regulatory exemption to expand clinical nurse faculty across the state remains quite significant. 2016-2017 CFA enrollments for Kansas City and St. Louis metropolitan areas are reported at 456 nurses preparing to serve as clinical faculty. The report suggests that due to expansion of clinical faculty resources, participating Kansas City schools enrolled an additional 601 new nursing students in 2016-2017 and St. Louis schools provided an additional 387 seats for new students in the same period of time. It is to be noted that these statistics represent current outcomes for Kansas City and St. Louis metropolitan area nursing programs captured in this report as well as just a few nursing programs located within these areas, but outside of Missouri state lines. In 2015 yielded an attendance of 57 nurses preparing for clinical practice. While data on enrollment of additional students due to this expansion of clinical faculty in nursing programs located in central parts of Missouri is not available at this time, the report shows that 36 nurses attended the Central Missouri CFA session coordinated by Missouri Hospital Association staff in July 2016. Additional sessions are planned in Columbia and Springfield, Missouri in 2017 and promise to continue to expand much needed clinical faculty resources for area nursing schools.

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The mission of the Missouri State Board of Nursing is to protect the public’s health and safety through regulation of nursing education, licensure, and practice. In FY2017, the Board worked diligently to improve services and strengthen programs for public protection. Highlights of the Board’s work are listed below:

**Education:***
- Continued recognition of the Missouri State Board of Nursing by the U.S. Department of Education as an approval agency for nurse education for four years. The Board has had this recognition since 1970 and received continued recognition on May 25, 2017. The Board is currently one of five Boards across the country that has this recognition.
- Approved the Air Force Nursing Services Practical Nurse (PN) Training Program – Basic Medical Technician Corpsman Program (BMTCP) 4N051/4N071 (4N training program) on March 22, 2017.
- Developed and promulgated Veteran’s Bridge program rules to foster completion of the practical nurse curriculum for service members with education, training and service in the medical field.
- Proposed grant program to professional nursing under the Board’s Nursing Education Incentive Program. The State of Missouri established, through legislative action and appropriation of funds, the “Nursing Education Incentive Program” in order to increase the physical and educational capacity of nursing education programs in Missouri. In 2016, $979,620 was awarded. In 2017, $810,221 was awarded for a total of $1,789,841 for the FY2017.
- The Board negotiated/succeeded in program closure of three (3) underperforming nursing programs.
- Held the Innovative Best Practice (IBP) in Nursing Education Conference on April 7, 2017. This conference is co-sponsored by the Missouri State Board of Nursing with State Fair Community College. This year’s conference was the third annual IBP conference. There were 127 nurse educators from all levels of nursing education present. Presenters, most of them nurse educators from different areas of the state, readily shared their experience without monetary compensation which made it possible to offer this valuable experience without cost to educators.
- 95.8% employers and 100% of educators in Missouri indicated the board of nursing’s guidelines and regulations regarding supervision of student nurses are adequate to assure safe and competent care.

**Compliance:**
- Explored development of an alternative to discipline program to remove impaired nurses from practice in a more timely fashion and increase public protection. A legislative request to pursue this program was approved by the board.
- Successfully implemented the board’s approved drug testing web based check in system for licensees requiring drug testing.
- Held board committee meetings every two weeks followed by full board mail ballots to ensure timely resolution of complaints. Twenty-two Consumer Protection Conference Calls were held in FY2017.

**Investigations:**
- Missouri resolved cases on average in 3.2 months.

**Legal:**
- The board employs three attorney team members with a combined 43 years’ experience. Below is a snapshot of legal team performance since attorneys were added to the in-office team:

<table>
<thead>
<tr>
<th>Year</th>
<th>Decisions</th>
<th>Hearings</th>
<th>RNs Licensed</th>
<th>LPNs Licensed</th>
<th>Contract Attorney Fees</th>
<th>Calendar Days to Complete a Case: From Receipt of Complaint to Final Resolution</th>
</tr>
</thead>
<tbody>
<tr>
<td>2008</td>
<td>1,605</td>
<td>106</td>
<td>$7,798</td>
<td>$24,646</td>
<td>$814,143.32</td>
<td>284</td>
</tr>
<tr>
<td>2016</td>
<td>2,311</td>
<td>179</td>
<td>105,014</td>
<td>25,478</td>
<td>$17,069.11</td>
<td>95</td>
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- Average days to issue a temporary permit to Registered Nurses was 4.05 days and for Licensed Practical Nurses was 4.93 days. This is a calendar day; not business days.
- Answered 58,759 telephone calls
- Revised all applications for licensure to ensure that the process was streamlined and easily understood by applicants.
- Continued to use Nursys.com for license verification purposes. This improves customer service because nurses can request verifications online 24 hours a day and verifications are immediately available. Utilization of Nursys.com also strengthens our fraud prevention efforts. A total of 6,672 of Missouri nurses requested that their Missouri license be verified to another state and 2,601 nurses licensed in other states requested verification into Missouri.
- Continued to urge nurses and employers to enroll in Nursys e-Notify for many reasons. Enrollment in this system alerts the institution and/or nurse before a license expires and when it expires. Alerts are sent to the enrollee any time any discipline is attached to the enrolled license. For a nurse enrollee, this system can help prevent any fraudulent licenses or certificates being issued in the nurse’s name. Missouri is a member of the nurse licensure compact. A multi-state license is tied to the nurse’s primary state of residence. A change to a nurse’s primary state of residence could change the multi-state license status. This system will notify the enrollee if that status changes. When a nurse submits a license renewal online, the license is not automatically renewed. This system notifies the enrollee when the license is renewed. This system pushes notification of changes to the enrollee rather than having to continually re-query the system. A total of 851 institutions accounting for 77,979 nurses were enrolled in the institution e-Notify. A total of 55,959 (40.23%) of Missouri-licensed nurses were enrolled in nurse e-Notify.

