Message from the President

Anne Heyen, DNP, RN, CNE

The Missouri State Board of Nursing, licensees and facilities all work together to ensure public protection. One aspect of public protection comes in the form of the Nursys e-Notify® system. Registered Nurses were prompted to sign up for e-Notify when renewing their nursing license earlier this year. Next year, the same will be true for Licensed Practical Nurses. This system is a wonderful way to keep up on when any nursing license you hold might need to be renewed, tracking a license and any discipline that might occur on your nursing license. This dynamic system is constantly updated as information is entered into the Nursys® database. By individual nurses signing up, this prevents you from forgetting to renew and possibly practicing on an expired nursing license, which is a violation of the Missouri Nurse Practice Act. Additionally, individuals signing up can help combat fraud in the nursing profession, as you will get real-time information when many changes occur with your nursing license.

Recently we had a situation where an employer was unaware of an employee having discipline and work restrictions on their nursing license. The nurse should have informed the employer, but he or she did not. However, the employer could prevent this from happening to them by creating a Nursys e-Notify® Institution account and enrolling all their nurses in that system. If an employer enrolls their nurses in this system, they, too, will get real-time information as the Nursys® database is updated. The employer would get an email notifying them if one of their employees has discipline on their license. The employer could then go into the Nursys e-Notify® system and view the actual order to obtain more information. This notification can also serve as a prompt to meet with the impacted employee. Employers enrolling their nurses into the Nursys e-Notify® system is another important aspect of public protection. Even better, this service is free as a product of the National Council of State Boards of Nursing, whose mission is to empower and support nursing regulators in their mandate to protect the public.

Executive Director Report

2019 Fiscal Year Statistics

by Lori Scheidt, Executive Director

The 2019 fiscal year for Missouri State government began July 1, 2018 and ended June 30, 2019. 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 may impose censure, probation, suspension, and/or revocation.

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 1,760 Board decisions that became effective fiscal year 2019.

1. Censure: 30%
2. Alcohol/Drugs: 27%
3. Tax noncompliance: 1%
4. Disciple or D.D.: 25%
5. Practice 3%
6. Unlicensed Practice: 4%
7. Failed Alternative or Intervention Program: 1%
8. Lawful Presence (not reflected on chart as the percentage of cases is less than 1%)
9. Fraud (not reflected on chart as the percentage of cases is less than 1%)

Executive Director continued on page 3
MO State Board of Nursing Practice Update

Debra Funk, RN, Director of Practice

Here we are ending another summer, preparing for those cool crisp days of fall. Holiday plans are stirring in everyone’s mind. With all the hubbub, I just wanted to remind our APRNs about a few things. In the last several months, we have received some concerns from pharmacies regarding missing information on prescriptions from APRNs. Pursuant to 20 CSR 2200-4.100(3)(G)(7), “all prescriptions shall conform to all applicable state and federal statutes, rules or regulations and shall include the name, address and telephone number of the collaborating physician and collaborating APRN.” This is not new language. It has been in place for many years. Many APRNs and employers/practices seem to be unaware of this requirement. Making these accommodations to a prescription pad is very easy. However, the EMR systems have been quite a challenge. APRNs who utilize an EMR system for prescribing didn’t even know that the prescriptions being produced on the pharmacy end didn’t have all the correct information on them.

Over the last few months, I have been working with Mercy Health System and BJC (Washington University) Health System in the St. Louis area to inform changes to their EMR systems to meet these standards. When a prescription does not have all the information required by law, the pharmacist either has to add the missing information or reject the prescription. Filling in missing information should not be a job of the pharmacist. It is the responsibility of the prescriber. In addition, a pharmacy can be cited by the Board of Pharmacy if they accept incomplete prescriptions.

On December 30, 2018, amendments made to 20 CSR 2200-4.100, Advanced Practice Registered Nurse went into effect. Among those amendments was a change to the titling required by the Nurse Practice Act for an APRN. Pursuant to 20 CSR 2200-4.100(3)(B), “Registered Nurse (RN) recognized as an APRN by the MSBN shall use the title APRN and may include their role and population focus (NP with population focus, CNS with population focus, CNM or CRNA) and certification status, if applicable, for purposes of identification and documentation.” In the previous language, you were required to use RN rather than APRN. You may include documentation. “In the previous language, you were required to use RN rather than APRN. You may include documentation.” In the previous language, you were required to use RN rather than APRN. You may include documentation. Please feel free to contact Ashley Williams, Practice Assistant, or myself with any questions you may have at 573-751-0073 or nursingpractice@pr.mo.gov.

Lastly, please remember to send the Board a copy of your re-certification prior to the expiration. Pursuant to 20 CSR 2200-4.100(3)(C), “it is the APRN’s responsibility to be sure that their re-certification credentials have been received by the MSBN.” You must also “maintain current RN licensure in MO or in another compact state.” If your RN license expires, your Document of Recognition will expire. If your re-certification is not received by the Board prior to its expiration, your Document of Recognition will expire.

As of October 1, 2019

<table>
<thead>
<tr>
<th>Profession</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Licensed Practical Nurse</td>
<td>24,233</td>
</tr>
<tr>
<td>Registered Professional Nurse</td>
<td>110,143</td>
</tr>
<tr>
<td>Total</td>
<td>134,376</td>
</tr>
</tbody>
</table>

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SCHEDULE OF BOARD MEETING DATES THROUGH 2020

November 6-8, 2019
February 26-28, 2020
May 19-21, 2020
August 19-21, 2020
November 4-6, 2020
The next chart shows the actions taken by the Board for those complaints and application reviews.

### Licenses Issued in Fiscal Year 2019

<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>4,169</td>
<td>1,129</td>
</tr>
<tr>
<td>Licensure by Endorsement</td>
<td>2,321</td>
<td>224</td>
</tr>
<tr>
<td>Licensure by Renewal of a Lapsed or Inactive License</td>
<td>1,165</td>
<td>409</td>
</tr>
<tr>
<td>Number of Nurses holding a current nursing license in Missouri as of 6/30/2019</td>
<td>108,447</td>
<td>23,612</td>
</tr>
</tbody>
</table>

There were 1,313 new Advanced Practice Registered Nurse applications approved in fiscal year 2019. The Board granted 349 nurses advanced prescriptive authority in fiscal year 2019. There are currently 2,200 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.

The following three maps depict the average age by county and the number of nurses in each county who had a current Missouri nursing license and Missouri primary address as of July 1, 2018. The average age on the following maps is the average age of nurses that reported Missouri primary residence.
NCSBN Nursys e-Notify Database Reaches Milestone of One Millionth Nurse Enrolled

CHICAGO – The NCSBN Nursys e-Notify database has reached the milestone of enrolling one million nurses by institutions. Powered by U.S. nursing regulatory bodies (NRBs), Nursys is the only national database for verification of nurse licensure, publicly discipline and practice privileges for registered nurses, licensed practical/vocational nurses and advanced practice registered nurses provided directly by participating NRBs and designated by them to be primary source equivalent.

The mission of NRBs is to protect the public’s health and welfare by overseeing and ensuring the safe practice of nursing. NRBs achieve this mission by outlining the standards for safe nursing care and issuing licenses to practice nursing. They monitor licensees’ compliance to jurisdictional laws and when necessary take action against the licenses of those nurses who have exhibited unsafe nursing practice.

“This public protection service was envisioned by NCSBN Member NRBs several years ago with support from the NCSBN Board of Directors and NCSBN management. We are extremely pleased to be celebrating the success of their vision,” comments Nur Rajwany, MS, NCSBN chief information officer.

With the Nursys e-Notify system, institutions that employ nurses or maintain a registry of nurses, now have the ability to receive automatic licensure, publicly available discipline and practice privileges notifications quickly, easily, securely and free of charge.

Institutions do not have to proactively seek licensure into and receive licensure status updates, and create and manage multiple license expiration reminders. Keeping on top of license status can help nurses prevent fraudulent expirations, upcoming renewals and any public discipline action from the organization’s jurisdiction and others. Learn more, watch a video demo, or enroll for this free service as an institution at www.nursys.com/e-notify, and select “As an Institution.”

Individual nurses can also benefit from self-enrollment in e-Notify. In just a few minutes, nurses can self-enroll into and receive licensure status updates, and create and manage multiple license expiration reminders. Keeping on top of license status can help nurses prevent fraudulent expirations, upcoming renewals and any public discipline action from the organization’s jurisdiction and others. Learn more, watch a video demo, or enroll for this free service as an institution at www.nursys.com/e-notify, and select “As a Nurse” to complete the registration process.

Moments with Marcus

By Marcus Engel

As I write, the last part of Hurricane Dorian has made its trek all the way to Canada. For more than a week, all of us in Florida have been glued to the TV, hoping we wouldn’t face the storm’s destruction. We also spent a lot of time praying for the Bahamas and all the others devastated by this monster. Florida dodged a bullet; other parts of the world weren’t so lucky.

When major disasters like this are eminent, you have to pull out all the stops. Everything has to be covered: police and EMS, power workers, hospital personnel - everything. And so, as we sat and waited for the storm to come, my family didn’t seem complete. That’s because my stepdaughter, Taylor, and my daughter-in-law, Alexis, both nurses, were called into their hospitals to go on lockdown. Each ultimately spent four full days in the hospital. Working, yes, and also sleeping on exam tables in the clinics or the floor in the break room, sharing the limited showering facilities with a few hundred of their closest friends, living off cafeteria food and vending machines, and being absent from family for the better part of a week.

Not sure about you, but I love my creature comforts of home. My bed, my food, my routine, my free time. Isn’t that all of us? Same with Taylor and Lexi and all their co-workers. But, when stuff was about to hit the fan, each packed a couple overnight bags and checked into the hospital. As they left, and with the storm so unpredictable, I had a tinge of fear in my gut for their safety... but that was replaced with so, much pride for the way each has given herself to this sacred work of nursing.