**Workforce:**
- Added the workforce data elements to Nursys e-Notify so workforce related information can be provided by the nurse during license renewal. This information is used for the purposes of nursing workforce research. A total of 55,959 (40.23%) of Missouri-licensed nurses were enrolled in nurse e-Notify.
- Entered into a contract with the Office of Social and Economic Data Analysis at the University of Missouri – Columbia to conduct research on Missouri’s healthcare workforce by collecting and analyzing healthcare workforce data regarding nurses licensed by the board of nursing.

**Operations:**
- 91% of nurses, 100% of employers, and 100% of nurse educators in Missouri indicated the timeliness of the response on an email inquiry as excellent or good.

**Leadership**
- Bibi Schultz, Director of Education
  - Multi-State Collaborative on Military Credit (MCMC). Term runs from June 1, 2015 through October 31, 2017.
  - NCSBN Nursing Education Outcomes and Metrics Committee. Terms runs September 2016 through August 2018.

**Practice:**
- The practice section performed 28 presentations about the Missouri Nurse Practice Act and the Board of Nursing. Of those, 14 presentations were to schools of nursing, four were to community RN groups, five were to school nurse groups, and five were to other organizations.
- Continued to provide timely in-person responses to hundreds of email and phone inquiries.
- Continued to build and reinforce relationships with other health care related state agencies and associations/organizations.

**Rn to Bsn  
Goldfarb School of Nursing**

With a curriculum designed by some of the most experienced nursing faculty, our program allows registered nurses to obtain a bachelor of science in nursing degree online while gaining advanced competencies. Expand your knowledge through our accelerated RN to BSN program.

BarnesJewishCollege.edu/RNtoBSN
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2017 Golden Awards

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We are happy to announce that Golden Certificates were recently sent to 261 Registered Nurses and 35 Licensed Practical Nurses. These individuals have been licensed in the State of Missouri for 50 years. We take great pleasure in marking this special achievement in the licensed nursing community.

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Nobody wants the flu.

Protect Your Patients

Protect Your Family

Protect Yourself

Stay in the Game.
Get Vaccinated.
Tackle the Flu

Patients and co-workers depend on YOU to get your immunizations.

Flu Immunization Annually

✓ Unimmunized health care workers can spread flu to patients and are a key cause of flu outbreaks in hospitals and long-term care facilities.

✓ People can spread the flu up to a day before symptoms appear. People with the flu can spread it to others up to 6 feet away through coughs and sneezes.

✓ Flu cannot be treated with antibiotics.

✓ You cannot get the flu from the vaccine.

✓ Immunized health care workers are associated with fewer patient deaths in nursing homes and long-term care facilities.

✓ It is never too late to get immunized against the flu. The flu season starts in the fall and continues through the spring.

Missouri Department of Health and Senior Services • Bureau of Immunizations • 800.219.3224
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Disciplinary Actions

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 335.01 to 335.096 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.

*Please be advised that more than one licensee may have the same name. Therefore, in order to verify a licensee's identity, please check the license number. Every discipline case is different. Each case is considered separately by the Board. Every case contains factors, too numerous to list here, that can positively or negatively affect the outcome of the case. The brief facts listed here are for information only. The results in any one case should not be viewed as Board policy and do not bind the Board in future cases.

The Board of Nursing is requesting contact from the following individuals:

- **Brandi L Findley – PN 054041**
- **Lisa Renea Hammond – RN 2013025426**
- **Angela Leigh King – RN 2010025942**
- **Kimberly S Reynolds – RN 156020**
- **Lisa K Shank – PN 049477**
- **Ellen C Singleton – PN 056035**
- **Cassandra Lynn Wilmes – RN 201002609**

If anyone has knowledge of their whereabouts, please contact Kristi at 573-751-0082 or send an email to nursng@pnmo.org.

**Censure**

- **Neef, Debra A**
  - Franklin, MO
  - Licensed Practical Nurse 035762
  - Censure 06/14/2017

- **Frein, Nancy**
  - New Bloomfield, MO
  - Registered Nurse 113043
  - Censure 06/26/2017

- **Vinson, Charlene C**
  - New Bloomfield, MO
  - Registered Nurse 088120
  - Censure 06/06/2017

- **Mueller, Lindsey Ann**
  - El Dorado, KS
  - Licensed Practical Nurse 2010039962
  - Censure 06/02/2017

**Probation**

- **Prost, Brandi Renae**
  - Sullivan, MO
  - Registered Nurse
  - Probation 06/26/2017 to 06/26/2022

- **Del Rio, Erica Dawn**
  - Hollister, MO
  - Licensed Practical Nurse 2015034380
  - Probation continued on page 14

**Probation continued on page 14**
Brown, Jaundaime Rochelle
Raymore, MO
Registered Nurse 2009004506
From October 19, 2016 until the filing of the Complaint on April 6, 2017, Respondent failed to check in with NTS on five days. Further, on November 29, 2016 and February 28, 2017, Respondent checked in with 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 samples. In addition, on March 30, 2017, Respondent failed to check in with NTS; however, it was a day 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 March 30, 2017. In addition, on October 28, 2016, 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 dates of December 22, 2016 and March 22, 2017. In accordance with the terms of the Agreement, Respondent was required to obtain continuing education hours and have the certificate of completion for all hours submitted to the Board by March 22, 2017. As of the filing of the Complaint, the Board had not received proof of any completed continuing education classes.
Probation 06/26/2017 to 06/26/2022

Lowell, Christy Leann
Lebanon, MO
Registered Nurse 2014042783
On or about June 20, 2015, hospital co-workers observed Licensee exhibiting questionable behavior, which included “wiry” movements, picking at her skin, and coming in late. Hospital administrators asked Licensee to submit to a for-cause drug screen. Licensee consented to the for-cause drug screen. The drug screen was returned positive for methamphetamine on July 16, 2015.
Probation 08/01/2017 to 08/01/2022

Edwards, Ann M
Columbia, IL
Registered Nurse 2002031629
From October 7, 2015, through April 4, 2017, Respondent failed to check in with NTS on six (6) days that were not excused dates to check in. Further, on August 24, 2016, Respondent failed to check in with NTS; however, it was a day 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 August 24, 2016. In addition, on July 8, 2016, Respondent reported to a lab and submitted the required sample which showed a low creatinine reading. On November 12, 2016, Respondent reported to a collection site to provide a sample and the sample tested positive for Ethyl Glucuronide (EtG), a metabolite of alcohol, and Ethyl Sulfate (EtS), a metabolite of alcohol. Respondent admitted to Dr. Greg Elam that she had been drinking at the airport the day before the test.
Probation 06/26/2017 to 06/26/2022

Newsham, Shannon Marie
Saint Peters, MO
Registered Nurse 2002017168
Licensee failed to appropriately document what happened with four medication cards which were in her control.
Probation 07/18/2017 to 07/18/2022

Wagner, Elizabeth Ann
Marshfield, MO
Registered Nurse 2014022820
While Licensee was an employee of the clinic she was also a patient. On August 5, 2016, Licensee visited her doctor at the hospital and received a new prescription for Oxycodone. Licensee’s coworker stepped away from her computer, but was still logged into the clinic’s EPIC system. Licensee entered her prescription information into the computer under her coworker’s name. On August 10, 2016, clinic officials met with the Licensee to discuss her ordering narcotic medication for herself under her coworker’s credentials. During the meeting Licensee was witnessed exhibiting the impaired behaviors of glassy eyes, difficulty understanding questions asked of her, lethargic, and was visibly tired. Licensee admitted to the Board investigator that challenges in her life had led her to abuse prescription narcotics.
Probation 07/18/2017 to 07/18/2022

Edwards, Ann M
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Probation 07/18/2017 to 07/18/2022

Fallon, Megan E
Jamesest, TN
Registered Nurse 2012034548
The Missouri State Board of Nursing received information from the Texas Board of Nursing via the NURSYS website that Respondent’s privilege to practice in Texas had voluntarily surrendered due to a final disciplinary action being taken by the Texas Board of Nursing in an Order dated January 4, 2017. Probation 06/26/2017 to 06/26/2018

Colvin, Raylene Faye
Kansas City, MO
Registered Nurse 2002002899
In a pre-conviction diversion audit, the hospital identified Licensee as having a higher narcotic usage than that of her peers. The audit also revealed that Licensee failed to document the administration, waste or return of hydrocodone tablets on four different occasions. Licensee was asked to submit a sample for a for-cause drug screen. Licensee submitted a sample for testing on June 30, 2016. On July 12, 2016, the drug screen returned positive for marijuana.
Probation 07/18/2017 to 07/18/2020

Cazier, Malisa Halona
Nixa, MO
Licensed Practical Nurse 2014044587
In a pre-conviction diversion audit, the hospital identified Licensee as part of the orientation process at the college, Licensee was required to submit to a random urine drug screen. The test result was confirmed positive for marijuana on September 25, 2016. Probation 07/18/2017 to 07/18/2020