While the nurses in my family will say, loud and proud, they love the overtime, the truth is, they love nursing. Yes, money is nice. And necessary. And all our heroes deserve to be compensated. Money makes the world go around, after all. Well, that and magnetic rotations and gravitational forces. Most all nurses I know didn’t become nurses strictly for the paycheck. Nursing is a calling. It’s a constant tug to try to help better the world by easing suffering, one patient at a time. Yes, there’s opportunity in this work for advancement and bigger pay, as there should be. But I’ll bet you a new dime that most nurses don’t talk about their work in terms of dollars. They talk about the people. They talk about the “thank you” from patients and families. They talk about how, at the end of the shift, as tired as they are, they’re ready to come back soon and do it all over. This is the nature of nursing. It’s a call you have chosen to follow, too.

A calling is born inside a person. Calling is commitment. Calling is a gut driving force to be a positive change agent in this world. That is you. And that is also the mindset of those in my family. Thank you for listening to that calling and stepping into your role in this sacred work.

Nurses on Lockdown

Marcus Engel
NCSBN Elects New Members to its Board of Directors and Leadership Succession Committee

CHICAGO – NCSBN Board of Directors President Julia George, MSN, RN, FRE, executive director, North Carolina Board of Nursing, announced new members of the NCSBN Board of Directors who were elected during the 2019 Delegate Assembly, held in Chicago, Aug. 21-23, 2019.

Those elected include:

Treasurer
Adrian Guerrero, CPM, director of operations, Kansas State Board of Nursing, was elected Treasurer. He previously served as Area II director from 2017-19. He also served as chair of the Nurses Committee and as a member of both the Fraud Detection Committee and the Nurses Advisory Panel.

Area I Director
Cynthia LaBonde, MN, RN, executive director, Wyoming State Board of Nursing, was reelected Area I director.

Area II Director
Lori Scheidt, MBA-HCM, executive director, Missouri State Board of Nursing, was elected Area II director. She previously served as director-at-large from 2016-19. She also served as chair of the Fraud Detection Committee and Member Board Agreement Review Committee, and on the Nurse Licensure Compact (NLC) Administrators Executive Committee.

Area III Director
Jay P. Douglas, MSM, RN, CSAC, FRE, executive director, Virginia Board of Nursing, was elected Area III director. She was previously appointed to fill an unexpired term as Area III director in 2018. She also served as director-at-large on the NLC Administrator Executive Committee and vice chair of the Interstate Commission of NLC Administrators from 2017-2018.

Area IV Director
Valerie J. Fuller, PhD, DNP, AGACNP-BC, FNP-BC, FAANP, FNAP, board president, Maine State Board of Nursing, was reelected Area IV director. She previously served as chair of the APRN Education Committee and as a member of the Advanced Practice Committee and the APRN Distance Learning Education Committee.

Director-at-Large
Anne Coghlan, MScN, RN, executive director and CEO, College of Nurses of Ontario, was appointed by the NCSBN Board of Directors (BOD) to fill the vacancy created by the election of Scheidt.

NCSBN delegates also elected members of the Leadership Succession Committee (LSC):

Area I Member – Gretchen Koch, MSN, RN, policy analyst, Oregon State Board of Nursing

Area III Member – Sara Griffith, MSN, RN, regulation consultant, North Carolina Board of Nursing

The NCSBN BOD also appointed Member-at-Large positions to the LSC:

Shirley Brecken, MS, RN, FAAN, executive officer, Minnesota Board of Nursing

Greg Kohn, MM, board member, Wyoming State Board of Nursing

Sherry Richardson, MSN, RN, CMSRN, board staff, Tennessee State Board of Nursing

The full text of the article can be found in the November, December 2019, January 2020 issue of the Missouri State Board of Nursing.
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 FY2019, the Board worked diligently to improve services and strengthen programs for public protection. Highlights of the Board’s work are listed below:

Education:
- To date, 41 individuals from the Air Force Nursing Services Practical Nurse (PN) Training Program – Basic Medical Technician Corpsman Program (BMTCP) 4N051/4N071 (4n training program) have been licensed as LPNs.
- The Missouri State Board of Nursing (Board) convened a Military Advisory Panel. The panel comprises 14 members who actively serve in the armed forces, nurse educators and practice partners who are ready to lend their expertise to foster implementation of optimal pathways to optimally utilize military education, training and service to gain academic eligibility to apply for nurse licensure in Missouri.
- On May 22, 2019 the Missouri State Board of Nursing hosted a meeting with Air Force officials representing command staff for the Air Force nursing service. This meeting was conducted as part of the Board’s ongoing commitment to foster academic pathways for members of the armed forces to work towards licensure as a nurse.
- The Board provided funded professional nursing programs 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 FY2019, the Board of Nursing awarded $777,462 to eligible nursing schools. Since inception of incentive funding in 2011 Missouri nursing programs have received a total $6,111,455.
- This year’s Innovative Best Practice (IBP) in Nursing Education Conference April 5, 2019 was co-sponsored by the Missouri State Board of Nursing with State Fair Community College. There were 141 nurse educators from all levels of nursing education present. The Workshop was offered free of charge to all attendees. Objectives for this year’s Conference were centered around active learning strategies, clinical simulation and student engagement in on-line learning.

Compliance:
- Two different types of alternative to discipline programs to remove impaired nurses from practice in a more timely fashion and increase public protection were implemented. In FY2019, 27 licensees entered the Intervention Program and 10 licensees entered the Alternative Program. In FY 2019, five individuals violated the terms of the Intervention Program and one individual violated the terms of the Alternative Program.
- The Board held committee meetings every two weeks followed by full board mail ballots to ensure timely resolution of complaints. Twenty Consumer Protection Conference Calls were held in FY 2018.

Investigations:
- The average number of days to complete an investigation was 41 days.

Legal:
- The Board employs three attorney team members with a combined 47 years’ experience.
- The Board experienced a decline in performance and increase in contract costs in 2019 due to vacancies. Lack of competitive pay impacts the Board’s ability to carry out its mission:

| Performance Improvement with In-House Attorneys and Paralegals Comparing 2008 to 2019 |
|----------------------------------------|------------------|-------------------|
|                                      | 2008             | 2019             |
| Board Decisions                       | 1,605            | 1,760            |
| % Increase                             | 9%               |                   |
| Board Hearings                        | 106              | 147              |
| % Increase                             | 28%              |                   |
| RNs Licensed                          | 87,798           | 108,447          |
| % Increase                             | 19%              |                   |
| LPNs Licensed                         | 24,646           | 23,612           |
| % Decrease                            | 4%               |                   |
| Contract Attorney Fees                 | $184,143.32      | $75,544.25       |
| % Reduction                           | 59%              |                   |
| Calendar Days to Complete a Case: From Receipt of Complaint to Final Resolution | 284              | 131              |
| % Improvement                          | 54%              |                   |

Licensure:
- The average number of days to issue a temporary permit to Registered Nurses was 6,77 day calendar days and for Licensed Practical Nurses was 7,11 calendar days.
- In FY2019, the board of nursing changed licensure applications to require evidence of lawful presence in order to comply with 8 U.S.C.A. §1621, which requires evidence of lawful presence prior to granting a professional license. This has increased the application processing time.
- Answered 52,374 telephone calls.
- Revised all instruction letters and 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 request verification online 24 hours a day and verifications are immediately available. Utilization of Nursys.com also strengthens our fraud prevention efforts. A total of 6,515 of Missouri nurses requested that their Missouri license be verified to another state and 3,465 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 1,214 institutions accounting for 105,846 nurses were enrolled in the institutions e-Notify. A total of 134,197 (87.9%) 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 134,197 (87.9%) of Missouri-licensed nurses were enrolled in Nursys e-Notify.

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
- NCSBN Nursing Education Outcomes and Metrics Committee. Terms runs September 2016 through August 2018.

Lori Scheidt, Executive Director
- Elected to the National Council of State Boards of Nursing’s (NCSBN) Board of Directors for a two year term that began August 2018.
- Presented at a national conference on fraud detection.
- Served as a member Nurse Licensure Compact Compliance Committee.

Practice:
- The practice section performed 25 presentations about the Missouri Nurse Practice Act and the Board of Nursing. Of those, 13 presentations were to schools of nursing, one was to a community RN group, five were to school nurse groups, five were AP RN related groups and one to a Department of Mental Health group.
- 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.
Stop the Bleed

By Lori Scheidt, Executive Director

On an early Sunday afternoon, I was summoned to Kansas City to rescue a family member who was having vehicular issues. I did my best, but was on my way back home via I-70 East. My unexpected trip turned out to be one of those life lessons. I witnessed a motor vehicle accident (MVA). It was a horrific roll-over accident.

Like many of us, it isn’t unusual to drive by a MVA; however, this is the first time I actually witnessed one that was this traumatic. Because I was first on the scene, I made the decision to pull over and see if I could be of assistance.

I had enough sense to quickly look at the mile marker to orientate myself to the location in order to relay that information to first responders. As I was approaching the vehicle, I saw a person with a cell phone to his ear and could tell that he had already called for help. I could hear a female in distress and quickly realized she was the passenger. The vehicle had come to a stop on its top. I ran to the passenger side and saw a female who was bleeding profusely from her upper arm. At this point, there were several bystanders at the side of the road. I relayed that I needed something to apply pressure to what I thought was a severe gash in her upper arm. Someone handed me a child’s coat. When I applied it, I quickly realized she had an arterial bleed. I knew I needed something else to try to fashion a tourniquet. I again sought the assistance of bystanders who handed me jogging pants that were in the wreacked vehicle. I tied the pants as tight as I could around her upper arm, above the bleed. I knew I needed something sturdier. Thankfully, a man appeared and identified himself as an off-duty EMT. I quickly told him the situation and that we needed a tourniquet. He sacrificed his belt to make a better tourniquet. I held her hand while the EMT applied the tourniquet which was much better than my attempt. I left when EMS arrived and took the female back home via I-70 East. My unexpected trip turned out to be one of those life lessons. I witnessed a motor vehicle accident (MVA). It was a horrific roll-over accident.