Hall, Allison B
Frisco, TX
Registered Nurse 2017017175
Applicant was previously licensed by the Board as a registered professional nurse, license number RN 099498. The Board revoked Applicant’s nursing license on September 26, 2012, due to failing to comply with the terms of probation. As part of the application process, Applicant was required to complete a chemical dependency evaluation and undergo a chemical dependency evaluation. Applicant applied for a chemical dependency evaluator that she had a substantial history of drug abuse, including cocaine, marijuana, crack cocaine, amphetamines but had not used those particular drugs in some time. However, she later developed an opioid dependence on pain killers, including codeine and Vicodin, which resulted in increased usage from 2000 through 2010. She further reported abusing alcohol, consuming as many as 10 to 15 alcoholic beverages daily when she came home from work in the past. Applicant stated that she received prescriptions for amphetamines from more than one doctor and took as many as 5 pills per day at times. She reported her abuse of amphetamines ceased in 1995. Applicant had a prescription for Vicodin; however, admitted to consuming as much as six 5 mg Vicodin in the morning before heading to work.
Applicant states that her sobriety date is September 2, 2011 from drug and alcohol abuse, and she continues with aftercare support.
Probation 06/01/2017 to 06/01/2020

Wyrick, Kara Nicole
Owensville, MO
Licensed Practical Nurse 2012030171
Licensee’s test result was confirmed positive for marijuana metabolites on June 28, 2014.
Probation 07/22/2017 to 07/22/2019

Sturgis, Julie Denise
Branson, MO
Registered Nurse 2013004754
Between August 1, 2015 and September 1, 2015, Licensee did not document the administration, waste, or return of thirty-four (34) Oxycodone 5mg tablets. Between August 1, 2015 and September 1, 2015, Licensee did not document the administration, waste, or return of two (2) Hydrocodone 5/325 tablets. Between August 1, 2015 and September 1, 2015, Licensee did not document the administration, waste, or return of four (4) Hydrocodone 7/532 tablets. Licensee admitted to hospital administrators that she had been diverting controlled substance medication for her personal use. Licensee was terminated from the hospital for diverting narcotics on
September 11, 2015. Licensee admitted to the Board’s investigator that she had been diverting Oxycodone and Hydromorphone pills from the hospital for her personal use. Licensee admitted to the Board’s investigator that she started diverting the medications in July of 2015. Probation 07/01/2017 to 07/01/2021

League, Heidi Lynn
Lees Summit, MO
Licensed Practical Nurse 2008027500
On September 1, 2014, a nurse noticed the controlled substance proof-of-use form for hydromorphone 2 mg for patient W.S. (form) was wrinkled and appeared to have been altered. On September 5, 2014 Respondent admitted that she altered the form and diverted the four missing hydromorphone tablets. Probation 06/26/2017 to 06/26/2020

Lusan, Brittany Marie
Kansas City, MO
Registered Nurse 2013007185
While working the night shift at a hospital from August 30, 2016 through August 31, 2016, Licensee was witnessed having glazed eyes and acting erratically. Licensee was also observed to have blood and track marks on her left hand. One of Licensee’s coworkers noticed that Licensee was spending a lot of time in the restroom. The coworker went in to the restroom after Licensee and found empty vials of fentanyl and morphine, a butterfly needle, and syringes in the waste basket. Licensee admitted to hospital vials of fentanyl and morphine, a butterfly needle, and syringes in the waste basket. Licensee admitted to hospital vials of fentanyl and morphine, a butterfly needle, and syringes in the waste basket. Licensee reported for several months, showing excessive usage of morphine and other narcotics. Licensee was requested to submit a sample for a drug screen on July 3, 2014. The sample which Licensee submitted returned positive for morphine. Licensee did not have a prescription or a lawful reason to possess morphine.

Count II: On February 16, 2016, Licensee signed out three doses of intramuscular Ativan for a resident. Licensee properly documented the administration of the first two doses of Ativan; however, Licensee failed to document the administration of the third dose. Furthermore, on February 16, 2016, Licensee documented that she had changed a resident’s duragesic patch; however, a nurse on the following shift discovered the resident’s patch had not been changed. On the same day, Licensee placed a 25mcg duragesic patch on a resident, however, the resident had an order for a 75mcg duragesic patch. When the incorrect patch was removed, the patch was noted to be cut on the left side and flat in appearance. Licensee signed out two doses of Norco for a resident on February 16, 2016; however, Licensee failed to document the administration or waste of the medication. Furthermore, there should have been 17 Norco doses remaining after the administration of those two doses, but there were only 16 Norco doses remaining. Licensee signed out a dose of Norco for a resident on February 2, 2016, but failed to document the administration of the Norco dose to the resident on the treatment sheet. Licensee signed out a dose of Norco at 1400 for a resident on February 16, 2016; however, the dose was given too soon from the previous dose at 1230, as the order read that the resident was to receive one or doses every four hours. Licensee signed out a dose of oxycodone for a resident on February 16, 2016, but failed to document the administration of oxycodone to the resident on the treatment sheet. Probation 06/06/2017 to 06/06/2020

Kuehl, Barbara Jean
Carl Junction, MO
Registered Nurse 2016033079
From October 17, 2016, through April 4, 2017, Respondent failed to check in with NTS on fifty-eight days. Respondent ceased checking in with NTS on February 7, 2017. Further, on January 24, 2017, Respondent checked in with 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. Respondent failed to

**REVOKED continued on page 16**

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Disciplinary Actions**

**REVOKED continued from page 15**

Report to a collection site to provide a sample for testing on five separate occasions. The Board did not receive an employer evaluation or statement of unemployment by the quarterly due dates of December 12, 2016 and March 13, 2017. Revoked 06/16/2017

Mcmameny, Jeffrey C
Saint Louis, MO
Registered Nurse 095815
At all times relevant herein, Licensee was employed as faculty at a community college. The college has a Return to Industry (RTI) program which allows faculty to receive compensation for undertaking observation experiences in health care settings for professional development and to enhance student learning. On or about April 11, 2016, Licensee submitted a copy of a Return to Industry Proposal for approval including: a letter from C. J. RN BSN, Office Manager, approving Licensee’s request for observation experience with Dr. R. J.; a planned schedule for Licensee’s time with Dr. R. J.; and, a letter from Licensee to Dr. R. J. indicating the areas Licensee and Dr. R. J. had discussed focusing on for the observation experience. Licensee was seeking compensation for forty (40) hours of observation experience. After reviewing the proposal, the RTI Program Coordinator noticed several discrepancies and inconsistencies with the proposal Licensee submitted. The discrepancies in the proposal information included: The handwriting for C. J’s signature is the same as Licensee’s handwriting. There is no nurse named C. J. The discrepancies in the proposal and the documents he submitted. Licensee told college administrators and Human Resources staff that he received the request approval letter from facility, where he works on some Sundays. Licensee further explained that he spoke to Dr. R. J. about the observation experience and personally delivered his letter about the observation experience to Dr. R. J. Dr. R. J. did not know Licensee and had never heard of the college’s RTI program. Dr. R. J. further stated that he does not allow anyone to shadow him at work. Licensee submitted false information in an attempt to gain compensation for work he would not perform. Revoked 08/23/2017

Isidro, Benedict Santos
Merriam, KS
Registered Nurse 2007038050
Respondent failed to complete the contract process with NTS. The Board did not receive an employer evaluation or statement of unemployment by the documentation due date of May 8, 2017. The Board did not receive an updated chemical dependency evaluation by the documentation due date of May 8, 2017. The Board did not receive evidence of support group attendance by the documentation due date of May 8, 2017. Respondent did not attend the meeting or further contact the Board to reschedule the meeting. Revoked 08/28/2017

Hunciker, Beth Marie
Saint Charles, MO
Registered Nurse 201509423
Respondent reported to the Board that she had been using methamphetamine for approximately one (1) year. Revoked 06/09/2017

Barharaht, Stacy Lynn
Jefferson City, MO
Licensed Practical Nurse 2006005957
On November 1, 2016, Respondent reported to a collection site to provide a sample and the sample tested positive for Ethyl Glucuronide (EtG), a metabolite of alcohol, and Ethyl Sulfate (EtS), a metabolite of alcohol. Respondent admitted to Dr. Greg Elam that she had consumed a food which contained vanilla extract and had been using alcohol-based hand sanitizers despite being admonished about using these items. Revoked 06/26/2017

Vogan, Stacey L
Macon, MO
Registered Nurse 135763
In late November 2012, due to the controlled substance counts being off, the hospital conducted an investigation. The investigation revealed several inconsistencies, specifically instances where Respondent had pulled medications when she was not scheduled to work, or the hospital could not find where there was a direct relationship between the medication Respondent pulled and the administration of the drug to a patient. Respondent was off work from the hospital on November 9, 22, and 23, 2012 and had no valid work reason to go into the hospital. On November 9, 2012, Respondent accessed the Pyxis unit with her fingerprint to obtain Propofol and then canceled the transaction. On November 22, 2012, Respondent accessed the Pyxis unit with her fingerprint to access albuterol and sodium chloride, and then canceled the transactions. On November 23, 2012, Respondent accessed the Pyxis unit with her fingerprint to access heparin 25.000IU, and then canceled the transaction. On November 23, 2012, Respondent accessed the Pyxis unit with her fingerprint to access heparin 25.000IU, and then canceled the transaction.

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to report to a collection site to provide the requested sample. In addition, on June 9, 2017, Respondent failed to check in with NTS; however, it was a day 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 June 9, 2017. The Board did not receive an employer evaluation or statement of unemployment by the quarterly due date of March 1, 2017. The Board did not receive an updated chemical dependency evaluation submitted on Respondent’s behalf by the quarterly due date of June 1, 2017.

Revolved 08/28/2017

Rainey, Cornelius
Grant Louis
Registered Licensed Practical Nurse 048028
On January 8, 2016, Respondent pled guilty to the class C felony of Unlawful Possession of a Firearm due to Respondent knowingly possessing a firearm when he had been previously convicted of felony assault second degree.

Revolved 06/26/2017

Smith, Christy L
Franklin, MO
Registered Nurse 131991
As of April 4, 2017, Respondent had failed to complete the process contract with NTS. As of April 4, 2017, the Board had not received a thorough chemical dependency evaluation submitted on Respondent’s behalf by the quarterly due date of March 8, 2017. The Board did not receive an employer evaluation or statement of unemployment by the quarterly due date of March 8, 2017. The Board did not receive an updated chemical dependency evaluation submitted on Respondent’s behalf by the quarterly due date of June 1, 2017. The Board did not receive an updated mental health evaluation submitted on Respondent’s behalf.