The following day, I heard from the passenger’s family. They said that the first hospital didn’t think they could save her arm, but were confident another hospital had a surgeon with the necessary skills that could. That hospital had multiple-hour surgery, her arm was saved. She had over 100 internal stitches, staples and a wound vac. They told me she might not have survived due to blood loss if not for the help she received on scene.

As I shared this story, one of our former board members, Autumn Bliss, and long-time colleague, Desma Reno, told me about the “Stop the Bleed” campaign. I was intrigued.

I believe I was put in that situation for a reason. I had never planned to go to Kansas City that day. On the way home, I thought about stopping several times, but for some reason I didn’t. I stopped at the MVA, when normally I don’t. I made the conscious decision to assist and came into contact with blood while unglowed, which I normally would not do. I felt it was life or death situation.

As I reflect on that day, I saw many on the side of the road who looked distressed and upset and probably would have helped had they known to do so. Many stopped but only two of us were willing to save a life.

“Stop the Bleed” https://www.bleedathon.com is a national awareness campaign and call-to-action intended to cultivate grassroots efforts that encourage bystanders to become trained, equipped, and empowered to help in a bleeding emergency before professional help arrives. I encourage you to visit their web site to see how you can help.

We have made plans to train team members in our division. I am also working with some community partners to provide training to community members in my small hometown.

My final reflection is this experience makes me humble and proud to work with all of you that have done or still do this without blinking an eye. Thank you.
2019 Golden Awards

We are happy to announce that Golden Certificates were recently sent to 282 Registered Nurses and 46 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 fourteenth year of our Golden Award Recognition program. A list of those receiving Golden Certificates follows.

RN Maura A Smith St Charles MO
RN Patricia J Tempest St James MO
RN Mary Beth Mitchell Rolla MO
RN Cindy K Stahl O'Fallon MO
RN Jennifer L Morin Camp Point MO
RN Janet A Kight St Louis MO
RN Sharlene F Rhoades Raymore MO
RN Linda L Keneally Bolivar MO
RN Lisa M Knepper Cape Girardeau MO
RN Jennifer A Sutterman Jefferson City MO
RN Jeannine A Wright Independence MO
RN Evelyn L Wilson Norwin MO
RN Gaye V Quaranto Macon MO
RN Andrea K Smith Webster Groves MO
RN Patricia A Lough Des Peres MO
RN Mary E Hetenyi Kirkwood MO
RN Patricia K Cook Pacolet MO
RN Ursula N Shander St Louis MO
RN Carolyn R Randall Olathe KS
RN Barbara T Wiman Susannah Schwend Lieber MO
RN Mary H Brice Saint Louis MO
RN Carol A Roeder Ballwin MO
RN Emily A Frazier Columbia MO
RN Nancy A Valko Jane Flanagan MO
RN Mary A Martin Saint Louis MO
RN Mary P Burson Saint Louis MO
RN Carol E Lyon Kansas City MO
RN Patricia L Taylor Livinia M Forgue MO
RN Isa J Laury Wentzville MO
RN Jean K Feise Ballwin MO
RN Barbara J McDowell Lake St Louis MO
RN Joanne K Reuter O Fallon MO
RN Kathryn E Bresee Saint Charles MO
RN Cheryl L Spieghelalter Concordia MO
RN Cheryl J Sullins Raytown MO
RN Joyce C Dunlop Saint Charles MO
RN Bonnie C Daniels Kansas City MO
RN Gail M Brown Clinton MO
RN Valerie B Weaver Stockton MO
RN Cheryl A Felligher Kansas City MO
RN Jane B Campbell Kansas City MO
RN Linda D Tarry Lees Summit MO
RN Candace M Hofner Westphalia MO
RN Mary F Ott Chesterfield MO
RN Nora E Landaumb Marshfield MO
RN Sharlene E Rhoads Reynolds MO
RN Margaret A Ritter Kansas City MO
RN Carrie A Pike Marshall MO
RN Billie F Vardaman Leavenworth KS
RN Carol C Breshey Saint Louis MO
RN Brenda A Ganin O Fallon MO
RN Kathleen F Franklin Saint Louis MO
RN Eileen Rosenkranzer Fenton MO
RN Karl H Rohmeyser Fenton MO
RN Jean W Ray Blue Springs MO
RN Jennifer C Renner St Joseph MO
RN Patricia B Sulhwold Potosi MO
RN Meryliss J Medcildot Carthage MO
RN Leslie A Smith Grain Valley MO
RN Barbara J French Joplin MO
RN Judith L Willhite Fair Grove MO
RN Thelma J Lewis Florissant MO
RN Gail C Branstatter Louisiana MO

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TMC is an academic health system with the vital mission to provide exceptional care, without exception.
<table>
<thead>
<tr>
<th>Name</th>
<th>City</th>
<th>State</th>
<th>MO</th>
</tr>
</thead>
<tbody>
<tr>
<td>RN Dorothy J Noack</td>
<td>St. Clair</td>
<td>MO</td>
<td>RN Karen S Flavin</td>
</tr>
<tr>
<td>RN Janene W Ford</td>
<td>Henley</td>
<td>MO</td>
<td>RN Mary E Dunkel</td>
</tr>
<tr>
<td>RN Edna M Schieber</td>
<td>Wellington</td>
<td>MO</td>
<td>RN Linda P Heller</td>
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The disciplinary actions shown in this newsletter are for the time period of June 1, 2019 to August 31, 2019.

You should not use this newsletter to verify license discipline or status. Look up a license using QuickConfirm at www.murses.com to obtain current license and discipline status. If you are an employer, you should create a Nurses e-Notify® institution account at www.murses.com in order to receive real-time alerts of any license or discipline status updates.

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 335.096 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 a discipline** against any holder of any certificate of registration or authority, permit or license for violation of Chapter 335, the Nursing Practice Act.

All violations involved one or more of the following: 
- Unprofessional conduct 
- Gross negligence 
- Criminal conviction 
- Failure to maintain knowledge 

If anyone has knowledge of their whereabouts, please contact Kristi at 573-751-0082 or send an email to nursing@pr.mo.gov

Censure

Payne, Peggy Sue 
Wentzville, MO 
Registered Nurse 2003018096 
Licensee's employer noticed that Licensee completed numerous skin assessments remotely, while she was not on duty. Licensee admitted to remotely documenting the User Defined Assessments (UDAs) without laying eyes on the patients in order to help the staff catch up on their documentation. Licensee indicated that she either documented no issues because she knew from working the floor that the residents had no skin issues, or she used a resident's weekly assessment to document for the residents with skin issues. Licensee admitted that the way a UDA should be done is to lay eyes on the patient while completing the skin assessment.

Censure 08/14/2019

Creech, Donna D 
West Plains, MO 
Registered Nurse 118913 
Licensee admitted that on May 17, 2018, she called in a prescription written by Dr. K.C., identifying herself as Nurse Practitioner K.C.J and providing Ms. C.J.'s NPI number. When questioned, Licensee indicated she represented herself as Ms. C.J. in order to ensure the prescription would be filled in a timely manner. Licensee further indicated that this was not the only time she had used Ms. C.J.'s name to order a prescription. Licensee had been directed to use Ms. C.J.'s NPI number to order medications. Licensee had not been directed to pretend to be Ms. C.J when ordering medications.

Censure 07/05/2019

Gallentine, Joni Marie 
Saint Joseph, MO 
Licensed Practical Nurse 2002019950 
Licensee and the medical assistant accessed the medical records of Licensee's husband who was seeking to obtain Social Security and/or Supplemental Security Income benefits. The information for the aforementioned forms is typically completed by a provider for disability purposes. Licensee and the medical assistant accessed the MAR for her husband and altered a letter written for him in April 2017 and signed by the provider, by moving paragraphs and adding a diagnosis to correspond with language necessary to secure benefits. Licensee presented the disability documents and altered disability letter to the provider who signed both documents without realizing they were disability related.

Censure 08/15/2019

Censure

Jackson, Susan M 
Cape Girardeau, MO 
Registered Nurse 074797 
It was reported that Licensee was prescribing psychiatric medication to patient E.H. without physically seeing, assessing, or following up with the patient's guardians. Licensee indicated she did evaluate and assess E.H. prior to prescribing Zoloft. Licensee admits she did not document the evaluation, assessment, or prescribing of Zoloft, because the patient did not have insurance, and Licensee did not want her to be charged.

Censure 07/09/2019

Barrare, Rhonda D 
Peveto, MO 
Registered Nurse 143920 
On March 3, 2018, Licensee found a patient in her room nonresponsive. Despite noticing the full code status of the patient, Licensee exited the room and called the resident physician, indicating the patient had passed and requesting the doctor pronounce her. Licensee failed to call a full code prior to calling the resident for assistance.

Censure 08/10/2019

Colasanto, Christina Marie 
Saint Charles, MO 
Registered Nurse 20130088918 
On or about January 8, 2018, it was reported to hospital leadership that Licensee used profane language and spoke disrespectfully when speaking to a patient. The patient was a trauma patient who was intubated and sedated. Reportedly Licensee used foul language around a patient and at the nurse's station. Licensee admitted to lifting the patient's head by the cervical collar. Lifting a patient by the head is by the cervical collar does not follow spinal precautions. Coworkers working in the unit with the Licensee were interviewed during the investigation and verified that the Licensee used inappropriate language when speaking to the patient. Licensee was interviewed and denied directing foul language toward the patient, but admitted using foul language while at the nurse's station.