Revolved 06/26/2017

Stark, Debra A
De Soto, MO
Registered Nurse 2005008383
From January 12, 2017, through April 4, 2017, Respondent failed to check in with NTS on one (1) day. Further, on February 9, 2017 and March 21, 2017, Respondent checked in with 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 three separate occasions, January 30, 2017, March 2, 2017, and March 10, 2017, Respondent reported to lab for testing. On April 2, 2017, Respondent reported to lab and submitted the required sample which showed a low creatinine reading. On January 30, 2017, the low creatinine reading was 1.2. On March 2, 2017, the low creatinine reading was 1.2. On March 10, 2017, the low creatinine reading was 1.9. The Board did not receive an updated chemical dependency evaluation submitted on Respondent’s behalf by the quarterly due date of March 8, 2017. The Board did not receive an updated mental health evaluation submitted on Respondent’s behalf.

Revolved 06/26/2017

Hamby, Michelle Lynne
Warsaw, MO
Registered Nurse 2014024586
Respondent did not complete the process contract with NTS.
Revolved 08/24/2017

Sears, Candice Nicole
Ulm, MO
Licensed Practical Nurse 20110005438
Respondent worked from June 1, 2014, to September 9, 2015, on a lapsed license. Respondent failed to cooperate with the Board’s investigator.
Revolved 06/09/2017

Schmidt, Laurie
West Plains, MO
Registered Nurse 2008030158
Over the weekend of April 13 and 14, 2013, hospital management received complaints from Respondent’s coworkers regarding Respondent’s nursing abilities. Coworkers also suspected that Respondent was impaired at work. An investigation was performed and found inaccurate documentation, late documentation, and medication errors made by Respondent. On April 13, 2013, Respondent failed to perform pain documentation for patient RG during her entire shift. On April 13, 2013, Respondent failed to perform assessments on patient GC and also failed to perform teachings for patient RG. As the investigation was performed and found inaccurate documentation, late documentation, and medication errors made by Respondent. On April 13, 2013, Respondent failed to perform pain documentation for patient KH during her entire shift.
Revolved 06/12/2013

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

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

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REVOKED continued from page 17

Black, Janie Lee
Monett, MO
Registered Nurse 2000160918
The Missouri State Board of Nursing received information from the Arkansas Board of Nursing that the State of Arkansas Board of Nursing filed an Order to Cease and Desist the practice of nursing in the State of Arkansas on March 3, 2017 to Janie Lee Black for violations of the Arkansas Nurse Practice Act. Revoked 06/26/2017

Schuetz, Amanda Jane
Niangua, MO
Licensed Practical Nurse 2010002136
On December 9, 2016, Respondent pled guilty to the class C felony of Statutory Rape - 2nd Degree. Pursuant to the probable cause statement, Respondent was working as a school nurse and had sexual intercourse with a student, who was under the age of 16 at the time, and who attended the school where she worked. The encounter occurred in a hospital parking garage. Revoked 08/28/2017

Burke, Jennifer Lee
Imperial, MO
Licensed Practical Nurse 2006003575
On or about October 11, 2015, Respondent was instructed to destroy thirteen (13) tablets of oxycodone belonging to an expired resident. Facility policy instructed Respondent to destroy controlled substances with another LPN or RN as a witness. Respondent documented the waste on the controlled substance sheet. However, the signature of the witness, who was a CMT, was misspelled on the controlled substance sheet. Facility administrators questioned the witness; she denied that was her signature on the controlled substance sheet and she denied observing Respondent waste the thirteen (13) tablets of oxycodone. Respondent admitted to the Board’s investigator that she was impaired on or about October 11, 2015 due to taking Ambien, which she had prescribed for, and thus, the night was “blurry” to her and she couldn’t recall the events of the night with certainty. Revoked 06/16/2017

Fell, Michelle C
Booว noon, MO
Registered Nurse 147416
Respondent never completed the contract process with NTS. Revoked 06/26/2017

Stockman, Stephanie Lee
Pleasant Hill, MO
Registered Nurse 20040419760
On March 24, 2016, Respondent withdrew three (3) vials of Fentanyl for a patient that was not assigned to her. Respondent failed to document the administration, waste, or return of the three (3) vials of Fentanyl she had withdrawn. While being questioned about the Fentanyl, Respondent was observed exhibiting unusual behavior, including tearfulness and confusion. Respondent submitted a sample for a for-cause drug screen and she allowed hospital security officers to search her belongings. In Respondent’s belongings, the security officers found fourteen (14) packaged syringes, thirteen (13) packaged needles, one (1) empty 1ML vial of Lorazepam, and three (3) vials of Fentanyl, two (2) of which were empty. Respondent’s for-cause drug screen was confirmed positive for benzodiazepines, specifically Lorazepam. Revoked 08/28/2017

Wiekhorst, Devin Joe
Lebanon, MO
Licensed Practical Nurse 2015008023
On March 7, 2017, Respondent pled guilty to the class B misdemeanor of Abuse of a Vulnerable Person - 3rd. The court documents state that Respondent knowingly acted in a manner which resulted in a substantial risk to the life, body, and health of J.J. by administering a second dose of morphine after Respondent was specifically informed of the correct dosage previously administered a few minutes prior; however, Respondent disregarded that dosage and administered a second dose. Revoked 06/26/2017