Censure 07/25/2019

Shy, Linda S 
Joplin, MO 
Registered Nurse 107664 
Licensee practiced nursing in Missouri without a license from May 1, 2017 to April 15, 2019.

Censure 07/23/2019

Moore, Lora A 
Holts Summit, MO 
Licensed Practical Nurse 054468 
The Clinical Manager conducted an audit of the medical records of patient S.M. The audit appeared to show that Licensee provided patient S.M. a prescription drug from the clinic without having a prescription from the provider. Licensee admitted to a coworker that Licensee gave her a prescription drug from the clinic without having a prescription from the provider.

Censure 07/25/2019

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

Heather Marie Frey – PN 2001022468
Chastity Ann Fry – PN 200207756
Melissa Ann Newell – RN 200407926
Chastity Ann Fry – PN 200508915
If anyone has knowledge of their whereabouts, please contact Kristi at 573-751-0082 or send an email to nursing@pr.mo.gov

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Licensee admitted that she had taken Rocephin from the clinic and administered it to her husband at her residence. Licensee was not authorized by the facility to remove the Rocephin from the facility's inventory. At the time Licensee administered the Rocephin to her husband, he did not have a valid prescription for the drug. While meeting with facility supervising staff following the audit of patient S.M., Licensee did not deny taking the Rocephin.

Censure 06/12/2019

Ammatelli, Mary C
Kansas City, MO
Licensed Practical Nurse 093334
Licensee practiced nursing in Missouri without a license from May 1, 2017 to March 26, 2019.

Censure 07/05/2019

Harter, Kelsey Marie
Pittsfield, IL
Licensed Practical Nurse 2014042537
Licensee practiced nursing in Missouri without a license from June 1, 2018 to May 15, 2019.

Censure 07/23/2019

Kennedy-Nowicki, Elizabeth Marie
Wildwood, MO
Registered Nurse 2017032068
From October 10, 2017, until the filing of the Complaint, Respondent failed to check in with NTS on eleven (11) days and failed to check in within the required timeframe on four (4) days. In addition, on two (2) occasions, November 6, 2017, and March 11, 2019, Respondent reported to a lab and submitted the required sample which showed a low creatinine reading. On November 6, 2017, the low creatinine reading was 15.0. Respondent’s creatinine reading was 18.1 for the March 11, 2019, sample. A creatinine reading below 20.0 is suspicious for a diluted sample and deemed a failed test.

Censure 07/10/2019

Dunham, Cheri L
Quincy, IL
Registered Nurse 2008028452
In or around October 2018, Licensee missed giving routinely ordered insulin. In or around December 2018, Licensee had five (5) different medication errors, varying in explanations. In January 2019, Licensee gave a resident one third of the prescribed dose of medication. In January 2019, Licensee did not follow counting procedures on seven (7) different residents. Licensee was counseled on these errors and had difficulty giving an explanation of why the errors occurred. Licensee was terminated effective January 17, 2019 due to the inability to trust her nursing services and care.

Censure 08/07/2019

Nance, Jason L
Florissant, MO
Licensed Practical Nurse 2017011444
On April 26, 2019, Respondent submitted a urine sample for random drug screening. That sample tested positive for the presence of marijuana.

Censure 07/10/2019

PROBATION

Williams, Krensa Kaye
Warsaw, MO
Licensed Practical Nurse 2017033995
On October 11, 2018, Respondent pled guilty to the class D felony of Stealing - Controlled Substance/Meth Manufacturing Material, in violation of §579.030 RSMo., in the Circuit Court of Grundy County, Missouri. Respondent’s guilty plea was the result of Respondent misappropriating Hydrocodone, possessed by her employer and owned by a patient.

Probation 07/23/2019 to 07/23/2024

Stites, Sydney Elyse
Kirkville, MO
Licensed Practical Nurse 2010033714
On January 7, 2019, Respondent pled guilty to the class E felony of Assault 3rd Degree, in violation of §565.054, RSMo., in the Circuit Court of Adair County, Missouri.

Probation 07/10/2019 to 07/10/2022

Cahn, Jolene Foy
Grandview, MO
Licensed Practical Nurse 2016004624
For several months in 2016, Respondent provided nursing services to a patient who was a minor with Down syndrome and autism. The patient had a history of self-harm by repeatedly striking his head with or against objects, including the wall. On several occasions, the patient’s mother found Respondent asleep while the patient was under her care. On November 20, 2016, the patient’s mother reported that the patient had bruising and redness on his forehead caused by repeated strikes to the head while Respondent was sleeping on duty. Respondent admitted to falling asleep during the shift.

Probation 06/25/2019 to 06/25/2020

Baig, Saima
Ballwin, MO
Registered Nurse 2013016234
On or about November 6, 2017, it was reported to hospital supervisors that Licensee was pre-charting patient assessments. An investigation showed that Licensee was documenting patient assessments before actually assessing the patients. When questioned, Licensee admitted that she was charting patient assessments prior to visiting with the patients in order to save time.

Probation 07/05/2019 to 07/06/2019

Renfro, Dustin Lee
Lincoln, MO
Licensed Practical Nurse 2016005313
On July 15, 2018, it was reported that a co-worker was witnessed diverting Solu-Cortef and giving a shot to Licensee. Licensee admitted to receiving a steroid injection from the co-worker to treat an allergic reaction.

Probation 07/05/2019 to 07/15/2019

Harrigan, Jessica Heidi
Matthews, MO
Licensed Practical Nurse 2003024504
On April 23, 2018, Respondent pled guilty to the class C felony of Introduction of Contraband in Penal Facility, in violation of T.C.A. §39-16-201, in the Circuit Court of Lake County, Tennessee.

Probation 07/23/2019 to 07/23/2024

Gibson, Douglas Chadwick
Saint Louis, MO
Registered Nurse 2006004525
On August 26, 2016, a patient in the Emergency Department reported to a nurse that seven (7) of his personal Percocet prescription tablets were missing. Licensee was not assigned to provide care to the patient; however, Licensee had had contact with the patient on or around December 2016, Licensee had had contact with the patient.

Censure 06/12/2019

PROBATION continued on page 12

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PROBATION continued on page 12
Count II

Bryant, Julie Elizabeth
Springfield, MO
Registered Nurse 1999137293

Licensee stated that a patient was causing trouble on the floor and acting out. She stated that while she was trying to contain the patient, he head-butted her. Licensee admitted that right after the patient head-butted her, she grabbed the patient by the hair and pushed his head down into his chest so that he could not spit on her or bite her. Licensee further admitted that she grabbed the patient by the hair and pushed his head down into his chest a second time to protect herself and her techs from the patient. Licensee was removed from patient care and suspended pending an investigation. Licensee acknowledged that the facility uses the Mandt System to subdue the children until they are able to be placed in time out, but she indicated she does not believe the Mandt System works. Licensee admitted that her actions toward this patient were done in anger.

Probation 07/23/2019 to 08/12/2019

Holsted, Amanda Marie
Smithville, MO
Licensed Practical Nurse 2011006464

Count I

On July 19, 2017, facility administrators received information that Respondent was recognized for administering more PRN medications than other nurses working with the same patients, and that Respondent had recorded dropping Oxycontin on two separate occasions. A coworker’s statement indicated that on July 15, 2017, Respondent contacted her asking her to get some Oxycodone for Respondent’s boyfriend. On July 16, 2017, Respondent was reported by several coworkers as exhibiting strange behavior. A coworker’s statement indicated that Respondent admitted to taking six Xanax the previous night and four so far that day. When questioned, Respondent denied admitting to taking several Xanax and instead indicated that she has a prescription for Xanax and retrieved the paperwork for the drug screen. The Director of Nursing requested Respondent to retrieve narcotics from the Cubex and requested Respondent submit to a for-a-cause drug screen. The Director of Nursing indicated Respondent stated that she would fail the drug test, as she was taking her husband’s oxycodone and hydrocodone for back pain. While the Director of Nursing was reviewing the paperwork for the drug screen, Respondent left the facility, admitted to consuming her husband’s Hydrocodone and Oxycodone without a prescription. Respondent provided a written statement to her employer admitting she had given to her husband’s oxycodone 10 mg tablets out of the Cubex and had had her husband take them for approximately two hours. She stated she thought she put them back when she was obtaining Lyrica for a patient on 400 hall.

Count III

On March 17, 2018, Respondent pled guilty to Class E Felony DWI - Persistent

Probation 06/29/2019 to 06/29/2024

Naben, Cassandra Dawn
Branson, MO
Registered Nurse 2010023143

On January 29, 2019, the Arkansas State Board of Nursing took final disciplinary action and issued a Cease and Desist Order (Order) on Respondent’s privilege to practice nursing in the state of Arkansas.

Probation 06/24/2019 to 06/24/2022

Jacob, Mindy J
Columbia, MO
Registered Nurse 2000151378

On March 13, 2018, Licensee pled guilty to the class A misdemeanor of stealing, in violation of 579.030 RSMo, in the Circuit Court of Boone County, Missouri, in case number 18BA-CR00137.

Probation 08/27/2019 to 08/27/2020

Blankenship, Stacy L
Palmera, MO
Licensed Practical Nurse 027999

Licensee practiced nursing in Missouri with an expired license from June 1, 2016 through May 16, 2019.

Probation 07/31/2019 to 07/31/2020

Ecker, Alicia Renee
Prairie Village, KS
Licensed Practical Nurse 2019038017

On October 22, 2018, the Kansas State Board of Nursing issued a Summary Order denying Applicants application for nursing licensure in Kansas. In the Summary Order, the Kansas Board found the following: An investigation by the Board revealed the applicant had had her drivers license suspended 13 times; a criminal diversion and a conviction for driving under the influence, the most recent of which was a conviction in 2017; a conviction for battery; and miscellaneous other involvements with law enforcement. On May 29, 2018, the Board referred the applicant to the Kansas Nurse Assistance Program (KNAP) for a chemical dependency evaluation and recommendations from KNAP. After a June 18, 2018 chemical dependency evaluation, the applicant was offered a monitoring contract by KNAP. On July 11, 2018, the applicant’s participation in the KNAP program was terminated after she declined to execute a monitoring contract. On August 9, 2018, the Board wrote to applicant advising her that, if she refused to execute the KNAP monitoring contract, her application would be re-considered. On the same day, the Board re-referred the applicant to KNAP. On September 4, 2018, the applicant’s participation in the KNAP program was terminated after she refused to execute a monitoring contract. The Board subsequently determined to deny the application. Applicant submitted a notarized statement to the Board that she completed the evaluation for KNAP and that she had withdrawn her application with the State of Kansas Board. The Kansas Board denied Applicant licensure for failure to complete the KNAP monitoring contract and due to her history of alcohol use. Applicant has not demonstrated that she has rehabilitated herself. Applicant has not demonstrated that she has the requisite moral character for licensure in Missouri.

Probation 08/07/2019 to 08/07/2022

Schmidt, Tessa Leigh
Lousiana, MO
Licensed Practical Nurse 2019033570

On October 23, 2012, Applicant pled guilty to the class A misdemeanor of Domestic Assault - 3rd degree, in violation of 565.074 RSMo, in the Circuit Court of Callaway County, Missouri, in case number 12CW-CR01203. On October 23, 2012, Applicant also pled guilty to count I - the class A misdemeanor of Domestic Assault - 3rd degree, in violation of 565.074 RSMo, and count II - the class A misdemeanor of Assault 3rd degree, in violation of 565.070 RSMo, in the Circuit Court of Callaway County, Missouri, in case number 12CW-CR00968. On May 21, 2015, Applicant pled guilty to the class C
Disciplinary Actions**

November, December 2019, January 2020  Missouri State Board of Nursing

Haynes, Jamileigh
Stotts City, MO
Registered Nurse
At all times relevant herein, Applicant was employed as a Graduate Nurse. On or about February 25, 2016, Applicant was assigned seven patients at the beginning of shift. Applicant documented performing physical assessments on each patient. Applicant failed to physically assess the patients or listen to lung, heart, or bowel sounds for the patients. Three patients were discharged during Applicants shift. Applicant failed to document any discharge notes for the patients. Three new patients were received during Applicants shift. Applicant failed to document any patient assessments for the new patients. Applicant admitted to management that she did not perform assessments on young and healthy-patients, but documented that she had.

Probation 08/08/2019 to 08/08/2021

Floyd, Gregory Keith
Festus, MO
Registered Nurse 2012006111
Count I
On or about January 11, 2017, it was reported to administrators that Licensee used profane language, spoke disrespectfully when speaking to a resident, and made threats in the presence of employees regarding the use of a weapon. An investigation revealed security camera footage and employee accounts that confirmed the report regarding Licensee.

Count II
On or about the evening of June 24, 2017, it was reported by various staff that a resident was yelling or screaming in an unusual manner. It was further reported by staff that Licensee had administered a Zyprexa injection to the resident in an apparent attempt to get the patient to stop screaming. The resident did not have an order for a Zyprexa injection. Administrators reviewed surveillance video, which showed Licensee drawing up an injection of Zyprexa and entering the patient's room. A later review of the patient's body indicated an injection site on the patient's thigh. When questioned by administrators regarding the aforementioned incident, Licensee began yelling and cursing at the Director of Nursing, and was ultimately escorted from the facility.

Probation 06/21/2019 to 06/21/2021

Smith, Deshawna R
Overland Park, KS
Registered Nurse 2016043350
From January 17, 2017 until the filing of the Complaint, Respondent failed to check in with NTS on six (6) days. Further, on May 24, 2018; June 22, 2018; December 21, 2018; and February 5, 2019. 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. Pursuant to the terms of Respondent’s probation, Respondent was required to obey all federal, state and local laws. On or about April 9, 2019, Respondent reported to the Board that she had a gambling addiction and had received a municipal citation for theft/shoplifting on three (3) separate occasions.


Probation 08/08/2019 to 08/08/2020

Prohaska, Amber Marie
Oak Grove, MO
Registered Nurse 2007010742
Licensee practiced nursing in Missouri without a license from May 1, 2017 through March 20, 2018. Licensee previously practiced nursing in Missouri without a license from May 1, 2017 through March 20, 2018.

Probation 08/08/2019 to 08/08/2020

Cook, Linda R
Marshall, MO
Licensed Practical Nurse 045028
On March 20, 2019, Respondent pled guilty to the class E felony of Unlawful Use of a Weapon - Subsection 4 - Exhibiting, in violation of §571.030, RSMo, in the Circuit Court of Saline County, Missouri.

Probation 06/24/2019 to 07/18/2019

Herndon, Misti Dawn
West Plains, MO
Licensed Practical Nurse 2006022248
On June 28, 2018, Licensee pled guilty to the class A misdemeanor of Theft by Receiving, in violation of A.C.A. 5-36-106, in the Circuit Court of Fulton County, Arkansas. Licensee was given a suspended imposition of sentence with 12 months of probation.

Probation 06/06/2019 to 06/06/2020

Hovis, Suzanne
Sikeston, MO
Registered Nurse 1220839
On or about February 19, 2017, Licensee, while in a patient’s room, turned the respiratory rate on a patient’s ventilator to one. Licensee did not have a physician's order to adjust the settings of the ventilator. Licensee admitted to the Board that she had adjusted the settings on the ventilator.

Probation 06/12/2019 to 06/12/2020

Newman, Ashley Nicole
Liberty, MO
Registered Nurse 2014021953
On July 23, 2018, Licensee received a verbal warning for failing to waste a narcotic and holding a controlled substance after it was pulled and not administering until several hours later. On July 30, 2018, Licensee was counseled on not being in compliance with the policy for wasting controlled substances. After the start of the night shift, it was reported that Licensee had taken an order for Percocet for a patient, then entered another room and stated that the patient did not want the Percocet and she needed to waste it. A coworker observed the waste into the sharps container and cosigned the action. Later, the coworker reported it was his belief that the tablet wasted was not the Percocet. The sharps container in question was taken down and opened and it was found to contain an empty Percocet package that had a partial oblong white tablet in it. The shape of the tablet and numbers printed on it confirmed it to be a partial Acetaminophen tablet.

Probation 07/18/2018 to 07/18/2019

**PROBATION continued on page 14**
Meyer, Tammy Gail
Portage, IN
Registered Nurse 2013039019
On January 3, 2019, the Wisconsin State Board of Nursing issued an Order Granting Limited License (Order) “In the Matter of Application for Renewal of a Registered Nursing License of Respondent” due to Respondent being convicted of misdemeanor Reckless Driving and being diagnosed with Alcohol Use Disorder - Severe as of April 20, 2018, with recommendations of long term monitoring. Probation 06/24/2019 to 07/07/2019

Turman, Samantha Lynn
Saint Clair, MO
Licensed Practical Nurse 2012038047
On December 4, 2018, Respondent pled guilty to two (2) counts of the class C Felony of Possession of Controlled Substance Except 35 Grams or Less of Marijuana. Probation 06/11/2019 to 06/11/2024

Gillett, Gina Marie
Columbia, MO
Registered Nurse 2012022948
On May 7, 2018, Respondent pled guilty to the class D Felony of Possession of Controlled Substance Except 35 Grams or Less of Marijuana. Probation 06/11/2019 to 06/11/2024

Vitale, Elizabeth C
Kansas City, MO
Registered Nurse 109188
On July 24, 2018, Respondent entered an Alford plea for the class A misdemeanor of Hindering Prosecution, in the Circuit Court of Platte County, Missouri. Probation 07/25/2018 to 07/25/2022

REVOCAITION

Walker, Alvin T
Saint Peters, MO
Licensed Practical Nurse 044721
From April 28, 2018, until the filing of the Complaint on April 9, 2019, Respondent failed to check in with NTS on five (5) days, and failed to check in within the required time window on four (4) days. Further, on May 1, 2018,...

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August 16, 2018; and December 13, 2018, Respondent checked in with 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 samples. The Board did not receive an employer evaluation or statement of unemployment by the documentation due date of February 22, 2019. The Board did not receive proof of continued support group attendance by the documentation due date of February 22, 2019.

Revoked 06/13/2019

Thomas, Sara I
Ballwin, MO
Licensed Practical Nurse 2002027077
Respondent neither completed the contract process with NTS. Respondent was advised by UPS Ground Service to attend a meeting with the Board's representative on July 17, 2018. Respondent did not attend the meeting and contact the Board to reschedule the meeting. Respondent failed to submit an employer evaluation or statement of unemployment by the quarterly due date of October 2, 2018. Respondent failed to submit to proof of regular attendance at support group meetings by the quarterly due date of October 2, 2018. Respondent failed to submit an updated chemical dependency evaluation by the due date of October 2, 2018. On November 6, 2018, Respondent pled guilty to the class D felony of driving while intoxicated in violation of §377100 RSM’s in the Circuit Court of Clinton County, Missouri, for events occurring on July 29, 2018.