Urban, Randi Michelle
Knob Noster, MO
Registered Nurse 2008016911
Respondent failed to call in to or check in with NTS on ninety-five (95) days. Respondent failed to report to a collection site to provide a sample for testing on October 31, 2016; November 2, 2016; November 15, 2016; November 25, 2016; December 1, 2016; December 12, 2016; December 21, 2016; December 27, 2016; and, January 30, 2017. The Board did not receive an employer evaluation or statement of unemployment by the quarterly due dates of October 19, 2016, and January 19, 2017. Respondent failed to submit an application to renew her license along with the required fees and criminal background check within thirty (30) working days of July 19, 2016. Revoked 06/16/2017

<table>
<thead>
<tr>
<th>NAME</th>
<th>ADDRESS</th>
<th>PHONE</th>
<th>ALTERNATE PHONE</th>
<th>EMAIL</th>
</tr>
</thead>
<tbody>
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Missouri License Number

<table>
<thead>
<tr>
<th>RN</th>
<th>APN</th>
<th>LPN</th>
<th>Last 4 Digits of Social Security Number</th>
</tr>
</thead>
<tbody>
<tr>
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</table>

NOTIFICATION OF NAME AND ADDRESS CHANGE

<table>
<thead>
<tr>
<th>Last Name (Printed)</th>
<th>First Name (Printed)</th>
</tr>
</thead>
<tbody>
<tr>
<td>None</td>
<td>None</td>
</tr>
</tbody>
</table>

NEW INFORMATION

<table>
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<tr>
<th>Last Name</th>
<th>First Name</th>
<th>Middle Name</th>
</tr>
</thead>
<tbody>
<tr>
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</tr>
</tbody>
</table>

<table>
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<tr>
<th>Daytime Telephone Number</th>
<th>Alternate Phone Number</th>
<th>Email Address</th>
</tr>
</thead>
<tbody>
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<td>None</td>
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<td>None</td>
</tr>
</tbody>
</table>

PRIMARY STATE OF RESIDENCE ADDRESS: (where you vote, pay federal taxes, obtain a driver’s license)

<table>
<thead>
<tr>
<th>CITY</th>
<th>STATE</th>
<th>ZIP</th>
</tr>
</thead>
<tbody>
<tr>
<td>None</td>
<td>None</td>
<td>None</td>
</tr>
</tbody>
</table>

MAILING ADDRESS (ONLY REQUIRED IF YOUR MAILING ADDRESS IS DIFFERENT THAN PRIMARY RESIDENCE)

<table>
<thead>
<tr>
<th>CITY</th>
<th>STATE</th>
<th>ZIP</th>
</tr>
</thead>
<tbody>
<tr>
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</tbody>
</table>

I declare__________________________________________
(1) I am employed exclusively in the U.S. Military (Active Duty) or with the U.S. Federal Government and am requesting a Missouri single-state license regardless of my primary state of residence.

Privacy Policy

Information on the Nurse Licensure Compact can be found at www.ncahelp.org/ILC.htm

In accordance with the Nurse Licensure Compact “Primary State of Residence” is defined as the state of a person’s declared, fixed, permanent and principal home for legal purposes, domicile. Documentation of primary state of residence that may be requested (but not limited to) includes:

- Driver’s license with a home address
- Voter registration card displaying a home address
- Federal income tax return declaring the primary state of residence
- Military Form no. 2055 - state of legal residence certificate
- W-2 from US Government or any foreign, division or agency thereof indicating the declared state of residence

Proof of any of the above may be requested.

When your primary state of residence is a non-compact state, your license will be designated as a single-state license valid only in Missouri.

When your primary state of residence is a compact state other than Missouri, your Missouri license will be placed on inactive status and you can practice in Missouri based on your unrestricted multi-state license from another compact state.

I solemnly declare and affirm, that I am the person who is referred to in the foregoing declaration of primary state of residence; that the statements therein are strictly true in every respect, under the pains and penalties of perjury.

Signature: ___________________________  Date: ____________

Complete, SIGN and Return to the Missouri State Board of Nursing, PO Box 658, Jefferson City, MO 65102. Or Fax to 573-751-6745 or Scan and Email to nscplic@mo.gov

Stevens College - 18 Nov 17

Stevens College - 18 Nov 17
Voluntary Surrender 08/23/2017

medications pulled but that were not accounted for consisted of Fentanyl and Versed. The pharmacy manager further noted multiple complete, wasted drugs after a patient was out of the procedure room, and recorded Pyxis prior to the beginning time of a procedure, removed drugs after a procedure was complete, wasted drugs after a patient was out of the procedure room, and recorded more drugs used than what was pulled. The pharmacy manager further noted multiple instances of medication pulled by Licensee for which there was no documentation. The hospital's pharmacy manager noted Licensee removed drugs from the administration practices following suspicious behavior of Licensee in and around the hospital, and was working at a hospital in Liberty, Missouri. On or about January 13, 2017, Count II: At all times relevant to Count II, Licensee was employed by another agency on October 21, 2016. Licensee failed to respond to the agency regarding either complaint. Hospital administrators, and Licensee's contract with the second hospital was subsequently terminated.