Revoked 06/20/2019

Ingles, Brittany Nicole
Saint Louis, MO
Registered Nurse 153562
On or about March 2, 2019, Barnes Jewish began an investigation after an unidentified female wearing scrubs was reported tampering with approximately two or three patients’ Patient Controlled Analgesia (“PCA”) pumps and withdrawing liquid from them. A report indicated that Respondent had accessed the patients’ charts despite not being assigned to them or having any other legitimate reason to do so. The hospital further discovered that Respondent had accessed the charts of approximately 383 different patients between on or about March 1, 2017 and on or about March 3, 2017, the vast majority of whom were not under her care. Subsequently, the hospital took samples of approximately ten PCAs of patients receiving Hydromorphone, who were still in the hospital and whose charts had been accessed by Respondent. Eight different samples contained diluted concentrations of Hydromorphone. Respondent refused to submit a sample for the for-cause drug screen. Respondent admitted at the time that, if she took a drug screen, it would likely return positive for marijuana and tramadol, as she had used marijuana two days prior and had used tramadol without a prescription.

Count I

On or about March 17, 2017, hospital staff noticed respondent exhibiting abnormal behavior, including the fact that Respondent was still at the hospital five hours after her shift ended working on her charting. On or about October 1, 2017 through on or about October 17, 2017, the hospital conducted an audit of Respondent’s narcotics activity from on or about October 1, 2017 through on or about October 17, 2017, which revealed six missing wastes of morphine IVs being assigned to one patient, and three instances of Respondent dispensing narcotics when she was not clocked in, either before or after her shift start time.

Revoked 08/28/2019

Brand, Teresa L
Lebanon, MO
Registered Nurse 153562
On or about November 20, 2016, Respondent was working as a charge nurse when she asked to borrow another nurse’s medication room keys. As a charge nurse during that shift, Respondent was not responsible for distributing medications. After an extended period of time, Respondent returned the nurse’s keys. The nurse noticed that Respondent had altered the facility’s narcotic count sheet. The nurse later discovered that a card of Norco 10/325 was missing from the unit where Respondent was working. Later that day, Respondent left the facility an hour and a half prior to the end of her shift through a side exit. Respondent never returned to the facility and did not contact the facility.

Revoked 08/26/2019

Lapinski, Scott Charles
Saint Louis, MO
Registered Nurse 2007025828
From March 26, 2019 until the filing of the Complaint, Respondent failed to check in with NTS on eight (8) days, and additionally failed to check in within the required time window on three (3) days. In addition, on May 6, 2019, 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 May 6, 2019. On April 22, 2019, Respondent submitted a urine sample for random drug screening. That sample tested positive for the presence of Amphetamine and Methamphetamine. On July 10, 2019, Respondent submitted a urine sample for random drug screening. That sample tested positive for the presence of Amphetamine and Methamphetamine. On July 17, 2019, Respondent submitted a urine sample for random drug screening. That sample tested positive for the presence of Amphetamine and Methamphetamine. The Board did not receive an employer evaluation or statement of unemployment by the documentation due date of May 20, 2019. The Board did not receive the update of chemical dependency treatment evaluation by the documentation due date of May 20, 2019. Revoked 08/28/2019

Revoked 08/28/2019

McKinnell, Frederic M
Shawnee Mission, KS
Registered Nurse 132009
On January 30, 2019, the Kansas State Board of Nursing took final disciplinary action and issued a Summary Order suspending the nursing license of Respondent due to Respondent inappropriately restraining a patient, verbal abuse, and admitting to consuming Xanax for which he did not have a prescription. The Summary Order became effective as a Final Order on February 17, 2019.

Revoked 08/28/2019

Thompson, Lynda Diane
Fenton, MO
Licensed Practical Nurse 2001007338
On or about March 1, 2017, Respondent fell asleep on a patient’s computer while the patient was undergoing testing. When Respondent did wake up, Respondent was unable to walk unassisted, speak intelligently, operate a telephone, or type on a keyboard. Respondent then fell asleep again. Because Respondent was taken by ambulance to a hospital, Respondent told the facility that her behavior was due to her having taken two doses of her prescribed medication. On or about June 10, 2017, following her return from the medical leave of absence, Respondent again fell asleep multiple times while on duty. Respondent again displayed impaired behavior, including sluggishness, uncontrollable laughter, inability to walk unassisted, inability to type on her computer, and an inability to check herself out when asked to leave the facility. On or about June 12, 2017, Respondent was terminated for incompetent or inefficient work which jeopardizes a resident’s welfare and for sleeping or giving the appearance of sleeping.

Revoked 08/28/2019

REVOCATION continued on page 16

McLaughlin, Christopher Todd
Indianapolis, IN
Registered Nurse 2006006156
On March 28, 2019, the Indiana State Board of Nursing took final disciplinary action and issued Final Order Accepting Proposed Findings of Fact, Conclusions of Law, and Order (Order) indefinitely suspending the Indiana nursing license of Respondent for no less than five (5) years.

Revoked 08/28/2019

RECOMMENDATION continued on page 16

Laptopi, Scott Charles
Saint Louis, MO
Registered Nurse 2007025828
From March 26, 2019 until the filing of the Complaint, Respondent failed to check in with NTS on eight (8) days, and additionally failed to check in within the required time window on three (3) days. In addition, on May 6, 2019, 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 May 6, 2019. On April 22, 2019, Respondent submitted a urine sample for random drug screening. That sample tested positive for the presence of Amphetamine and Methamphetamine. On July 10, 2019, Respondent submitted a urine sample for random drug screening. That sample tested positive for the presence of Amphetamine and Methamphetamine. On July 17, 2019, Respondent submitted a urine sample for random drug screening. That sample tested positive for the presence of Amphetamine and Methamphetamine. The Board did not receive an employer evaluation or statement of unemployment by the documentation due date of May 20, 2019. The Board did not receive the update of chemical dependency treatment evaluation by the documentation due date of May 20, 2019. Revoked 08/28/2019

Revoked 08/28/2019

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15 Missouri State Board of Nursing
November, December 2019, January 2020
Disciplinary Actions**
### Disciplinary Actions**

**REVOCATION continued from page 15**

Fine, Kayla Rene
Kansas City, MO
Registered Nurse 2002021430
On or about June 22, 2018, it was reported to the Department Director that Respondent was very upset and they were working on getting her into a staff lounge. Upon the Department Director's arrival, Respondent appeared to be flushed and was holding her purse and car keys. Respondent was witnessed throwing these items on the table and saying, “I am so mad. I am getting out of here. I am hot. I think I will just dump this ice water on my head.” Respondent was escorted upstairs to a Behavioral Health Facility and she remained off work for approximately one week. Later on June 22, 2018, a patient reported to the Department Director that earlier that morning, Respondent had been having bizarre behavior and that he was physically assaulted by her. Specifically, the patient reported that Respondent shoved on his shoulder and pushed him around in bed and grabbed the patient’s room phone, ripped it from the wall, and slammed it down on the table. Additional behavior reported by this patient indicated he previously witnessed Respondent going through his wallet, pulling out various cards and asking the patient if it was really him on the cards. On another occasion, the same patient reported that Respondent went to obtain the patient’s medication, but returned with a toothbrush, toothpaste, and a basin. When the patient informed Respondent that he did not feel like brushing his teeth, Respondent slammed the basin on the table and said, “Brush your god damn teeth!” and left the room. The same patient also indicated that Respondent would walk out of the room, ask the patient about his religious preferences and why he had them. The patient stated Respondent would be “laughing oddly then act as if she was upset.” Respondent even advising anyone that he was leaving. Respondent reported that she knew she would be positive for methamphetamine because she had relapsed. On or about February 20, 2019, Respondent reported a drug relapse to the Board after her psychiatrist provided a mental health continuing treatment form to the Board indicating Respondent had reported a relapse the previous week. The Board did not receive evidence of continued support group attendance through the date of February 28, 2019. On October 23, 2018, Respondent did not attend the meeting and informed the Board to reschedule the meeting.

Revoked 08/26/2019

Cortez, Susie Dianne
Clarkston, MO
Licensed Practical Nurse 2004022106
On August 18, 2017, the Director of Nursing (DON) was notified that Respondent was giving a patient a double dose of the patient’s prescribed Norco. A review of the patient’s narcotic administration sheet showed that Respondent was the only nurse that administered the medication to the patient. A drug test done on August 18, 2017, for the patient was returned negative for any opioids. A further review of Respondent’s narcotic administration revealed that Respondent had signed out Hydrocodone on several occasions before her shift began. Between August 1, 2017 and August 18, 2017, Respondent signed out 63 Norco for times when she was not working in the building. An audit of the medication cart conducted by NHC administrators approximately 10:30 a.m. on August 18, 2017, showed that Respondent had signed out multiple narcotics for administration at 2:30 p.m. on August 18, 2017. When questioned about the narcotic discrepancies, Respondent denied any knowledge of the events.

Revoked 08/26/2019

Martin, Amanda Nicole
Ozark, MO
Licensed Practical Nurse 2009025997
On March 13, 2019, Respondent pled guilty to the class D misdemeanor of Unlawful Possession of Drug Paraphernalia in the Circuit Court of Christian County, Missouri. Responded was revoked on 06/26/2019

Rust-Taylor, Brandi Ily
Mountain Grove, MO
Licensed Practical Nurse 2008030415
On September 8, 2016, Respondent pled guilty to the class D felony of Possession of Controlled Substance Exceeding 35 Grams or Less of Marijuana, in violation of §195.202, RSMo., in the Circuit Court of Wright County, Missouri. Respondent was revoked on 06/24/2019

Mccall, Christy R
Bentonville, AR
Licensed Practical Nurse 2014041908
On April 8, 2019, the Illinois Division of Professional Regulation issued an order suspending the nursing license of Respondent indefinitely for a minimum of three (3) years.