Errors associated with Licensee. Licensee failed to explain the discrepancies to hospital administrators reported that there were 34 medication discrepancies attributed to Licensee between July on or about August 11, 2016. On October 21, 2016, the agency received a complaint regarding Licensee from a second hospital in Kansas City, Missouri, where Licensee was working. Hospital administrators reported that there were multiple medication documentation errors associated with Licensee. Licensee failed to explain the discrepancies to hospital administrators, and Licensee’s contract with the second hospital was subsequently terminated on October 21, 2016. Licensee failed to respond to the agency regarding either complaint. Count II: At all times relevant to Count II, Licensee was employed by another agency and was working at a hospital in Liberty, Missouri. On or about January 13, 2017, hospital administrators began an investigation into Licensee’s Pyxis access and drug administration practices following suspicious behavior of Licensee in and around the Cub lab. The hospital’s pharmacy manager noted Licensee removed drugs from the Pyxis prior to the beginning time of a procedure, removed drugs after a procedure was complete, wasted drugs after a patient was out of the procedure room, and recorded more drugs used than what was pulled. The pharmacy manager further noted multiple instances of medication pulled by Licensee for which there was no documentation. The medications pulled but that were not accounted for consisted of Fentanyl and Versed. Respondent admitted to Dr. Greg Elam that she had consumed margaritas the night before the test.

Suspension 06/26/2017 to 06/26/2018

Voluntary Surrender 06/26/2017

SUSPENSION

Fontenot, Teanna Lashae
St. Robert, MO
Licensed Practical Nurse 2014029133
Suspended 6/26/17-6/26/18; Probated 6/27/18-6/27/23
From November 14, 2016, until the filing of the Complaint on April 6, 2017, Respondent failed to check in with NTS on six (6) days. Further, on November 21, 2016, Respondent reported to a lab and submitted the required sample which showed a low creatinine reading. Respondent’s November 21, 2016 sample’s creatinine reading was 10.7. A creatinine reading below 2.0 is suspicious for a diluted sample. On March 7, 2017, Respondent reported to a collection site to provide a sample and the sample tested positive for Ethyl Glucuronide (EtG) and Ethyl Sulfate (EtS), metabolites of alcohol. Respondent admitted to Dr. Greg Elam that she had consumed margaritas the night before the test.

Suspension 06/26/2017 to 06/26/2018

VOLUNTARY SURRENDER

Thomas, Michael J
Kansas City, MO
Registered Nurse 155024
Count I: At all times relevant to Count I, Licensee was employed by an agency based out of Utah. On August 12, 2016, the agency received a complaint regarding Licensee from a hospital in Kansas City, Missouri, where Licensee was working. Hospital administrators reported that there were 34 medication discrepancies attributed to Licensee between July 9, 2016 and August 6, 2016. Licensee was removed from the assignment at the hospital on or about August 11, 2016. On October 21, 2016, the agency received a complaint regarding Licensee from a second hospital in Kansas City, Missouri, where Licensee was working. Hospital administrators reported that there were multiple medication documentation errors associated with Licensee. Licensee failed to explain the discrepancies to hospital administrators, and Licensee’s contract with the second hospital was subsequently terminated.

Errors associated with Licensee. Licensee failed to explain the discrepancies to hospital administrators reported that there were 34 medication discrepancies attributed to Licensee between July on or about August 11, 2016. On October 21, 2016, the agency received a complaint regarding Licensee from a second hospital in Kansas City, Missouri, where Licensee was working. Hospital administrators reported that there were multiple medication documentation errors associated with Licensee. Licensee failed to explain the discrepancies to hospital administrators, and Licensee’s contract with the second hospital was subsequently terminated on October 21, 2016. Licensee failed to respond to the agency regarding either complaint. Count II: At all times relevant to Count II, Licensee was employed by another agency and was working at a hospital in Liberty, Missouri. On or about January 13, 2017, hospital administrators began an investigation into Licensee’s Pyxis access and drug administration practices following suspicious behavior of Licensee in and around the Cub lab. The hospital’s pharmacy manager noted Licensee removed drugs from the Pyxis prior to the beginning time of a procedure, removed drugs after a procedure was complete, wasted drugs after a patient was out of the procedure room, and recorded more drugs used than what was pulled. The pharmacy manager further noted multiple instances of medication pulled by Licensee for which there was no documentation. The medications pulled but that were not accounted for consisted of Fentanyl and Versed. Respondent admitted to Dr. Greg Elam that she had consumed margaritas the night before the test.

Suspension 06/26/2017 to 06/26/2018

NURSE IMPOSTER ALERT

The Missouri Board of Nursing recently received a complaint concerning a nurse imposter using the name of Kelsi Danielle Foreman. This individual represented herself as a graduate nurse at a hospital in Kansas City, Missouri. Kelsi Foreman is not licensed as a nurse by the Missouri State Board of Nursing. She is also not eligible to call herself a graduate nurse.

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MENTAL HEALTH NURSES

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Contact Jocelyn Lee
Jocelyn.Lee@CorizonHealth.com | (314) 919-9555
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