Revoked 06/24/2019

Bass, Kristi Leigh
Dexter, MO
Registered Nurse 20070721904
On February 15, 2018, the Kentucky Board of Nursing took final disciplinary action and issued its Findings of Fact, Conclusions of Law, and Order suspending Respondent’s Kentucky nursing license for a minimum of two (2) years, based on Respondent testing positive for cocaine while on duty, and subsequently failing to complete the Kentucky Board’s requirement of obtaining a mental health/substance use disorder evaluation.

Revoked 06/11/2019

Baker, Danielle Christine
Bellevue, MO
Registered Nurse 2017010745
On July 9, 2017, Respondent pled guilty to the class A felony of Endangering the Welfare of a Child - 1st Degree - Death of Child - No Sexual Contact; the class E felony of Tampering with Physical Evidence in Felony Prosecution; and the class B misdemeanor of Failure to Control Concurrent and 3, 2019, Meth Manufacturing Material, in the Circuit Court of Polk County, Missouri. Respondent was sentenced to five (5) years of incarceration in the Missouri Department of Corrections. Respondent’s guilty pleas were the result of Respondent misappropriating morphine sulfate from her employer and causing the death of her juvenile son through criminal negligence.

Revoked 06/03/2019

Porter, Semaj DeAnna
Saint Louis, MO
Registered Nurse 2009033432
On August 22, 2018, Respondent was found guilty of the class C felony of Endangering the Welfare of a Child - 1st Degree.

Revoked 06/11/2019

Cook, Heather Rochelle
Battlefield, MO
Registered Nurse 2009020149
On January 3, 2019, until the filing of the Complaint on April 1, 2019, Respondent failed to check in with NTS on four (4) days, including one (1) instance in which she checked in outside the requisite time window. Respondent failed to check in with NTS on February 2 and 3, 2019, because she forgot and was having auditory hallucinations. Further, on February 14, 2019, Respondent checked in with NTS on February 2 and 3, 2019, in an attempt to provide a urine sample for screening. Respondent failed to report to a collection site to provide the requested sample. Respondent failed to test on February 14, 2019, because she knew she would be positive for methamphetamine because she had relapsed. On or about February 20, 2019, Respondent reported a drug relapse to the Board after her psychiatrist provided a mental health continuing treatment form to the Board indicating Respondent had reported a relapse the previous week. The Board did not receive evidence of continued support group attendance through the date of February 28, 2019. On October 11, 2019, Respondent reported to a collection site to provide a sample, and the sample tested positive for Ethyl Glucuronide (EG) and Ethyl Sulfate (EIS), metabolites of alcohol. When questioned by Dr. Greg Elam, Respondent admitted to drinking six (6) shots of whiskey the day before submitting her sample.

Revoked 06/20/2019

Snell, Tiffany Darlene
Saint Louis, MO
Registered Nurse 2004024370
On February 9, 2018, the Board of Nursing issued a Ratification and Order (Order) accepting the Report and Recommendation of Agency Subordinate (Report), indefinitely suspending Respondent’s privilege to practice in the state of Virginia.

Revoked 06/20/2019

Cunningham, Brad Lee
Springfield, MO
Registered Nurse 2012021945
On June 10, 2017, Respondent reported to work for his shift and received a report on the patients under his care. After approximately two (2) hours, Respondent left a post-it note saying that he quit, and then left the building without giving any report to any oncoming nurse or even advising anyone that he was leaving. Respondent absconded in patients under his care.

Revoked 06/11/2019

Johnson, Amy Michelle
Wentzville, MO
Licensed Practical Nurse 2009030283
On on or about January 3, 2019, until the filing of the Complaint, Respondent failed to check in with NTS on thirty-seven (37) days. Respondent ceased checking in with NTS on May 18, 2019. Further, on May 17, 2019, 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 May 24, 2019, 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...
SUSPENSION

Hawley, Claudia Lorenz
Dixon, MO
Registered Nurse 2010013523
Failure to comply with the requirements of the Alternative Program Non-Disciplinary Consent Agreement.
Suspension 07/23/2019

Jackson, Andrea Tatum
Sunrise Beach, MO
Licensed Practical Nurse 2013001659
Failure to comply with the requirements of the Intervention Program Non-Disciplinary Consent Agreement.
Suspension 07/10/2019

Bow, Kimberly K
Chillicothe, MO
Registered Nurse 133367
Failure to comply with the requirements of the Intervention Program Non-Disciplinary Consent Agreement.
Suspension 06/19/2019

Ellis, Shanna Christine
Jonesburg, MO
Registered Nurse 2010040868
Failure to comply with the requirements of the Intervention Program Non-Disciplinary Consent Agreement.
Suspension 06/28/2019

Atkins, Elizabeth Joyce
Olathe, KS
Registered Nurse 2012038820
Failure to comply with the requirements of the Intervention Program Non-Disciplinary Consent Agreement.
Suspension 06/27/2019

Koesterer, Mallory Rae
Wellsville, MO
Registered Nurse 2013030709
Failure to comply with the requirements of the Alternative Program Non-Disciplinary Consent Agreement.
Suspension 08/05/2019

VOLUNTARY SURRENDER

Hayes, Chris Dale
Stewartsville, MO
Registered Nurse 2016019051
It was found that Licensee had dispensed narcotics on two different occasions while working the 2 South Unit and did not chart the administration or waste of the medications.

Licensee was placed on administrative leave for possible diversion. Licensee denied the allegation of diversion but admitted to taking shortcuts while completing her charts.

On or about August 2, 2017, Licensee falsely documented lab results for a patient. On or about September 4, 2017, Licensee failed to note that a patient, who was assigned to her care, was in a rib and that her blood pressure was in the low 70s. The patient was also observed to work a continuous levophed gtt drip. Licensee turned the drip off when the bag was empty and failed to replace the bag. As a result, the patient went without the drip for approximately fifteen minutes. The patient’s physician was called and he ordered a dosage of medication for immediate administration, but Licensee failed to administer the ordered medication and another staff member ultimately started the medication for the patient.

The patient was ultimately transferred to ICU where she coded twice. Licensee was reprimanded from inpatient to a non-patient care area, but Licensee did not succeed in the non-patient area and was terminated from the facility.

Voluntary Surrender 07/23/2019

Beavers, Jennifer Christine
Union, MO
Licensed Practical Nurse 2008029358
Licensee voluntarily surrendered her license.
Voluntary Surrender 08/13/2019

Bryant, Julie Elizabeth
Springfield, MO
Registered Nurse 1999137293
Licensee voluntarily surrendered her Missouri nursing license effective August 13, 2019.
Voluntary Surrender 08/13/2019

Taylor, Michael R
Saint Louis, MO
Registered Nurse 150587
Licensee diverted Fentanyl from his employer over an approximate four-month period in 2015, while working as a physician assistant. Licensee admitted to injecting the Fentanyl in an effort to relieve his withdrawal symptoms.

On or about May 21, 2019, the patient’s mother stated she was doing shopping. Licensee asked the patient’s mother to buy her a bottle of Cinerator Whiskey and bring it back to the home, and to withdraw $20.00 in cash. Licensee gave the patient’s mother her personal debit card and corresponding PIN in order to get the whiskey and cash. Licensee used the cash to purchase leftover Vicodin prescribed for the patient after a wisdom tooth extraction from the patient’s mother. The patient’s mother sold Licensee ten (10) Vicodin pills. Licensee had the patient’s mother sign the narcotic log indicating that she had witnessed Licensee waste the remaining Vicodin pills. Licensee admitted to agency administrators that she had the patient’s mother purchase the alcohol for her and bring it back to the patient’s home. Licensee also admitted to having the patient’s mother withdraw money for Licensee.

Voluntary Surrender 07/03/2019

Watt, Michael A
Saint Louis, MO
Registered Nurse 2017025760
On or about March 6, 2016, the patient’s mother stated she was doing shopping. Licensee asked the patient’s mother to buy her a bottle of Cinerator Whiskey and bring it back to the home, and to withdraw $20.00 in cash. Licensee gave the patient’s mother her personal debit card and corresponding PIN in order to get the whiskey and cash. Licensee used the cash to purchase leftover Vicodin prescribed for the patient after a wisdom tooth extraction from the patient’s mother. The patient’s mother sold Licensee ten (10) Vicodin pills. Licensee had the patient’s mother sign the narcotic log indicating that she had witnessed Licensee waste the remaining Vicodin pills. Licensee admitted to agency administrators that she had the patient’s mother purchase the alcohol for her and bring it back to the patient’s home. Licensee also admitted to having the patient’s mother withdraw money for Licensee.

Voluntary Surrender 07/03/2019

Jarmar, Shanda Renee
Centerview, MO
Registered Nurse 2015026470
COUNT I

In September 2017, Licensee was assigned to provide in-home overnight care for patient P.H. Throughout her shifts on September 5, 2017, through September 8, 2017, Licensee exhibited inappropriate and careless behavior while caring for patient P.H., including failing to administer scheduled feedings, failing to perform and/or document care, and falling asleep on multiple occasions. On September 8, 2017, Licensee was found asleep in patient P.H.’s bed. Licensee was awakened by the patient’s father and, after being questioned by the father, admitted to consuming alcohol while on duty. When Licensee was asked to leave the patient’s home, she began banging on doors and windows and throwing her vehicle keys down the street. Licensee was removed from the scene by the Police Department.

COUNT II

On the afternoon of November 17, 2018, a resident experienced a diabetic incident. Licensee was found to be absent from the facility. Licensee was discovered asleep in the patient’s room over the weekend. Licensee is seen in the video holding his phone in his right hand and placing his left hand down his pants, appearing to rub himself. Licensee removed his pants, put his hand down his pants a second time, and repeated the movements. The patient was asleep in his crib for the duration of the incident. Licensee denied pleasuring himself and claimed he was fully clothed and did not expose himself to anyone in the home. Licensee admitted that he may have had his hand down his pants and that he may have rubbed himself a little bit.

Voluntary Surrender 07/12/2019

Gooch, Katie L
Jefferson City, MO
Registered Nurse 115581
On March 6, 2016, the patient’s mother stated she was doing shopping. Licensee asked the patient’s mother to buy her a bottle of Cinerator Whiskey and bring it back to the home, and to withdraw $20.00 in cash. Licensee gave the patient’s mother her personal debit card and corresponding PIN in order to get the whiskey and cash. Licensee used the cash to purchase leftover Vicodin prescribed for the patient after a wisdom tooth extraction from the patient’s mother. The patient’s mother sold Licensee ten (10) Vicodin pills. Licensee had the patient’s mother sign the narcotic log indicating that she had witnessed Licensee waste the remaining Vicodin pills. Licensee admitted to agency administrators that she had the patient’s mother purchase the alcohol for her and bring it back to the patient’s home. Licensee also admitted to having the patient’s mother withdraw money for Licensee.

Voluntary Surrender 07/03/2019
**Frequently Asked Questions**

Q1: I live in a noncompact state. How do I get a compact multistate license?

Only nurses who declare a compact state as their primary state of residence may be eligible for multistate license. As a resident of a noncompact state, you may apply for a license by endorsement in a compact state. Your eligibility will be limited to a single state license that is valid in that state only. As a resident of a noncompact state, you can have only one single-state license as you wish, but are not eligible for a multistate license.

Q2: Where is the compact application and what is the application fee?

Use the state board of nursing (BON) application for licensure by examination. As found on your BON’s website. Licensure fees vary by state. If your legal residence is in a state that joined the compact as of Jan. 19, 2018 (Florida, Georgia, Oklahoma, West Virginia and Wyoming), and you hold a single state license in that state, then you should complete the application for a multistate license on your BON website.

Q3: I live in a compact state and have a license. How do I know if my license is multistate? How do I get a compact license?

If your legal residence is in a state that joined the compact as of Jan. 19, 2018 (Florida, Georgia, Oklahoma, West Virginia and Wyoming), and you hold a single state license in that state, then you should complete the application for a multistate license on your board of nursing website. If your legal residence is in one of the original compact states and you hold a multistate license on July 20, 2017, you may already have a compact license due to being grandfathered. If you are unsure of your licensure status, you can check with your board of nursing website.

Q4: I have a compact license. How long can I work in another compact state?

There is no time limit. As long as you maintain legal residency in the state that issued your multistate license and you remain in good standing, you may practice in other compact states. If you were to take a job in a noncompact state, you can get a temporary license; this may enable you to work before applying for your authorization to test (ATT) and licensure. When hired in a remote state for a temporary position or commuting to a remote state from the primary state of residence (PSOR) (usually an adjacent state), employers should not require you to apply for licensure in the remote state when the nurse has already declared another state as your PSOR. PSOR is based on where you pay federal income tax, vote and/or hold a driver’s license. The remote state board of nursing cannot issue a license to a nurse who has declared another compact state as the PSOR, since the multistate license from the home state applies to both states. You have the privilege to practice in any compact state with your multistate license issued by your home state.

Q5: What if I move to another compact state?

When permanently relocating to another compact state, apply for licensure by endorsement and complete the application, which can be found on your board of nursing’s website.

Q6: My primary state of residence is a noncompact state. Is it also where I am licensed? I am applying for a license in a compact state. Do I have to give up my current license?

No, you may choose to keep and renew your current noncompact state license.

Q7: I live in a compact state where I am licensed. How do I get a license in a noncompact state?

Apply for licensure by endorsement to the board of nursing in the state where you seek a license. You may be issued a single state license valid in the state of issue. Applications can be found on that board of nursing’s website. Visit ncsbn.org for board of nursing contact information.

Q8: I am graduating from a nursing program. Can I apply for my multistate license now?

No. You must have a current license in your home state. If you do not have a multistate license and you need to change your single state license to a multistate, contact the board of nursing. They may require proof of residence as well as the driver’s license prior to issuing you a multistate license.

Q9: I am graduating from a nursing program. Can I take the NCLEX® in a different state?

The NCLEX® examination must be taken in any state convenient to you. It is not a state exam. The results will be directed to the board of nursing where you applied for your authorization to test (ATT) and licensure.

Q10: I live in a noncompact state, but own property in a compact state. Can I get a compact license?

In order to be eligible for a compact license, your declared primary state of residence must be a compact state. Primary state of residence does not pertain to owning property but rather it refers to your legal residency status. Proof of residence includes obtaining a driver’s license, registering to vote or filing federal taxes with an address in that state. These legal documents should be issued by the same state.

Q11: I have a compact license and have accepted a position in another compact state. My employer is telling me that I need to get that state’s license. Is this true?

Yes. You may start the application process prior to the move. A new compact license will not be issued until the multistate license in the new NLC state now so I can work immediately after moving?

Q12: How does the compact work for military or military spouses?

See military factsheet on our Toolkit webpage at www.ncsbn.org/nlc-toolkit.htm for additional information. For more information, visit mcoh.org or email nursecompact@mcoh.org.

Q13: Does the compact allow for nurses to practice in all states?

Nurses in eNLC states that were members of the original NLC may be grandfathered into the eNLC. Nurses who hold a multistate license on the eNLC effective date of July 19, 2015, may be grandfathered. You can check if you hold a multistate license and the states in which you have the “authority to practice” by following the above process.

Q14: Which nurses are grandfathered into the enhanced Nurse Licensure Compact (eNLC) and what does this mean?

Nurses in eNLC states that were members of the original NLC may be grandfathered into the eNLC. Nurses who hold a multistate license on the eNLC effective date of July 19, 2015, may be grandfathered. You can check if you hold a multistate license and the states in which you have the “authority to practice” by following the above process.

Q15: Why would a nurse need a multistate license?

Nurses are required to be licensed in the state where the recipient of nursing service is located. A multistate license allows the nurse to practice in any compact state within the multistate compact. Nursing is a mobile profession and nurses often move frequently. A multistate license allows nurses the flexibility to work in any compact state where they are required to practice. Nurses in noncompact states that do not belong to the compact may be grandfathered into the compact. You may choose to keep and renew your current noncompact state license.

Q16: What is the difference between a compact license and a multistate license?

There is no difference between a compact license and a multistate license. This terminology is used interchangeably to reference the Nurse Licensure Compact (NLC) license that allows a nurse to have one license, with the ability to practice in all NLC compact states.

Q17: What must I do before I move to a new state?


Q18: How does the Primary State of Residence (PSOR) mean?

For compact purposes, PSOR is not related to property ownership in a given state. It is about your legal residency status. Everyone has legal documents such as a driver’s license, voter’s card, federal income tax return, military identification, etc. Nursing includes a multistate license. If a nurse’s PSOR is a compact state, that nurse may be eligible for a multistate (compact) license. A nurse who cannot declare a primary state of residence (PSOR) is not eligible for a compact license. They may apply for a single state license in any state where they wish to practice.
**Uniform Licensure Requirements for a Multistate License**

**Requirements:**

An applicant for licensure in a state that is part of the eNLC will need to meet the following uniform licensure requirements:

1. Meets the requirements for licensure in the home state (state of residency);
2. a. Has graduated from a board-approved education program; or
   b. Has graduated from an international education program (approved by the authorized accrediting body in the applicable country and verified by an independent credentials review agency);
3. Has passed an English proficiency examination (applies to graduates of an international education program not taught in English or if English is not the individual’s native language);
4. Has passed an NCLEX-RN® or NCLEX-PN® Examination or predecessor exam;
5. Is eligible for or holds an active, unencumbered license (i.e., without active discipline);
6. Has submitted to state and federal fingerprint-based criminal background checks;
7. Has not been convicted or found guilty, or has entered into an agreed disposition, of a felony offense under applicable state or federal criminal law;
8. Has no misdemeanor convictions related to the practice of nursing (determined on a case-by-case basis);
9. Is not currently a participant in an alternative program;
10. Is required to self-disclose current participation in an alternative program; and
11. Has a valid United States Social Security number.

For more information about the eNLC, visit ncsbn.org/eNLC.

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**Change Form**

**STATE OF MISSOURI**

**DIVISION OF PROFESSIONAL REGISTRATION**

**NAME/ADDRESS CHANGE FORM**

**PERSONAL INFORMATION**

<table>
<thead>
<tr>
<th>TYPE OF LICENSE</th>
<th>NAME</th>
<th>ADDRESS</th>
<th>PHONE</th>
<th>EMAIL</th>
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**NEW INFORMATION**

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<thead>
<tr>
<th>TYPE OF CHANGE</th>
<th>NAME (LAST, FIRST, MIDDLE)</th>
<th>Mailing Address Only Required if Different Than Primary Residence Address</th>
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</thead>
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**ATTESTATION**

- I declare __________________________ as my primary state of residence effective ____________________.
- 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.

Information on the Nurse Licensure Compact can be found at www.ncsbn.org/hlc. 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. 2058 – state of legal residence certificate
- W-2 from US Government or any bureau, division or agency thereof indicating the declared state of residence.

Proof of any of the above may be requested.

- If your primary state of residence is a non-compact state, your license will be designated as a single-state license valid only in Missouri.
- If your primary state of residence is a compact state other than Missouri and you have a current multi-state license in that state, 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**

You may return the completed form to the Board office via mail, fax, or email. The Board’s contact information can be found at the top of this form.

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